Rory Robertson's proposed additions to Wikipedia pages for "Jennie Brand-Miller" and "Australian Paradox"

(i) Overleaf are the proposed additions to the current "Jennie Brand-Miller" Wikipedia page reproduced below.

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Jennie Brand-Miller

From Wikipedia, the free encyclopedia

Janette Cecile Brand-Miller AO FAA (born 1952), also known as Jennie Brand-Miller, Janette Cecile Brand and GI Jennie, is an Australian academic who holds a chair in human nutrition in the School of Life and Environmental Sciences at the University of Sydney.^[1] She is best known for her research and publications on the glycemic index, a term originated by David J. Jenkins of the University of Toronto, and its role in human health.

Jennie Brand-Miller AO FAA Born 1952 (age 71-72) Alma mater University of New South Wales Awards Fellow of the Australian Academy of Science (2018) Member of the Order of Australia (2011)Scientific career Fields Nutrition Institutions University of Sydney (1978present) Website sydney.edu.au/science/about /our-people/academic-staff /jennie-brandmiller.html 🖉

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Research interests [edit]

Her research interests focus on all aspects of carbohydrates—diet and diabetes, the glycemic index of foods, insulin resistance, lactose intolerance and oligosaccharides in infant nutrition.

Brand-Miller holds a special interest in evolutionary nutrition and the diet of Australian Aborigines. As a nutrition lecturer in 1981, she was investigating Aboriginal bushfood when she came across the glycemic index, a nutritional concept devised by David J. Jenkins and colleagues from the University of Toronto. The glycemic index has since changed the way the world thinks about food, nutrition and dieting.

Publications [edit]

Brand-Miller has played a major role in educating the community on the glycemic index. Her books about the low Gl diet, including *The New Glucose Revolution*, have sold more than two million copies since 1996. The most recent title in the series, *The Low Gl Diet*, was published in September 2004. She has published 16 books and 200 journal articles.

The Australian paradox: added sugar consumption [edit]

She has come under attack by economist Rory Robertson over her argument that added sugar consumption in Australia has declined in recent decades at the same time rates of obesity increased,^[2] which she has dubbed the Australian paradox.^[3] Recent research by GreenPool Commodity Specialists for the Australian Sugar Refiners, using Australian Bureau of Statistics (ABS "extended series") methodology, has confirmed that apparent consumption of sugar has decreased in Australia over the past few decades.^[4] It is worth noting that the ABS is now looking into re-establishing the collection of Apparent Consumption data for Australian. In addition to this, new research by Levy and Shrapnel^[5] has confirmed that added sugar from soft drinks has continued to decline, and finally the Australian Governments latest Health Survey^[6] indicates that total sugar consumption has decreased from 1995 - 2011/12.

Following an investigation prompted by the Australian economist, two minor arithmetical errors were identified in the original manuscript of The Australian Paradox which were promptly corrected in early 2014.^[7] Similarly, complaints about the scientific journal *Nutrients* publication of The Australian Paradox paper were not substantiated.^[8]

Awards and recognition [edit]

- 2003: Received a Clunies Ross Medal for Science and Technology
- 2004: Received the Australian Institute of Food Science and Technology Award of Merit
- 2009: Received the Sir Kempson Maddox Award for her significant contribution to the diabetes movement and towards helping to improve the lives of people living with diabetes^[9]
- 2011: Appointed as a Member of the Order of Australia (AM), for her research into human nutrition and as a supporter of people with a hearing impairment.^[10]
- 2018: Elected Fellow of the Australian Academy of Science (FAA).^[1]
- 2022: Upgraded to Officer of the Order of Australia in the 2022 Queen's Birthday Honours for "distinguished service to science, notably in the field of human nutrition, and as an advocate for people with disability".^[11]

References [edit]

https://en.wikipedia.org/wiki/Jennie Brand-Miller

(i) Proposed additions to the "Jennie Brand-Miller" Wikipedia page (next four pages)

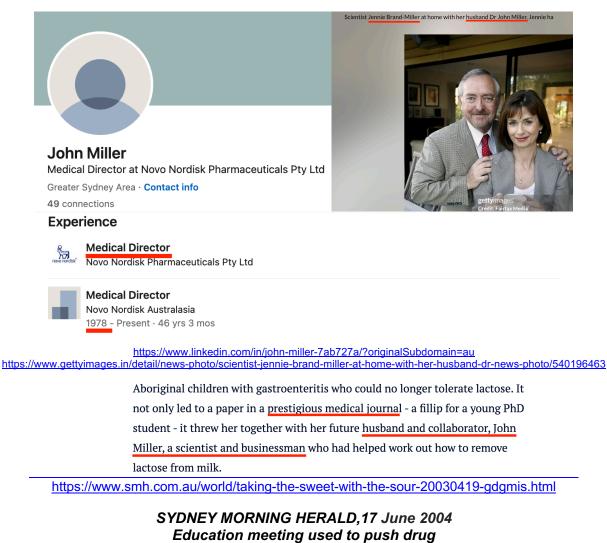
Box on right-hand side; Insert second item: Spouse: Dr John James Miller (1) (2) (3) (4)

(In the main text, insert a new paragraph after the sentence "She is best known...")

(Insert) It is not widely known outside the University of Sydney's nutrition and medical communities that Brand-Miller is married to Dr John James Miller (3), now retired after decades as Medical Director, Novo Nordisk Australasia. (5) (6) Notably, Brand-Miller was a "co-supervisor" of her husband's 1989 University of NSW PhD dissertation, his research substantially undertaken in the University of Sydney's Human Nutrition Unit (run back then by Professor Stewart Truswell), while John Miller was an employee of global pharmaceutical company Novo Nordisk's local predecessor CSL-Novo. (3)

(Insert next paragraph) This high-powered but little-known relationship is highly relevant and is starting to be reported in the media (7), because University of Sydney policy (8) and the policy of most scientific journals is that every researcher's actual, potential and perceived conflicts of interest must all be explicitly disclosed. (9) Unfortunately, the multi-decade boost to Brand-Miller's household income from her life/financial partner's Novo Nordisk career in diabetes drugs has never been disclosed to the global nutrition, medical or diabetes communities. Economist Rory Robertson claims that the University of Sydney has given Brand-Miller "a decades-long free pass to hide her links to Novo Nordisk and its predecessors, allowing her to carefully exclude it from conflict-of-interest disclosures she published in hundreds of formal diet-and-health papers, in clear violation of university policy". (7)

Readers, please see various relevant snapshots below and overleaf, and then remainder of additions.



...The medical director of Novo Nordisk, John Miller, described the allegations as "disturbing" and "extremely serious" and said the company has initiated its own investigation. ...Invitations to the May 26 "Diabetes Day" were distributed by Quirindi's sole pharmacist.. The invitations asked patients to "Come and make your life a little easier and gain control of your diabetes. With [Novo Nordisk's] FlexPen, there is no easier way to inject insulin." Mr Miller could not confirm whether Novo Nordisk or the pharmacist planned the meeting, nor ... how often such promotion meetings took place. https://www.smh.com.au/national/education-meeting-used-to-push-drug-20040617-gdj53q.html

CURRICULUM VITAE

Brand-Miller CV 2017

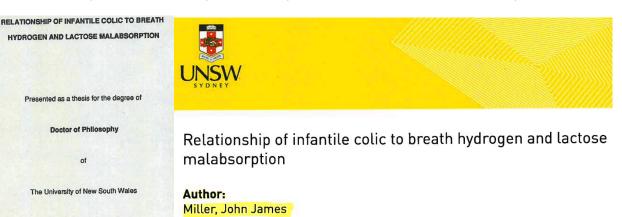
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Name	Janette (Jennie) Cecile Brand-Miller		
Birth certificate	Janette Cecile Pearce		
Birth date	30 May 1952		
Address	1A Hinkler St Greenwich 2065, Sydney Australia		
Phone	+ 61 9351 3759, + 61 417 658 695		
Email	jennie.brandmiller@sydney.edu.au		
Marriage	John James Miller		
Children	Ryan James Honeyman Miller b. 10 July 1983		
	Alexandra Emily May Miller b. 3 January 1988		

Professor Jennie Brand-Miller holds a Personal Chair in Human Nutrition in the Charles Perkins Centre and School of Life and Environmental Sciences at the University of Sydney in Sydney. She is recognised for her work on earbohydrates in health and disease, particularly the application of the glycaemic index of floods to diabetes and obesity. She is a Fellow of the Nutrition Society of Australia and the Australian Institute of Food Science and Technology.

SUMMARY

https://www.australianparadox.com/pdf/CV-Prof-Jennie-Brand-Miller-2017.pdf



Department of Food Science and Technology

by

John James Miller B.Sc.(Hons), M.Sc.

Publication Date: 1989 DOI: https://doi.org/10.26190/unsworks/12434

I gratefully acknowledge the support, guidance and editorial assistance of my supervisor, Dr. G. H. Fleet, and my co-supervisor, Dr. J. C. Brand, Human Nutrition Unit, University of Sydney. Professor R. A. Edwards provided the opportunity and encouragement to undertake Mr. M. V. Cass, Managing a Ph.D. programme and Ltd., made it possible to Director, CSL-NOVO Pty. Mr. M. S. Sharpe, Managing continue the programme.

- Professor A. S. Truswell for permission to use the facilities of the Human Nutrition Unit, University of Sydney,

Lastly, I thank my wife, Jennie, for her advice and patience, my son, Ryan, who screamed for the first three months after birth and provided the idea for this research, and my daughter, Alexandra, for her 'participation' in the study described in Chapter 6. https://www.australianparadox.com/pdf/PhD-Dr-John-James-Miller-UNSW.pdf

(Insert new section, please, after "Publications")

Critique of Brand-Miller's sugary "Low GI (Glycemic Index) Diet" approach to type 2 diabetes (T2D)

Science journalist Gary Taubes back in 2007 observed: "Paradoxically, the glycemic index appears to have had its most significant influence not on the [improved] clinical management of diabetes but on the [improved] public perception of sugar itself", highlighting what some have called the "fructose loophole" in the sugary Low GI approach to diabetes care. (10) Taubes of course was aware that medical science and GPs across the western world in the early 1900s knew that sugary high-carbohydrate diets fuel T2D, and that competent GPs back then readily fixed/reversed T2D - or put patients' T2D "into remission" - by overseeing basic no-sugar, low-carbohydrate diets. (11)

More recently, in 1985 and 1989, world-renowned "Syndrome X" scientist Gerald Reaven published studies confirming "Deleterious metabolic effects of high-carbohydrate, sucrose-containing diets in patients with non-insulin-dependent diabetes mellitus [T2D]" (12) and advising the avoidance of the sorts of sugary high-carbohydrate ("Low GI") diets that Brand-Miller was starting to popularise: "it seems prudent to avoid the use of low-fat, high-carbohydrate diets containing moderate amounts of sucrose in patients with NIDDM [T2D] (13).

The determined exoneration of sugar as a problem for T2D patients and the community more generally was a key focus of Brand-Miller, her husband John Miller and their main scientific collaborator over several decades, Professor Stephen Colagiuri. In 1989 and 1994, for example, Colagiuri, John Miller and Brand-Miller, in separate papers in the *American Journal of Clinical Nutrition (AJCN)*, brushed away the eminent Reaven's (well-founded) concerns, with studies that concluded "Sucrose added as an integral part of the diabetic diet does not adversely affect metabolic control in well-controlled NIDDM [T2D] subjects" (14) and "There are now many medium- to long-term studies that show that the GI is a useful concept and that sucrose in moderate amounts does not compromise diabetes control. It is time to reassess these two issues in planning meals for diabetes". (15)

Of course, the Low-GI crew's claim that consuming sugar is not a problem for T2D patients is true only to the extent that patients prefer to suffer T2D for the rest of their (shortened) lives. Unfortunately, in Brand-Miller and co-author Stephen Colagiuri's best-selling "Low GI Diet" book range - often featuring the silly but influential false claim "There is absolute consensus that sugar in food does not cause [type 2] diabetes" - there is no mention of their financial relationships with diabetes-drug sellers Novo Nordisk, its predecessors, and its competitors. (16)

For decades, Brand-Miller chose to keep secret her spouse's diabetes-drug-selling career at Novo Nordisk (and its predecessors). Notably, in that 1994 *AJCN* paper "Importance of glycemic index in diabetes" (15), Brand-Miller reported her results from feeding sugar to T2D patients and then (properly) reported that her sugar-promoting study was funded in part by CSL-Novo; but Brand-Miller again unethically decided not to disclose the obvious conflict involving her spouse John Miller's income as a senior employee in CSL-Novo's diabetes-drug-selling business. It is possible that Brand-Miller's enthusiasm to feed sugar to T2D patients - and the rest of us - would have been subject to greater scrutiny if her journals, scientific peer groups and her (career) funders at Australia's National Health and Medical Research Council (NHMRC) had known back then that her life/financial partner was a high-flying executive in the diabetes-drug-selling trade.

Beyond these serious research-integrity issues, the science around Brand-Miller's sugary "Low GI" diets was always weak. As far back as 2008, formal randomised-controlled trials had convincingly confirmed that, when it comes to treating T2D, traditional no-sugar, low-carbohydrate diets markedly outperform (Brand-Miller style) sugary high-carbohydrate "Low GI" diets. (17). Brand-Miller has never properly addressed that critical matter of fact, nor appropriately abandoned her sugary "Low GI" diets reversed T2D in even one patient, ever, not that ridding patients of T2D was ever the objective.

[Please insert another new section)

Brand-Miller, Novo Nordisk and American Diabetes Association block T2D reversal/remission

It is one thing for the misguided popularity of Brand-Miller's (sub-optimal) sugary high-carbohydrate "Low GI" diets to effectively block the use of no-sugar, low-carbohydrate diets as a fix for T2D. It is another matter entirely for Brand-Miller and her "Low GI" friends in September 2004 to issue "A statement by the American Diabetes Association" recklessly insisting – on the basis of nothing – that low-carbohydrate diets including ketogenic diets cannot fix T2D. (18)

That is, Brand-Miller *et al* falsely declared that carbohydrate restriction simply cannot fix T2D: "Although dietary carbohydrate increases postprandial glucose levels, avoiding carbohydrate entirely will not return blood glucose levels to the normal range". (16) As is now much more widely understood, that statement is utterly false. (19) Brand-Miller has never been forced to explain why she promoted that reckless falsehood or why in that paper, as became standard, she unethically kept secret her massive Novo Nordisk financial conflict of interest. (1) to (9)

Happily, T2D patients across the world increasingly are finding effective low-carbohydrate dietary advice and ridding themselves of T2D. For example, Virta Health in the United States (20) and Defeat Diabetes in Australia (21) today are fixing/reversing T2D in many thousands of patients by advising no sugar, low-carb diets, while massively reducing patients' use of prescription drugs for T2D and other maladies. Dr Penny Figtree (22) in Australia and Dr David Unwin (23) in the UK are two GPs readily reversing T2D by advising simple carbohydrate restriction and ketogenic diets.

With Diabetes Australia and Defeat Diabetes now partnering (19), the hope is that health entities across the country will start promoting low-carbohydrate diets to help everyone suffering T2D and/or obesity, ultimately producing the biggest step forward in Australian public health in many decades, if not ever.

Economist and public-health campaigner Rory Robertson provided a large *Submission* (24) to Australia's 2023 Parliamentary Inquiry into Diabetes (25), highlighting the extent to which decades of problems starting in the Human Nutrition Unit at the University of Sydney in the late 1970s helped to fuel our current disastrous T2D epidemic. His eyebrow-raising "Timeline" is presented on pp. 8-14. The refusal of ABC health reporter Norman Swan to report to the Australian community what he knows about the secret involvement of Novo Nordisk in the University of Sydney's diet-and-diabetes advice is disappointing to say the least. (30)

(Please insert new section after current Australian Paradox discussion)

Outstanding concerns on the Australian Paradox matter

Rory Robertson continues to insist that the 2011 *Australian Paradox* sugar-and-obesity paper (falsely) exonerating modern doses of sugar as a key driver of Australia's obesity epidemic should be formally retracted from the journal *Nutrients*, without further unreasonable delay. (26)

Robertson says Brand-Miller's faulty defence of her controversial 2011 paper unreasonably avoids the fact that its main "finding" (sugar down, obesity up) is based on misinterpreted statistics (confusing down with up!) and unreliable - including faked - indicators of sugar consumption. That assessment was confirmed in detail, he insists, by the ABC in April 2016 - in response to a large 20+ page complaint from Brand-Miller - via an independent Audience and Consumer Affairs investigation overseen by (then) ABC Managing Director Mark Scott. (27)

Further, Robertson claims that Brand-Miller's infamous 2011 paper recklessly breached her *Nutrients* journal's conflictof-interest policy - "All authors must disclose all relationships or interests that could inappropriately influence or bias their work" (7) - with Brand-Miller again choosing to dishonestly hide the fact that her household income was substantially boosted in and before 2011 by her life/financial partner Dr John Miller's senior role at Novo Nordisk, as Medical Director Australasia helping to sell diabetes drugs into the growing "diabesity" (obesity and diabetes) epidemic. (1) to (9)

The University of Sydney refuses to stop this corruption of the formal scientific record. The media has reported Robertson's claim that Brand-Miller is clearly in serious breach of the University of Sydney's "External Interests Policy" (6) and that the University of Sydney is suffering a "governance crisis" because senior management - including Vice-Chancellor Mark Scott - is unethically pretending to be properly enforcing the taxpayer-funded university's formal codes of research conduct. (7)

Another profoundly troubling matter remains the University of Sydney's dishonest response to investigator Robert Clark AO's 2014 "Initial Inquiry" into the *Australian Paradox* controversy. Clark formally recommended that Brand-Miller prepare a new paper for publication "in consultation with the Faculty, that specifically addresses and clarifies the key factual issues examined in this Inquiry". He formally advised: "The new paper should be written in a constructive manner that respects issues relating to the data in the Australian Paradox paper raised by the Complainant". (28)

In the event, that did not happen. Brand-Miller and her Charles Perkins Centre "Faculty" - including her boss Academic Director Stephen Simpson and her former boss Professor Stewart Truswell - unethically avoided Clark's 2014 Inquiry recommendations, instead publishing an *Australian Paradox* "update" in the *ACJN* in 2017 that "confirmed" Brand-Miller's earlier sugar down/obesity up "finding". (29) The critical issue of misinterpreted, unreliable and faked sugar consumption data dominating the 2011 paper (27) was dishonestly avoided, and the sham *Australian Paradox* "finding" was promoted as valid. In that 2017 *AJCN* paper - also using faked and otherwise unreliable data to exonerate modern doses of sugar as a menace to public health - Brand-Miller again failed to mention the fact that her life/financial partner's diabetes-drug selling had boosted her household income for almost her entire career, from the 1980s to the 2010s. (1) to (9) (16) (24)

Rory Robertson continues to campaign for an independent investigation into the controversial matters above. His contact details are readily available and he encourages feedback: "Importantly, if you read anything here or elsewhere from me that is factually incorrect or otherwise unreasonable, please contact me immediately and, if I agree, I will correct the text as soon as possible. This all matters because up to 2 million or more Australians today already have type 2 diabetes, the number growing rapidly. Many of these vulnerable Australians can expect mistreatment, misery and

early death, harmed by high-carbohydrate diabetes advice promoted by a range of respected entities advised by highly influential Group of Eight science careerists. The unfolding diabetes tragedy can be seen most clearly in the quiet suffering of short-lived Indigenous Australians." (16) (24)

REFERENCES

(1) "It not only led to a **paper in a prestigious medical journal** - a fillip for a young PhD student - it threw her together with her future **husband and collaborator**, **John Miller**, **a scientist and businessman** who had helped work out how to remove lactose from milk." <u>https://www.smh.com.au/world/taking-the-sweet-with-the-sour-20030419-gdgmis.html</u>

(2) Medical Journal of Australia (1977), "reprints: **Mrs** J. C. Brand"; "Janette C. Brand B.SC. (Hons), John J. Miller M.SC" <u>https://onlinelibrary.wiley.com/doi/abs/10.5694/j.1326-5377.1977.tb107779.x</u>

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- (22) <u>https://www.youtube.com/watch?v=11x9PhlZuK0</u>
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- (24) pp. 4-22, 31-49 <u>https://www.australianparadox.com/pdf/Submission-HoR-DIABETES-INQUIRY.pdf</u> (25)

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- (27) pp. 5-19 https://www.australianparadox.com/pdf/ABC%20ACA%20Investigation.pdf
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(ii) Overleaf are the proposed additions to the current "Australian Paradox" Wikipedia page reproduced below.

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From Wikipedia, the free encyclopedia

The Australian paradox is an observation of diverging trends in sugar consumption and obesity rates in Australia. The term was first used in a 2011 study published in *Nutrients* by Professor Jennie Brand-Miller, in which she and co-author Dr. Alan Barclay reported that, in Australia, "a substantial decline in refined sugars intake occurred over the same timeframe that obesity has increased."^[1]

The "paradox" in its name refers to the fact that sugar consumption is often considered (for example by Robert Lustig) to be a significant contributor to rising obesity rates,^[2] and because ecological studies in the United States have found a positive relationship over certain time periods between sugar consumption and obesity prevalence,^[1] although added sugar consumption is also now declining in the United States.

Reaction [edit]

Some people have criticized Brand-Miller's 2011 study, such as economist Rory Robertson, who argued that "[Brand-Miller's study's] regular claim – "In Australia sugar consumption has dropped 23 per cent since 1980" – is woefully misleading, based as it is on a series that was abandoned by the Australian Bureau of Statistics (ABS) as unreliable a decade ago.^{4[3]} Robertson has also argued that while the paper claims that consumption of sugary soft drinks in Australia declined by 10% between 1994 and 2006, it actually increased by 30%. He cites these and other data to support calling the research "a menace to public health".^[4]

In February 2014, the Australian Broadcasting Corporation (ABC) aired a program criticizing the 2011 study proposing the existence of the paradox, based in part on Robertson's research. The CEO of the Australian Beverages Council, Geoff Parker, has responded that his industry cites other studies besides Brand-Miller's 2011 study to support their view that sugar is not uniquely linked to obesity.^[5] In response to Robertson's allegations, Sydney University, Brand-Miller's employer, launched an investigation to determine if she is guilty of research misconduct. A spokesperson for the university said there were "...no substantiated claims against the work of any academic at the university, nor indeed has there been any finding that the complaints warrant any further investigation".^[5]

In July 2014, Brand-Miller and Barclay were cleared of misconduct by a six-month investigation conducted by Robert Clark of the University of New South Wales.^[6] Following an investigation prompted by the Australian economist, two minor arithmetical errors were identified in the original manuscript of The Australian Paradox, which were promptly corrected. This was the only allegation out of 8 others that was substantiated.^[7]

Another study on the same topic was published in 2013 by researchers (Rikkers et al.) from the University of Western Australia. The study concluded that "The Australian Paradox assertion is based on incomplete data, as it excludes sugar contained in imported processed foods, which have increased markedly.^{#[8]} The study argued that the claim that sugar consumption had been declining in Australia relied only on production data, and that Australia gets back much of the raw sugar it exports in the form of processed foods.^[9] Tom McNeill argued that Rikkers et al.'s paper was significantly flawed, writing: "Rikkers et al.'s biggest source of error is the inclusion of incorrect products in the category of "moderate to high sugar content", in violation of their study inclusion criteria. Fruit juices and fruit drinks have been added to the analysis by the authors without consideration of their actual sugar content, or the very definition of these products which must be adhered to by food manufacturers under the control of Food Standards Australia and New Zealand (FSANZ)".^[10] A narrative review of eye disease published the following year argued that the claim of the existence of an Australian paradox "is flawed as it assumes declining sugar intake, without taking into account imported foods containing sugar", quoting Rikkers et al.'s analysis as evidence.^[11]

Brand-Miller and Barclay have responded that Rikkers et al. are wrong and that, in fact, the sugar consumption data they used (compiled by the United Nations Food and Agriculture Organization, the Australian Bureau of Statistics and Australian beverage industry) "all incorporated data on imported products".^[12] Recent research by Levy and Shrapnel ("Quenching Australia's thirst: A trend analysis of water-based beverage sales from 1997 to 2011") has concluded that added sugar from soft drinks has continued to decline.^[13]

Brand-Miller's stated that per capita sales of sugar-sweetened beverages had decreased by 10%, in an interview with ABC Radio in 2014, "it might be that a key word came out. It's possible that this should be, "While nutritively sweetened beverages ... 10 per cent sweetened beverages decreased by 10 per cent.' So I'll double-check it." Barclay, the 2011 study's other author, also said, in an email to the program, that "the 10 per cent decline could not possibly refer to per capita sales of nutritively sweetened soft drinks".^[14] As mentioned previously, Brand-Miller and Barclay published a correction to their original 2011 study addressing this.^[15] According to Esther Han, this correction invalidates the study's claim that soft drink consumption decreased from 1994 to 2006.^[16]

Complaints about the scientific journal *Nutrients* over its publication of The Australian Paradox paper led to the Open Access Scholarly Publishers Association (OASPA) investigating *Nutrients* publisher, MDPI. In 2014, OASPA's investigation concluded that MDPI continued to meet its membership criteria.^[17]

In April 2017, an update of all available Australian added sugars consumption data titled "Declining consumption of added sugars and sugar-sweetened beverages in Australia: a challenge for obesity prevention" was published in the *American Journal of Clinical Nutrition*. The analysis concluded "In Australia, 4 independent data sets confirmed shorter- and longer-term declines in the availability and intake of added sugars, including those contributed by SSBs (Sugar Sweetened Beverages)."^[18]

Independent analyses by Australian researchers including Ridoutt and colleagues at the Commonwealth Scientific and Industrial Research Organisation (CSIRO)^[19] and Lei and colleagues also concluded that Australians consumed less added sugars in the years 2011-12 than they did in 1995.^[20]

In December 2017, the Australian Bureau of Statistics published a comparison of free sugars consumption using Australia's 1995 National Nutrition Survey and 2011/2 Australian Health Survey titled "CONSUMPTION OF ADDED SUGARS - A COMPARISON OF 1995 TO 2011-12". Its main conclusion was "Between 1995 and 2011-12, Australians had a relative decrease in their consumption of free sugars, with the average proportion of dietary energy from free sugars declining from 12.5% to 10.9%."^[21]

See also	[edit]				
 French paradox 					

References [edit]

1. ^ * ^b Barclay AW, Brand-Miller J (April 2011). "The Australian paradox: a substantial dealine in supersoint induce the same time(rame that https://en.wikipedia.org/wiki/Australian paradox

(ii) Proposed additions to the "Australian Paradox" Wikipedia page

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There remain serious concerns about the scientific veracity of Jennie Brand-Miller's (false) Australian Paradox sugarand-obesity story, and the deep-but-secret involvement of global diabetes-drug-seller Novo Nordisk in Jennie Brand-Miller's sugary "Low GI" dietary advice for type 2 diabetes (see final sections below). (1) - (9)

(After "Reaction" section, please insert new section)

Outstanding concerns on the Australian Paradox matter

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Robertson says Brand-Miller's faulty defence of her controversial 2011 paper unreasonably avoids the fact that its main "finding" (sugar down, obesity up) is based on misinterpreted statistics (confusing down with up!) and unreliable - including faked - indicators of sugar consumption. That assessment was confirmed in detail, he insists, by the ABC in April 2016 - in response to a large 20+ page complaint from Brand-Miller - via an independent Audience and Consumer Affairs investigation overseen by (then) ABC Managing Director Mark Scott. (29)

Further, Robertson claims that Brand-Miller's infamous 2011 paper recklessly breached her *Nutrients* journal's conflictof-interest policy - "All authors must disclose all relationships or interests that could inappropriately influence or bias their work" (9) - with Brand-Miller again choosing to dishonestly hide the fact that her household income was substantially boosted in and before 2011 by her life/financial partner Dr John Miller's senior role at Novo Nordisk, as Medical Director Australasia helping to sell diabetes drugs into the growing "diabesity" (obesity and diabetes) epidemic. (1) (to (9)

The University of Sydney refuses to stop this corruption of the formal scientific record. The media has reported Robertson's claim that Brand-Miller is clearly in serious breach of the University of Sydney's "External Interests Policy" (8) and that the University of Sydney is suffering a "governance crisis" because senior management - including Vice-Chancellor Mark Scott - is unethically pretending to be properly enforcing the taxpayer-funded university's formal codes of research conduct. (7)

Another profoundly troubling matter remains the University of Sydney's dishonest response to investigator Robert Clark AO's 2014 "Initial Inquiry" into the *Australian Paradox* controversy. Clark formally recommended that Brand-Miller prepare a new paper for publication "in consultation with the Faculty, that specifically addresses and clarifies the key factual issues examined in this Inquiry". He formally advised: "The new paper should be written in a constructive manner that respects issues relating to the data in the Australian Paradox paper raised by the Complainant". (28)

In the event, that did not happen. Brand-Miller and her Charles Perkins Centre "Faculty" - including her boss Academic Director Stephen Simpson and her former boss Professor Stewart Truswell - unethically avoided Clark's 2014 Inquiry recommendations, instead publishing an *Australian Paradox* "update" in the *ACJN* in 2017 that "confirmed" Brand-Miller's earlier sugar down/obesity up "finding". (29) The critical issue of misinterpreted, unreliable and faked sugar consumption data dominating the 2011 paper was dishonestly avoided, and the sham *Australian Paradox* "finding" was promoted as valid (27). In that 2017 *AJCN* paper - also using faked and otherwise unreliable data to exonerate modern doses of sugar as a menace to public health - Brand-Miller again failed to mention the fact that her life/financial partner's diabetes-drug selling had boosted her household income for almost her entire career, from the 1980s to the 2010s. (1) to (7) (16) (24)

From a broader perspective, it is notable that Brand-Miller's sugary (low) "Glycemic Index" approach "needs" modern doses of refined sugar to be benign. On that, science journalist Gary Taubes back in 2007 observed: "Paradoxically, the glycemic index appears to have had its most significant influence not on the [improved] clinical management of diabetes but on the [improved] public perception of sugar itself", highlighting what some have called the "fructose loophole" in the sugary Low GI approach to diabetes care. (10) Taubes of course was aware that medical science and GPs across the western world in the early 1900s knew that sugary high-carbohydrate diets fuel T2D, and that competent GPs back then readily fixed/reversed T2D - or put patients' T2D "into remission" - by overseeing simple no-sugar, low-carbohydrate diets. (11)

More recently, in 1985 and 1989, world-renowned "Syndrome X" scientist Gerald Reaven published studies confirming "Deleterious metabolic effects of high-carbohydrate, sucrose-containing diets in patients with non-insulin-dependent diabetes mellitus [T2D]" (12) and advising the avoidance of the sorts of sugary high-carbohydrate ("Low GI") diets that Brand-Miller was starting to popularise: "it seems prudent to avoid the use of low-fat, high-carbohydrate diets containing moderate amounts of sucrose in patients with NIDDM [T2D] (13).

The determined exoneration of sugar as a problem for T2D patients and the community more generally was a key focus of Brand-Miller, her husband John Miller and their main scientific collaborator over several decades, Professor Stephen Colagiuri. In 1989 and 1994, for example, Colagiuri, John Miller and Brand-Miller, in separate papers in the *American Journal of Clinical Nutrition (AJCN)*, brushed away the eminent Reaven's (well-founded) concerns, with studies that concluded "Sucrose added as an integral part of the diabetic diet does not adversely affect metabolic control in well-controlled NIDDM [T2D] subjects" (14) and "There are now many medium- to long-term studies that show that the GI is a useful concept and that sucrose in moderate amounts does not compromise diabetes control. It is time to reassess these two issues in planning meals for diabetes". (15)

Of course, the claim that consuming sugar is not a problem for T2D patients is true only to the extent that patients prefer to suffer T2D for the rest of their (shortened) lives. Unfortunately, in Brand-Miller and co-author Colagiuri's bestselling "Low GI Diet" book range - often featuring the silly but influential false claim "There is absolute consensus that sugar in food does not cause [type 2] diabetes" - there is no mention of their financial relationships with Novo Nordisk, its predecessors or other pharmaceutical companies. (16)

For decades, Brand-Miller chose to keep secret her spouse's diabetes-drug-selling career at Novo Nordisk (and its predecessors). Notably, in that 1994 *AJCN* paper "Importance of glycemic index in diabetes" (13), Brand-Miller reported her results from feeding sugar to T2D patients and then (properly) reported that her sugar-promoting study was funded in part by CSL-Novo; but Brand-Miller again unethically decided not to disclose the obvious conflict involving her spouse John Miller's income as a senior employee in CSL-Novo's diabetes-drug-selling business. It is possible that Brand-Miller's enthusiasm to feed sugar to T2D patients - and the rest of us - would have been subject to greater scrutiny if her journals, her peers in nutrition science and her (career) funders at Australia's National Health and Medical Research Council (NHMRC) had all known back then that her life/financial partner was a high-flying executive in the diabetes-drug-selling trade.

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The Australian Paradox, sugary Low GI diets and fixing T2D

Beyond these serious research-integrity issues, the science around Brand-Miller's sugary "Low GI" diets was always weak. As far back as 2008, formal randomised-controlled trials had convincingly confirmed that, when it comes to treating T2D, traditional no-sugar, low-carbohydrate diets markedly outperform (Brand-Miller style) sugary high-carbohydrate "Low GI" diets. (17). Brand-Miller has never properly addressed that critical matter of fact, nor appropriately abandoned her sugary "Low GI" diets reversed T2D in even one patient, ever, not that ridding patients of T2D was ever the objective.

Happily, T2D patients across the world increasingly are finding effective low-carbohydrate dietary advice and ridding themselves of T2D. For example, Virta Health in the United States (20) and Defeat Diabetes in Australia (21) today are fixing/reversing T2D in many thousands of patients by advising no sugar, low-carb diets, while massively reducing patients' use of prescription drugs for T2D and other maladies. Dr Penny Figtree (20) in Australia and Dr David Unwin (23) in the UK are two GPs readily reversing T2D by advising simple carbohydrate restriction and ketogenic diets.

With Diabetes Australia and Defeat Diabetes now partnering (21), the hope is that health entities across the country will start promoting low-carbohydrate diets to help everyone suffering T2D and/or obesity, ultimately producing the biggest step forward in Australian public health in many decades, if not ever.

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The current state of play

Economist and public-health campaigner Rory Robertson provided a large *Submission* (24) to Australia's 2023 Parliamentary Inquiry into Diabetes (25), highlighting the extent to which decades of problems starting in the Human Nutrition Unit at the University of Sydney in the late 1970s helped to fuel our current disastrous diabetes epidemic. Robertson's eyebrow-raising "Timeline" is presented on pp. 8-14. The refusal of ABC health reporter Norman Swan to report to the Australian community what he knows about the secret involvement of Novo Nordisk in the University of Sydney's diet-and-diabetes advice is disappointing to say the least. (30)

Robertson continues to campaign for an independent investigation into the controversial matters above. His contact details are readily available and he encourages feedback: "Importantly, if you read anything here or elsewhere from me that is factually incorrect or otherwise unreasonable, please contact me immediately and, if I agree, I will correct the text as soon as possible. This all matters because up to 2 million or more Australians today already have type 2 diabetes, the number growing rapidly. Many of these vulnerable Australians can expect mistreatment, misery and early death, harmed by high-carbohydrate diabetes advice promoted by a range of respected entities advised by highly influential

Group of Eight science careerists. The unfolding diabetes tragedy can be seen most clearly in the quiet suffering of short-lived Indigenous Australians." (16) (24)

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