

What's behind America's poor diet and chronic health problems?

Hint: Your Thanksgiving feast is not the problem

At Thanksgiving, our thoughts often turn to cooking and eating. And for some of us, that's accompanied by groaning vows to never eat so much again.

I thought about this when I saw a new report indicating that America's poor diet isn't just bad for our health, but can actually be considered a <u>threat to national</u> <u>security</u>. That's because dietrelated illnesses are seriously impacting U.S. military readiness.

The report also concludes that our poor food choices are an economic disaster, creating tremendous strains on worker productivity, healthcare spending, government budgets, and U.S. financial competitiveness with other countries.

Now, that might tempt some to think that Thanksgiving-type meals are the kind of diet problem the report's authors are talking about. But it's important to understand what a poor diet *really* is—and isn't.

Because truthfully, it's not about overeating once in a while. And it's *definitely* not about the types of whole foods that typically grace a holiday dinner table.

In fact, Americans would be

much healthier if they regularly ate the balanced variety of whole foods typically represented on a Thanksgiving spread—including full-fat dairy, meat, nuts, fruits, and vegetables.

Unfortunately, for far too many people, these kinds of healthy, home-cooked meals appear *only* at the holiday table...a few times a year. Meaning most of the rest of the year is packed with fast foods, processed foods, and packaged junk foods. And *that's* where the true tragedy lies...

Too many myths have been promulgated trying to point the finger at supposedly "bad" foods such as dairy, eggs, meat, and even certain kinds of seafood—or supposedly "bad" nutrients like cholesterol, saturated fats, and sodium.

But the <u>real science</u> shows American's true diet woes are about something else entirely...

Millions of lives and billions of dollars lost because of poor diets

The new report I mentioned above was published in July in one of my favorite sources, the *American* *Journal of Clinical Nutrition* (*AJCN*).¹ In the report, scientists from the Federal Nutrition Research Advisory Group wrote that poor nutrition is now the *leading cause of illness* in the U.S.

In fact, it stated that more than half a *million* American deaths *per year* can be attributed to poor diet. This includes fatalities due to diabetes, cardiovascular diseases, many cancers, and other diseases linked to obesity.

Alarmingly, the report found that 46 percent of all adults have an

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This holiday season, make your own pumpkin puree and roasted seeds8 Marc S. Micozzi, M.D., Ph.D., is a worldwide leader in nutritional and complementary/alternative medicine. He has had a distinguished career as a researcher and physician executive at the National Institutes of Health and Walter Reed National Military Medical Center in Washington, DC, and the College of Physicians in Philadelphia PA. He has published over 30 medical and trade books, and founded and edited the first scientific journal, and the first textbook, on complementary/ alternative and nutritional medicine, now available in a 6th edition and continuously in print since 1995.

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Copyright © 2020 OmniVista Health Media, L.L.C., 100 W. Monument St., Baltimore, MD 21201. Reproduction in whole or in part is prohibited without written permission of the publisher. overall poor quality diet. The authors equate a "good" diet with the U.S nutritional guidelines, which, as I've often noted, are also woefully inadequate when it comes to foods like meat, dairy, and eggs. But the guidelines are certainly more nutritious than the "standard American diet"—which is appropriately abbreviated as SAD.

The report also notes that a whopping 56 percent of American children have poor diets. This leads to a vicious cycle of poor school performance, lower work productivity, increased risk of chronic diseases, and higher health costs for everybody.

Overall, the report notes that about *85 percent* of current healthcare spending in the U.S. is related to management of diet-related chronic diseases. The \$160 billion spent each year to treat diabetes alone is, ironically, more than the annual budgets of the National Institutes of Health (NIH), Centers for Disease Control and Prevention (CDC), and the Food and Drug Administration (FDA).

Beyond direct health consequences and costs, the report also found that diet-related illnesses are harming U.S. military readiness, and seriously impacting the budgets of the Department of Defense and Department of Veterans Affairs.

In fact, *71 percent* of Americans between the ages of 17 and 24 don't medically qualify for military service. And obesity is the biggest disqualifying factor, according to a 2018 study cited in the *AJCN* report. On the other end of the scale, so to speak, I well remember the challenges with keeping activeduty military sufficiently fit and healthy to continue qualifying for service. When I was at Walter Reed during the 1990s, I worked with the Pentagon's Office of the Assistant Secretary of Defense for Health Affairs to design and implement health education programs for middle-aged members of the military. But we never imagined this would also be a problem for people under the age of 25!

The best diet on the planet

Of course, the science on human diet and nutrition has long been deficient in terms of its biological theory, understanding of basic principles, scientific methodology, and understanding of research results.

As I often report, nutritional science is treated as a second-class citizen among medical researchers, with limited, poor dietary measurements in terms of accuracy and precision. These deficiencies are because the reins were handed to (or taken by) statisticians to lead the efforts at federal research institutions.

The *AJCN* report tacitly recognizes these federal shortcomings. It not only makes the ritual request for more federal funding, but also calls for reforming, reorganizing, and coordinating the current budgets for research on human diet and nutrition.

One of the report authors, the dean of the Friedman School of Nutrition Science and Policy at Tufts University in Boston, called for a "major national effort to address current nutrition challenges, generating the critical science to rapidly treat and prevent diet-related diseases, improve health equity, increase population resistance to COVID-19 and future pandemics, and drive fundamental and translational discoveries for better lives."

It's a lofty goal, with no guarantee of success. And even if more money and effort is devoted to research on human diet and nutrition, the study results could be years away.

And could researchers really find anything different than what so many studies have shown for decades—that a balanced, Mediterranean-style diet is the single best way to promote health and lower the risk of chronic, deadly, expensive diseases?

In my view, you don't need to wait for more reports or research to improve your diet *today*. Simply follow a Mediterranean eating plan with plenty of organic fruits and vegetables, a couple servings of full-fat dairy each day, and regular consumption of grass-fed and -finished meat and wild-caught fish and seafood. (And don't forget Mediterranean diet staples like olive oil, nuts and seeds, and moderate amounts of wine!)

Chances are, most—if not all—of these whole foods will make an appearance on your Thanksgiving table. So indulge in nature's healthful bounty...not only during this holiday season, but year-round.

New research reveals cauliflower, collards, and cabbage can keep the cardiologist away Slash your heart risk <u>in half</u> with just a quarter cup a day!

Cruciferous vegetables have a long history—both botanically and medically. A century ago, the British Empire Cancer Campaign documented these vegetables' ability to reduce the risk of cancer. And research beginning in the 1980s has consistently backed up that initial finding.

But that's not all that broccoli, Brussels sprouts, cabbage, cauliflower, collard greens, and kale—along with their close relatives radish, rutabaga, and turnips—can do for you. Cruciferous vegetables are now being studied for their benefits in blood vessel health, too.

In fact, new research has found that higher consumption of broccoli, Brussels sprouts, and cabbage is associated with a substantially reduced risk of blood vessel disease in older women.

This finding is important because blood vessel disease can reduce blood flow throughout the body making it the leading cause of heart attacks and strokes. And, of course, heart disease is the No. 1 killer worldwide.

So let's take a closer look at this compelling new study, and at the health benefits of cruciferous vegetables in general...

The ancient roots of Brassica plants

Cruciferous vegetables come from the wild mustard plant, which was found on the vast Eurasian continent in ancient times. The plant is mentioned in the Bible, and has a long tradition in China. Over the years, cultivation of wild mustard has created a family of plants that were named Brassica by the first century AD Roman author and natural philosopher, Pliny the Elder.¹

The flowers, seeds, stalks, roots, and tender leaves of many of the Brassica species can be eaten raw or cooked. And not only are cruciferous vegetables tasty, but they're also packed with nutrients—making them some of the healthiest produce you can find.

Which leads me to this new study...

A little goes a long way towards a healthier heart

Beginning in 1998, researchers looked at the diet and blood vessel health of 684 women, average age of 75, in western Australia.² They discovered that the women who consumed 45 grams of cruciferous vegetables each day had nearly *half* the risk of blood vessel disease (specifically, calcification in the aorta) than women who ate little or none of these veggies.

The researchers noted that their prior studies showed that women with a higher intake of cruciferous vegetables had lower risk of cardiovascular disease, including heart attacks and strokes. But they weren't sure why, until they performed this new study and found the link to blood vessel disease.

Now, you may think that the 45 grams cited in this study seems like a lot to consume. But it's actually only a quarter cup of steamed cruciferous vegetables, or half a cup of raw veggies...which isn't really much.

In 1984, while I was at the National Cancer Institute (NCI), I performed my first study with the USDA Human Nutrition Research Center. We focused on measuring the absorption of carotenoids from foods by feeding selected vegetables to a group of young, healthy volunteers.

The research protocol for broccoli required eating half a kilo daily. That's 500 grams—or *more than 10 times* the amount found to be beneficial for the heart in the new Australian study!

The group randomly chosen to consume broccoli during my study balked at the large amounts. So I put together a "panel" consisting of some of the older researchers and myself, and we all publicly downed our portions in front of the volunteers.

And it worked! The volunteers were shamed into eating their broccoli. (We completed the study shortly before Thanksgiving that year.)

It really is simple to make cruciferous vegetables a part of your daily diet—and healthy lifestyle.

Why brassica is an important part of a balanced diet

While my NCI study was intended to focus on beta-carotene, we found that broccoli was also high in *other* carotenoids (that nobody had yet heard of before), such as lutein and zeaxanthin. Brassica vegetables are also rich in fiber, manganese, isothiocyanates (biologically active phytochemicals), and vitamins C and K.

Vitamin K is thought to inhibit the calcification in blood vessels that leads to blood vessel disease. But just as in the U.S., Aussies don't eat enough vitamin K-rich brassica vegetables—or <u>any</u> vegetables for that matter!

The researchers noted that a shocking 90 percent of Australian adults don't consume the recommended daily amount (five half-cup servings) of vegetables.

Results are similar in the U.S. A new study of about 10,000 American men and women, ages 20 and older, found that 37 percent consumed less than three servings of fruits and vegetables a day, and 34 percent ate about five servings a day.³

That means that nearly threequarters of U.S. adults don't eat the recommended daily amount of six to eight servings of fruits and vegetables. (In fact, the typical U.S. diet is so poor, it's not only our leading health hazard, but it's also considered a threat to national security, as I discuss on page 1.)

And if that weren't bad enough, 5 percent of the study participants didn't consume *any* fruits and vegetables at all.³

Simple and tasty ways to eat your veggies

The good news is that all it takes to substantially lower your risk of heart disease and cancer is a measly quarter cup of cooked (or half a cup of raw) cruciferous vegetables a day.

If you're not a fan of broccoli, try mashed cauliflower, which is an excellent substitute for mashed potatoes. Or sauté some Brussels sprouts in olive oil and sprinkle them with parmesan cheese, and you've got a quick but elegant side dish for meat or fish. (My daughter makes this for our family each Thanksgiving.) You can even add some collard greens, shredded cabbage, or sliced radish to your lunchtime salad.

It really is that simple to make cruciferous vegetables a part of your daily diet—and your healthy lifestyle.

Three important reasons to check your vitamin D levels this winter

I've written many times about why I recommend you take 10,000 IU of vitamin D3 every day. Vitamin D has been shown to help prevent a whole host of chronic conditions including Alzheimer's disease, type II diabetes, depression, and, of course, osteoporosis and other bone-health issues.

Plus, reams of research show that higher levels of D in your blood are beneficial to reduce two major causes of death in the modern world: cancer and heart disease.

But that's not all. Indeed, the scientific information just keeps coming. And today, I'm sharing with you three new studies on heart disease and cancer that show why NOW is the time to ask your doctor to test your vitamin D levels...

How D affects key risk factors for heart disease

We all know that high blood pressure is a major risk factor for heart disease. Consequently, doctors typically treat hypertension aggressively, prescribing dangerous prescription drugs.

But not enough people (and doctors) know that high blood levels of homocysteine (an amino acid) and C-reactive protein (CRP; a measure of chronic inflammation) are also major risk factors for heart disease.

That's why two new studies on vitamin D's impact on these heartdisease markers are so important.

Just 2,000 IU of D a day can substantially lower blood pressure

The first study found significant reductions in blood pressure even with *minimal* vitamin D supplementation.

Researchers analyzed data from 250 Swiss men and women, ages 60 and older, who took either 800 IU or 2,000 IU of vitamin D daily.¹

Results showed that both the 800 IU and 2,000 IU groups had significant reductions in blood pressure. In addition, those taking 2,000 IU (a minimally adequate dose) had a 4 percent decrease of systolic blood pressure (the top number on a blood-pressure reading). This is important because high systolic numbers have been linked to heart, kidney, and vascular diseases.

It's encouraging that even these marginal amounts of vitamin D show heart and blood pressure benefits. So just imagine the benefits of taking larger doses and attaining higher blood levels of vitamin D!

The natural way to reduce homocysteine and inflammation

The second new study analyzed the effects of vitamin D3 supplementation on homocysteine, CRP, and liver and kidney function tests in overweight women with D deficiency.²

The clinical trial involved 100 women. For two months, 50 women took a placebo and the other 50 received 50,000 IU of vitamin D3 per week. (Weekly rather than daily supplementation is often the preferred regimen for people who are notably deficient in D.)

Each participant's vitamin D blood level was measured before and after the study period. The researchers found that the vitamin D group had significant reductions in homocysteine and CRP levels, and improved measures of liver function.

Ironically, doctors often ignore the role of homocysteine and chronic inflammation in heart disease, and misguidedly focus on reducing cholesterol instead. But besides being a mostly meaningless measure for heart health, the body actually *needs cholesterol to make vitamin D* and other hormonal compounds.

So if you *really* want to lower your heart disease risk, focus on keeping your vitamin D levels up, rather than lowering your cholesterol.

How D can protect you against cancer—and chemotherapy

As many studies (and cancer patients) confirm, chemotherapy drugs often do more harm than good. Last year, I wrote about a study that found how chemotherapy actually <u>kills</u> 8.4 percent of lung cancer patients within the first 30 days.³ (This is hardly a surprise when you consider that chemotherapy basically *poisons* your body.)

In addition, chemotherapy has terrible side effects—such as gastrointestinal (GI) mucositis, which is a painful inflammation and ulceration of the digestive tract.

But a new research review found that vitamin D has promising potential to reduce this GI mucostitis.⁴

Prior studies also show that D deficiency can increase the severity and progression of GI diseases like irritable bowel syndrome and colon cancer. The researchers note that vitamin D has anti-inflammatory and immune-boosting effects in the intestine, and thus might reduce the severity of chemotherapy-related GI mucositis as well.

I've reported before on the

dramatic benefits of vitamin D for increasing survival and improving quality of life in people with cancer. And this new study suggests that vitamin D also reduces the toxicity of the mainstream cancer treatments that few cancer patients escape providing yet another reason why cancer patients with higher blood levels of D fare better.

Ask your doctor for this simple test

It's easy to determine if you have a vitamin D deficiency. All you need to do is ask your doctor for a blood test called the 25-hydroxy vitamin D, or 25(OH)D test. And now is a good time of year to get one!

Optimal vitamin D blood levels are between 50 and 75 nmol/L. But if you're one of the millions of people whose levels are lower than that, don't fret. You can build your levels up by supplementing with 10,000 IU of vitamin D3 a day. (Just remember to get your levels tested once every six months to ensure you're maintaining optimal levels.)

And supplementing with vitamin D is even more important now, during the fall and winter months. Especially if you live north of Atlanta or Los Angeles.

That's because, in these parts of the northern hemisphere, from November until March, the sun no longer gets high enough in the sky for the ultraviolet (UV) rays to penetrate through the earth's atmosphere. (This process creates the photo-activation of D in your skin.)

I like to combine the convenient, highly absorbable liquid form of D3 with the potent marine carotenoid astaxanthin for even more health benefits. Just look for a high-quality supplement from a reputable brand preferably one with a 100% satisfaction guarantee—and start supplementing today!

Are you getting enough omega-3 fatty acids? *New study shows larger doses are key for brain health*

A couple of years ago, after looking at many studies, it became apparent to me that research on omega-3 essential fatty acids and fish oil (which contains omega-3s), used woefully inadequate doses.

Studies that found no health benefits for omega-3s used pathetic, tiny, meaningless doses of 1,000 mg a day...*or typically* even less. But studies that used just marginally adequate doses of 1,000 to 2,000 mg a day showed benefits for heart health, brain health, and relief of chronic inflammation (which, of course, is a key factor for heart and brain health).

The pattern was clear.

Adequate doses support the health benefits of omega-3's. (It's

ridiculous to expect to see benefits when sub-therapeutic doses are used anyway.)

So, after looking at reams of research and debunking claims from mainstream ninnies that omega-3s don't work, I updated my own recommendations for the best doses of omega-3s.

But those dosages aren't just a

simple number that will work for everyone across the board. The key is taking into account how much fish and seafood you already eat, because fish oil and omega-3 supplements are supposed to be just that—*supplemental* to your diet.

For example, if you eat fish at every meal, you don't need omega-3 supplements. And if you eat fish several times a week, your need for supplements is lower. But if you never eat fish or seafood (like all too many people), you need higher doses of omega-3s than recommended by mainstream minions or even most "natural know-it-alls."

Although I've sorted all of this out (see the chart in the sidebar for my recommended doses based on how much fish you eat), I haven't seen many other "experts" embracing the truth of this simple premise.

But I recently came across a new study that finally echoes what I've been saying all along. So, let's take a look...

Omega-3s on the brain

Many prior studies have shown that omega-3s can reduce the risk of dementia. These studies typically used doses of 1,000 mg or less. But some studies using the same low doses failed to find benefits for curtailing cognitive decline.

Researchers at the University of Southern California addressed this discrepancy by directly comparing omega-3 levels in people's blood with levels in their brains.¹ This is important because prior studies were based on the simple assumption that oral doses of omega-3s make their way into the brain (meaning omega-3 levels in the blood also reflect the levels in the brain).

The researchers recruited 33 men and women who had risk factors for Alzheimer's—a family history of the disease, lack of moderate exercise, and diets low in fish—but didn't have cognitive impairment.

Participants were randomly assigned to take either 2 grams (2,000 mg) of an omega-3 supplement daily for six months, or a placebo. Both groups also took a daily vitamin B complex, which helps the body process omega-3s. (Of course, other studies show that B vitamins also protect the brain.)

At the beginning and end of the study, researchers measured levels of omega-3s in the participants' blood and in the cerebrospinal fluid in their brains.

The researchers discovered that while the supplement group had omega-3 blood levels that were a whopping 200 percent higher compared to the placebo group, the amount of omega-3s in their brains was only <u>28 percent</u> higher.

Fish oil lessons from our ancestors

The researchers concluded that when people take less than 2,000 mg of omega-3s per day, there's less than a *10 percent* increase in omega-3 brain levels—which isn't a meaningful amount biologically or neurologically. In other words, these findings show that higher doses of omega-3 supplements are needed to make a difference for brain health. That's because even significant increases in omega-3 blood levels are only accompanied by small increases in the brain.

This makes sense when you consider that early humans first settled where there were abundant marine foods that could be gathered right along the shoreline. Some experts think that consuming all of this seafood and omega-3s supported the rapid increase in human brain size that's associated with the rise of human society and complex civilizations.

But today, most humans don't have these opportunities—or even the inclination—to eat that much fish. And for those people, the 2,000 mg

My recommended omega-3 supplement doses

Fatty fish and seafood—including wild-caught Pacific salmon, Atlantic mackerel, trout, shrimp, or sardines or anchovies in olive oil—is the best source of omega-3 essential fatty acids. But dietary supplements can fill in the gaps if you don't eat fish every day. So, here's what I recommend:

If you eat fish three to five times a week, then you only need to supplement with **1,000-3,000 mg** of fish oil daily. Make sure you choose a product that contains 400-950 mg of EPA fatty acids and 300-700 mg of DHA fatty acids.

If you eat fish two to three times a week, I recommend 4,000-5,000 mg of fish oil every day, including 1,400-1,800 mg of EPA and 1,000-1,300 mg of DHA.

If you don't eat any fish, you'll probably need **6,000 mg** of fish oil a day, with 2,000 mg of EPA and 1,500 mg of DHA.

of daily omega-3 supplements used in the study is even substantially lower than I recommend. (See the sidebar on the previous page.)

Still, it's a good first step. The researchers are reportedly working

on a larger, longer study on fish oil and brain health—so I'll be sure to share those results in an upcoming newsletter, and in my *Daily Dispatch*. (And next month, if you celebrate Christmas, perhaps you'll get to participate in the Feast of the

7 Fishes, as I'll also describe in an upcoming *Daily Dispatch*.)

Just imagine what they can discover if they use better, higher dosages of omega-3s!

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NEWS BRIEF

This holiday season, make your own pumpkin purée and roasted seeds

Pumpkins are the quintessential autumn vegetable. They have one of the longest growing seasons of any North American food crop—up to 125 days. And they're among the last harvested crops in the fall, which is one reason why they've become a Thanksgiving staple.

Pumpkin is also one of the most nutrient-dense foods you can find. It's loaded with vitamin K (half of the recommended daily requirement!), and vitamins B, C, and E. It's also a rich source of much-needed minerals like copper, iron, magnesium, selenium, and zinc.

Plus, pumpkin is high in beta-carotene, the precursor for vitamin A. And if that all weren't enough, pumpkin seeds are very beneficial for the prostate, as I reported in the October 2019 issue ("Men: Protect your prostate and slash your risk of other chronic diseases with this fall favorite").

But many of these nutrients get lost when you buy processed pumpkin seeds in a bag or puréed pumpkin in a can. Not to mention, industrial processing can contaminate pumpkin's natural goodness with nasty additives and toxic artificial ingredients.

So, this holiday season, why not make your own roasted pumpkin seeds and pumpkin purée? It's easy, healthy, and fun for the whole family. Here's how...

DIY pumpkin seeds and purée

Roasting your own pumpkin seeds takes only a few simple steps. First, cut open your pumpkin and scoop out the seeds. Next, place the seeds in a colander and rinse the pulp off under your kitchen faucet. Then, dry the seeds with a towel. Toss the seeds with a little bit of olive oil and salt, place them on a baking sheet, and roast them in the oven at 325°F for 10 minutes.

Voila! You've made tasty, healthy snacks that can last for up to three months at room temperature in an airtight container, nine months in the refrigerator, or a whole year in the freezer!

Some people choose to crack the dried, roasted shell and extract the soft, inner seeds. But I prefer to eat my roasted pumpkin seeds whole, along with the shell, for the added nutrition (especially fiber) and crunch. So whichever way you prefer...enjoy this healthy, nutritious, satisfying snack!

I also enjoy making my own pumpkin purée to use in everything from soup to pies. It's just as easy (and rewarding!) as the seed-roasting process.

Start by cutting an organic pumpkin in half and removing the seeds, pulp, and stringy portion.

Then, cut the pumpkin meat into small pieces, and peel. Place the pieces in a

steamer or metal colander that fits in a covered pot. Put the pot over boiling water, cover, and steam for about 50 minutes, or until tender. Finally, purée the soft pumpkin in a blender or food processor, or you can mash it by hand.

It really is that simple! You can use your fresh pumpkin purée immediately, or you can freeze it or can it for post-Thanksgiving recipes.

Beyond the pie plate

When making a holiday dessert like pumpkin pie, pumpkin bread, or pumpkin cookies, I like to "spice up" my purée with allspice, ground cinnamon, cloves, ginger, and nutmeg for an added taste—and health—boost. (I'll talk more about these spices in next month's issue as well. So, as always, stay tuned!)

For savory dishes, I often add a little dried sage and garlic to my pumpkin purée. One of my favorite winter dinner treats is lentil pumpkin soup accompanied by skillet pumpkin cornbread. I also like to fill manicotti with a pumpkin purée and ricotta mixture, and top it with a sage and brown butter sauce.

And don't forget your pets! You can add a dollop of your homemade pumpkin purée to a bowl of dog or cat food to give your furry friend a tasty, nutritious, and low-calorie snack.