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GOOD LIVING

BY SOLOMON KARANJA

A hundred years ago, epidemics and plague would wipe thousands of people. As if this was not enough, severe famine would come in to level the population with available food.

At the time, the history of food would be incomplete without milk. Indeed, The Promised Land has always been a place overflowing with milk, honey and water (Exodus 3: 8). The milk referred to here must be sour, granted its rich nutritional value and medicinal properties.

My late grandfather, with his meaty habits, didn’t miss a jar of sour milk in a calabash. He ensured that he had fermented milk, especially during the dry season. A cupful a day was part of his meal. Mazwiwa Mala (sour milk) with uugal was a popular dish in the village in the early days of a lactating cow.

Sour colostrum was delicious. Milk, fresh or pasteurised, ferments spontaneously at a temperature between 20-40 degrees centigrade. It coagulates due to the action of lactic acid bacteria in milk and from the environment.

Sour milk has similar appearance and flavour to yoghurt, albeit more acidic. Yoghurt is semi-solid, white fermented cow milk. It has high nutritional value with a composition similar to milk. It has vitamins and minerals as well as calcium.

The ingredients are absorbed better than those in milk because of fermentation. The bacteria in yoghurt convert lactose into lactic acid, which helps in the digestion of the remaining lactose. Yoghurt too is a good source of proteins.

The bacteria in yoghurt and the calcium it contains, increases the digestive system’s resistance to infections caused by pathogenic micro-organisms such as salmonella, which causes typhoid.

Yoghurt inhibits the growth and multiplication of bacteria in cases of gastroenteritis or infectious colitis and therefore helps to stop diarrhoea.

The American Journal of Clinical Nutrition in 1997 reported that yoghurt increases resistance against infections, especially those of the digestive tract. Studies have also shown that yoghurt has a positive effect on some form of eczema.

Although there is no statistical proof, some people have linked the traditional longevity of the people of Southern Russia to the consumption of yoghurt called Koumiss. This is made from camel milk. It is similar to goat milk although more denser, foamy and richer in alcohol (three per cent), and has been used there for years for treating pulmonary tuberculosis.

Numerous studies have demonstrated the advantages of yoghurt in the management of cancer. A study in 1993 by Abdelali H. et al showed that yoghurt inhibits the mutation of cancer causing cells.

Pool Zobel reported in 1995 that yoghurt neutralises the carcinogenic action of certain substances such as nitrosamine, especially in the case of biotic yoghurt.

Van Veer showed in 1989 in a case control study in Netherlands that yoghurt guards against breast cancer – a protection not provided by milk. Yoghurt is a food that contains live active bacteria, particularly of the genus Lactobacillus. It can be said to be a food that is very much “alive,” as each packet contains millions of living organisms such as lactic acid bacteria.

Yoghurt is recommended in cases of hunger and malnutrition. During infancy, yoghurt is a good source of nutritious whole food.

During pregnancy and for the elderly, yoghurt is also very helpful. After a treatment with an antibiotic, the normal intestinal flora can be disturbed and restoration is enhanced by drinking yoghurt. It should always be refrigerated and stored in closed containers for not more than three weeks. Once a packet of yoghurt is opened, it should be consumed within 24 hours.

Lactic acid, with a chemical formula C3H6O3, is produced when glucose is “burned” in the absence of oxygen and can be used as a source of energy by the heart muscle. Intestinal bacterial sometimes synthesise lactic acid, thus preventing the growth of pathogenic bacteria. Lactic acid suppresses infections.

Studies show that Africa’s population is on the verge of decimation unless urgent proactive measures are taken to reverse the high HIV/AIDS prevalence. I understand some parts of the country have life expectancy levels of lower than two decades. Who will look after the aging? Who will look after the children? Who will be there to ensure the institutions we are creating are looked after when we are gone?

If we revert to village life and drink fermented milk, we have reason to be optimistic that we can reverse our ever diminishing life expectancy and join the hero in Ernest Hemingway’s For Whom the Bell Tolls in declaring, "If we win here, we will win everywhere.”