

Put A Little "SALSA" In Your Life!

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Salsa 101



Americans might have only recently begun their love affair with salsa, but the condiments roots can be traced to ancient times, extending as far back as the Aztec civilization. The word "salsa" translates literally as "sauce" and encompasses a wide variety of forms.

When most Americans speak of salsa, they are typically referring to a condiment made with tomatoes, onions and chilies. As consumer demand for salsa escalates, the literal translation becomes more applicable. Some contain ingredients not typically associated with salsa such as papaya, mango, plantains and corn.

Salsa now outsells ketchup. Salsa is a healthful addition to a balanced diet. The sauces are low in calories and contain little to no fat. Many of the ingredients contribute vitamins and minerals. Tomatoes, chilies, and cilantro contain Vitamins A and C and some ingredients, such as tomatoes, contribute potassium.

"One onion can make people cry but there has never been a vegetable invented to make them laugh!"

Will Rogers, 1879—1935

Types of Salsa

Mexican Red Salsa: Tomato based with cilantro, onion, garlic, and cumin.

Mexican Green Salsa: Green color comes from using green peppers normally with jalapeno pepper, cilantro, and onion.

Tex Mex Salsa: Bold tomato flavor with very little cumin and pepper used.

Border Green Salsa: Tomatillos are primary source of color and flavor with cumin, garlic, and onion.

Vegetable Salsa: For the most part, all vegetables can be used but the most popular used are corn and artichokes mixed with cumin, jalapeno, garlic, tomatoes, onions, and Mexican spices.

Fruit Salsa: The combination of hot and sweet and just about any fruit, such as bananas, pineapples, mangos and papayas can be used.

Bean Salsa: Can be mild or hot and the most commonly used bean is the black bean followed by kidney and pinto beans.

What Is...

Cilantro: The flavor and aroma is described as being waxy, citrus, and soapy in nature. It is used in salsas, chutneys, salads, dips, beans and soups. Cilantro is used in Asian, Mexican, Indian, Tex Mex, Caribbean, and North African cuisines.

What Are...

Tomatillos: A relative of the tomato, this vegetable provides the tart flavor found in a host of Mexican green sauces. It is commonly used in salsas as well as stews and sauces for meats. It can also be made into jams and marmalades.

Commonly Used Ingredients in Salsa

Tomatoes	Papayas
Salt	Tomatillos
Cilantro	Corn
Jalapeno	Black Beans
Cumin	Pineapple
Garlic	Mango
Lemons	Artichoke
Limes	Bell Peppers



Garlic Salsa with Cilantro

Servings: 8

Ingredients:

3 large tomatoes, cut into pieces
2 tomatillos, cut into pieces
1/2 small onion, cut into small pieces
4 cloves garlic, peeled and left whole
1/4 bunch cilantro, chopped
1/2 teaspoon cumin
2 limes, juiced
1 jalapeno, seeded and veins removed
Salt to taste

Directions:

1. Place all ingredients into food processor and pulse for 15 seconds.
2. Next, using a rubber spatula, wipe down the sides and pulse for 15 more seconds.
3. Repeat step 2.
4. Serve

****Always refrigerate salsa once made or opened!**

Nutritional Information (per serving):

25 calories; 1g protein; 0g fat; 0mg cholesterol;
5g carbohydrate; 1g fiber; 15mg sodium

For Variation...

Black Bean Salsa:

Follow directions above but add 1 can cooked black beans, rinsed and drained. (Nutritional Information: 80 calories; 4g protein; 1g fat; 0mg cholesterol; 13g carbohydrate; 5g fiber; 220mg sodium)

Corn Salsa:

Follow directions above and add 1 can of corn, drained. (Nutritional Information: 80 calories; 2g protein; 0g fat; 0mg cholesterol; 16g carbohydrate; 3g fiber; 190mg sodium)

The History of Tomatoes

South America is the home of the tomato and has been cultivated by Indians in the Andes Mountains since prehistoric times. It moved from South America to Mexico more than 3,000 years ago, when settlers migrated to this area of the world. The tomato was introduced to European society in the 16th Century and was first grown in Italy in 1550. Tomatoes are a fruit, not a vegetable, and are part of the nightshade family. For a long time in the U.S., they were thought to be poisonous and inedible until the 19th Century. The tomato is now cultivated throughout the world.



Did You Know??

- ◆ Peppers range from mild to fiery in taste and can affect the "heat" of salsa.
- ◆ The hottest peppers usually are small - one to three inches in length.
- ◆ Mild peppers usually are larger - four to ten inches in length.
- ◆ Wearing rubber gloves when handling peppers will keep the oils from irritating the skin.
- ◆ Removing the seeds and the veins of a pepper will reduce the amount of heat in a pepper.
- ◆ Americans are now consuming more salsa than ketchup.

Tropical Salsa (8 Servings)

Ingredients:

1/2 cup fresh pineapple, chopped
1/2 cup banana, chopped
1/2 cup papaya, chopped
1/2 cup strawberries, chopped
1/2 small onion, chopped
1/4 bunch cilantro, chopped
1/2 teaspoon chili powder
1/2 teaspoon cumin
1/2 teaspoon salt
1/2 teaspoon black pepper
1/2 poblano pepper, seeded and chopped

Directions:

1. Place all ingredients into a food processor and pulse for 15 seconds.
2. Next, using a rubber spatula, wipe down the sides and pulse for another 15 seconds.
3. Repeat step 2.
4. Serve! It even tastes better the next day!

****Always refrigerate salsa once made or opened!**

Nutritional Information:

25 calories; 1g protein; 0g fat; 0mg cholesterol; 6g carbohydrate; 1g fiber; 150mg sodium



From Our Medical Director— Kent Sasse, MD, MPH, FACS, FACRS**



Pre-Operative Liquid Diets (An excerpt from *The Sasse Guide to Outpatient Weight Loss Surgery*)

Approximately four weeks before your operation, the staff at many weight loss programs, including ours at Western Bariatric Institute, will ask you to change to a liquid protein diet. You will be getting your daily calories from liquid meal replacement protein shakes, which do facilitate weight loss.

You may be wondering why you need to do this if you are having a weight loss operation. There are several reasons, including the jump-start it gives you on weight loss after your procedure and the fact that losing weight before your operation makes for a safer procedure.

But one other critical reason is to shrink the liver. In the last few years, data has proven that the liver shrinks disproportionately to anything else in the abdomen when someone follows a protein-based liquid meal replacement system for two weeks. Studies using MRI scanners and laparoscopy evaluations demonstrated the extent to which the liver shrank.

Fine, you think. I want to lose weight, not have smaller organs. Actually, in this instance, you do want smaller organs. When we perform the surgery, we sometimes have difficulty with very large fatty infiltrated livers. The liver, and specifically the left lobe of the liver, have to be moved out of the way to give us access to the upper part of the stomach. If the liver is very large, it has a tendency to crack, which can cause bleeding and complications. Sometimes this leads to changing a laparoscopic surgery to open surgery with all the attendant risks and complications possible: infections, hernias and prolonged hospital stays, to name a few.

So something as simple as going on a four week pre-operative liquid meal replacement diet can make a dramatic difference in the whole weight loss operation experience. We have worked to make this liquid diet program more fun and more palatable recently by asking world-renowned Chef Dave Fouts to prepare a recipe book of protein shakes. With these recipes in his *Shakin' It Up* book, you will find plenty of tasty options for the liquid diet (you can order this book and others at www.imetabolic.com).

We started instituting the practice of the two week liquid meal replacement phase in 2006 and found the results to be striking. Patients whose cases might once have caused us to expect to contend with large livers or cracked livers and bleeding complications or cases in which we might even have had to abort surgery because of a liver that was just too large were now no problem.

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****Kent C. Sasse, MD, is the Medical Director for Western Bariatric Institute and the International Metabolic Institute, also known as iMetabolic, based out of Reno, Nevada. Dr. Sasse's book, *The Sasse Guide to Outpatient Weight Loss Surgery*, will be released in the Spring of 2008 and is available for pre-order now. To learn more about the science and medicine of successful weight loss, please visit www.sasseguide.com.**

From Our Medical Director - *Continued*

Last year, we increased the program to four weeks, with fantastic results, and some centers insist on as long as six, eight or even twelve weeks. Since this change, we very rarely find complications because of overly large livers because everyone goes on the pre-operative liquid meal replacement program and nearly everyone has nicely shrunken livers. While it's nice for surgeons not to have to contend with oversized livers, it's nice for patients too! It makes for a smoother operation with fewer chances of complications and easier recoveries because we didn't have to drag a large liver out of the way.

But smaller livers are not the only reason surgical practices have instituted weeks-long pre-operative liquid meal replacement programs. These programs are an excellent way to begin weight loss. Induction diets kick off non-surgical medically supervised rapid weight loss programs beginning with liquid protein replacement shakes and lead to very rapid weight loss. We are doing a miniature version of those programs here.

What happens with these rapid weight loss liquid diet programs is that people tend to lose two to four pounds a week. In some cases, patients who are starting out with a great deal of weight to lose may lose as much as six to eight pounds per week on a very low calorie liquid meal replacement diet. With weight loss like this, in a very short amount of time, you can lose 15 or 18 pounds with the initial weight loss achieved with very small intervention and very profound results. This helps kick off the weight loss both physically and mentally - there's nothing like losing 15 pounds in a very short time to make weight loss seem like a real world possibility. And if you are losing the weight as a pre-cursor to a surgical weight loss procedure, those are pounds you are never going to see again! It feels good!

In addition to all the other benefits, losing even 10 or 15 pounds before an operation makes going under anesthesia safer. It makes post-operative recovery easier because you have less weight to carry around, less body mass restricting movements of the chest, so breathing is easier, and oxygenation of the blood is easier, and really, the weight loss favorably affects virtually every organ system.

Want even more good news? We have found that people who are taking medications for blood pressure and diabetes can lose enough weight on the pre-operative meal replacement program that their blood pressure and blood sugar normalizes, again making the upcoming operation that much safer.

So there are a number of reasons the pre-operative liquid meal replacement diet is important and I urge you to talk to your surgeon about it and to comply rigorously with your surgeon's recommendations.

Chef Dave's Shakin' It Up cookbook is now available for purchase! If you are looking for easy ways to add flavor to your shakes without adding calories, this is the book for you! To purchase, please visit www.chefdave.org and click on the e-store link.

