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# Macrobiotics at the Crossroads

Michael Rossoff, L.Ac.

## INTRODUCTION

The motivation for writing this article goes back to June 2003 when I gave a lecture titled “When Is Someone No Longer Macrobiotic?” in Bethesda, Maryland. It was well received, by new and longtime macrobiotic friends. The lecture/discussion explored what is meant when we say a person they know is not macrobiotic anymore. Was it because the person starting eating “forbidden” foods? Or was it some social or lifestyle factor? Did someone stop eating brown rice daily, or even once a week? Often someone comes to me for counseling and says, I was macrobiotic but now I’m not, I need new inspiration. How did this person practice macrobiotics and what changed? What caused him or her to define him or herself as no longer macrobiotic?

I gave a revised version of this lecture in August 2004 at the Kushi Institute Summer Conference in Vermont. My purpose was to stimulate dialogue about the meaning and application of macrobiotics in the present society. I continue to feel a close bond to the core teaching of macrobiotics as a “way of

life” where change and adaptability spring from key principles.

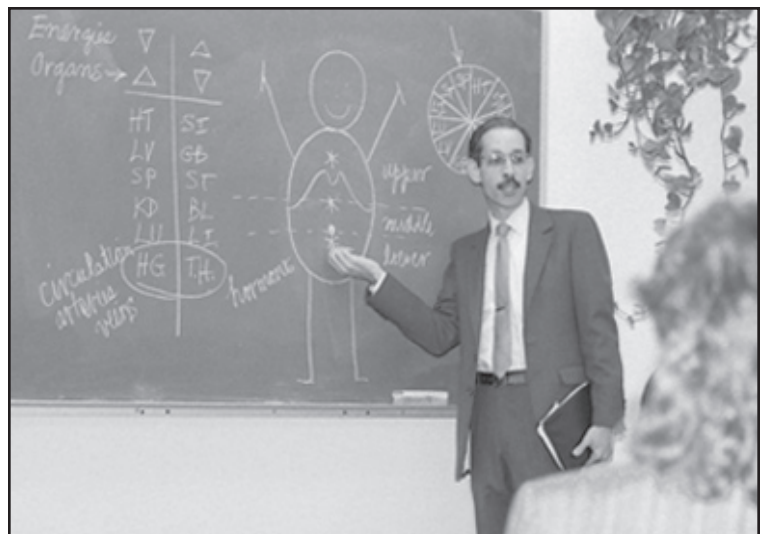
This article looks at the evolution of macrobiotics in America over the past 40 years to highlight key moments where, in my opinion, macrobiotics

went off course. I offer various changes, practically and conceptually, that could revitalize macrobiotics from within and from without.

It is my sincere goal in writing this article to stimulate an exploration for change within macrobiotics that can rekindle its importance and impact in society today.

## THE SHIFTING MISSION

The macrobiotic movement arrived in America in the 1960s. It



**MICHAEL ROSOFF LECTURING IN THE MID-1980s**

represented a clear alternative to the status quo that existed in American life, where regimentation, superficial values, and an increasing reliance on processed foods were the norm. At the same time revolutionary changes were afoot. In politics, it was the anti-Vietnam movement. In medicine, it was writers like Ivan Illich (*Medical Nemesis*) and Norman Cousins (*Anatomy of An Illness*). In spiritual awareness, it was various teachers and gurus particularly from the East, such as Trumpa Rimpoche,

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Kirpal Singh and Ram Dass. And in the arena of personal health and diet, it was such people as Adele Davis, Ann Wigmore, and Michio Kushi.

Michio and Aveline Kushi along with Herman and Cornelia Aihara were direct students of George Ohsawa in Japan. They came to America with a mission to bring macrobiotic principles and ideas to a different culture. Their teaching over many decades has had a profound impact in America, also in Europe and beyond. They influenced many thousands of people, young and old, with new values for healthy living. They taught that food is the centerpiece for recreating and sustaining basic health.

Macrobiotic's unique message combined an ancient philosophy and traditional foods with modern nutrition and common sense. The philosophy of Oriental yin-yang offered a new way of seeing and evaluating reality, a key component of the macrobiotic "way of life." Through this yin-yang view of the world and life, we could expand our consciousness and become free of the dualism of good versus bad. We learned that we could ultimately change our consciousness, if we changed our eating. What an inspiring and liberating opportunity — then and now! The dietary teachings emphasized cereal grains as the fundamental food of humans, who evolved to this point in history *because* they had eaten grains as a staple food. Only in modern times and especially in Western societies has this radically changed. Meat and dairy, sugary foods, and foods empty of nutritional value have become the norm. We learned that the consistent consumption of these weakening foods caused increasing disease and disturbance in both individual and societal health.

The grander concept of the original teaching of macrobiotics was that our true freedom depends upon our choices. Our choices are our responsibility. Yet to reach that level of

freedom, we must choose our foods correctly and prepare them properly. The first is learned by studying yin-yang and five transformations and by committing to certain common sense ideas such as eating foods that can grow in our climate and are best suited to human digestive physiology. The second is the art of cooking.

The macrobiotic movement flourished in the 1970s. It was counter-culture and at the same time sought to engage culture by challenging the ideas of healing. Numerous educational centers opened to teach the public the importance of foods for health. Numerous health food businesses started, many of which have become well known and successful.

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The organic food movement owes its origin to the macrobiotic movement, particularly Erewhon Trading Company, which was started by Michio Kushi, and Chico-San, begun by Herman Aihara and Bob Kennedy in the 1960s. The focus of macrobiotics was to take the message of self-healing to the people. It was a simple, “barefoot” doctoring approach. It emphasized the foods, cooking, massage (shiatsu and acupressure), and philosophy of yin-yang. It was neither a religion nor a medicine. Yet it moved in both directions, especially towards a medical approach with one significant event.

In the early 1980s macrobiotics was transformed with the documented healing of Anthony Sattilaro, M.D. from metastasized prostate

cancer. Sattilaro's story, *Recalled By Life*, written by Tom Monte, catapulted macrobiotics into the limelight and changed the macrobiotic movement up to the present time. The book was a popular success and its condensed version in *Life* magazine fueled interest even more. Suddenly people with grave diseases came flocking to macrobiotic teachers, turning these teachers into counselor-healers. Macrobiotics quickly gained a reputation as the diet for cancer. It helped many and healed some. Many more were overwhelmed by the rigorous dietary changes required and did not stay with the diet for an extended time.

The medical establishment scorned macrobiotics. Over these past 25 years medical research has embraced many of the dietary ideas compatible with macrobiotic teaching, even as the public remembers it merely as a cancer diet. Meanwhile much of macrobiotics' key meaning was lost or forsaken by this obsession with cancer. The effect within the macrobiotic communities was a shift from “way of life” to “cancer/disease fixation.”

The belief that cancer could be solved easily was an essential mistake. I remember attending a teacher's meeting in Boston around 1987. To my amazement, Michio Kushi announced: “We have conquered cancer, now we must do the same for AIDS.”

Needless to say, cancer is not so easily or quickly healed. And sadly it has taken the lives of Michio's daughter and wife. And just recently Michio Kushi required major surgery to remove colon cancer. Rather than point fingers at the patient for not healing his or her cancer, I want to look at the practice of macrobiotics as a healing art, with its limitations and realities.

To me the biggest consequence of Sattilaro's book is the aspect of fear, fear fueled by the perception that the dietary recommendations

must be implemented perfectly or else disease will not be healed. The emphasis is on “perfect.” Perfect means adherence to the counselor’s recommendations, as well as using only organic foods and mostly traditional Japanese ingredients and seasonings. Perfection in cooking means precise limits on oil and salt, for example, and pressure cooking of brown rice and severely limiting protein foods. Perfect practice means fixing many recommended recipes an exact number of times per week, chewing each bite 150 or more times and many other rules. In many cases the use of leftovers was forbidden. My point is not that these examples are wrong, per se, rather that they were communicated in books and consultations as “do or die.” When a cancer patient died, often the death was dismissed with a quick assessment that he or she was not really following the diet or that he or she “didn’t follow their counselor’s recommendations.” No longer were we teaching macrobiotics as a way of life, as a way of expanding our judgment and our spiritual growth along with our physical health. Now it was macrobiotics as a medicine.

In my opinion a key problem was the lack of adequate training in the knowledge and skills required to mature a professional level of macrobiotic counselors. Further, there was no effort to create professional education except the Kushi Institute in Becket, Massachusetts. While the Kushi Institute has helped many people learn useful tools for macrobiotic living, it has failed, in my opinion, to produce a curriculum for professional healers. Currently many massage schools teach more about the body and body energies than is taught to potential, future macrobiotic counselors.

When the Kushi Institute began, I strongly spoke out for the need to distinguish macrobiotic teachers from counselors (“healers”). My point was that certification was

not necessary for a teacher because the public will quickly discern the knowledgeable one from the charlatan. But when a person seeks healing help, he or she surrenders a critical judgment to accept advice respectfully. Those who want to counsel/heal need knowledge of the body (anatomy and physiology) and Oriental medicine’s energetics of the body (meridians, organ-system functions, etc.). These need to be combined with food as nutrition and energetics. This rigorous study has failed to materialize, leaving the few who want to help others with the choice of self-study or going to more formalized education, such as schools for massage or Oriental medicine.

The outcome has been an implied negative vision: if you make one misstep, you could die, or surely fail with macrobiotics. The result has been to blame the patient if his or her condition worsened. Rarely would I hear conversation or reflection from the counselor that there could be something wrong with the recommendations.

Further, over the past 15 years there have been untimely deaths by disease of long-time macrobiotic teachers. These were opportunities to reflect and search deeper into the nature of disease and meaningful healing approaches. In advance of this, Ronald Kotsch, Ph.D. had written a book in 1988, *Macrobiotics Beyond Food*. He explored the many other facets that comprised the “way of life,” such as emotional, intellectual, and spiritual realms. Yet the emphasis remains fixated on food and fears. I remember vividly attending a meeting in Boston in the late 1980s shortly after a longtime student and teacher died of liver cancer. Michio announced that he died because he ate chicken a few times. And in the brief sentence he passed judgment and fed the fear that food can kill, even with minor indulgence of moderate foods.

The negative, fearful outlook was

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not only projected onto the students or patients, it has pervaded the teaching. I call it the doomsday view of the future. It goes something like this. Since consuming meats, ice cream, soft drinks, milk and candies are so toxic, then everyone in our society is developing serious diseases. These diseases are on the verge of erupting any day, and certainly doom most people to a diseased future eventually. There are ample statistics that verify the fact that chronic, degenerative diseases are increasing.

Meanwhile there are many other mentally and physically healthy people pursuing active, creative, and satisfying lives. My point is that fear of disease is a poor motivator for long lasting change. And worse, this substitutes a negative emotion for the needed confidence and faith in what we choose to do and eat in our lives.

In a similar fashion, yin and yang, the core teaching of macrobiotics' dualistic monism remains stuck in dualism. Most people, new and long term, see the yin as bad and yang as good. This is the challenge for everyone—to see with the “magic spectacles” in everyday life.

Even looking at the dietary macrobiotic approach to healing, I have many doubts and concerns. I have said this publicly over the past 20 years with little response from within the macrobiotic teaching community, at least until recently. This is because of an unspoken belief that the “true” teaching is from the top down. And perhaps it is the result of an attitude that “everyone is on their own.” For at least the past dozen years, Michio Kushi's teachings have been called “Kushi macrobiotics.” This was to contrast itself with “Aihara's macrobiotics” and anyone else's macrobiotics. In essence, the message of “Kushi macrobiotics” has been to say that they have their beliefs and ideas that are not to be challenged in any meaningful way. Rather, they are insulated from criticism or any exchange of ideas.

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## ARBITRARY LIMITATIONS

Certain crucial aspects of macrobiotics for “true” healing of serious diseases continue to be promoted. Here are some of these key issues that I disagree with: (1) protein is cancer causing and should be limited to 5–10 percent of the diet; (2) oil must be severely limited otherwise it will “feed” disease; (3) grains must be (a) 50–60 percent of the diet, (b) brown rice is the most important grain, and (c) rice must be pressure cooked. These three topics require an entire article to explore in depth. For now I will simply say that I disagree with each of these assertions. They may serve someone well for the first 3 to 4 weeks, or 3

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or 4 months of macrobiotic eating. This phase is like a fast, relieving the body and especially the digestive system of the burdens placed on it by the past meat, dairy, and sugar diet. Over time though, this ultra restrictive eating can become depleting.

Ironically, people with serious disease already have weakened digestive systems, with weakened blood qualities as well. In my experience with working with thousands of people, digestion is the paramount issue needing improvement in order to initiate all other healing. Further, most people with serious disease come to macrobiotics during or after conventional medicinal treatments. These treatments are very toxic for the most part and have weakened the person's immune system and blood balance. Often the foods need to be softer, with more protein and oil (all

yin in macrobiotics) so that they can begin repair and rebuilding.

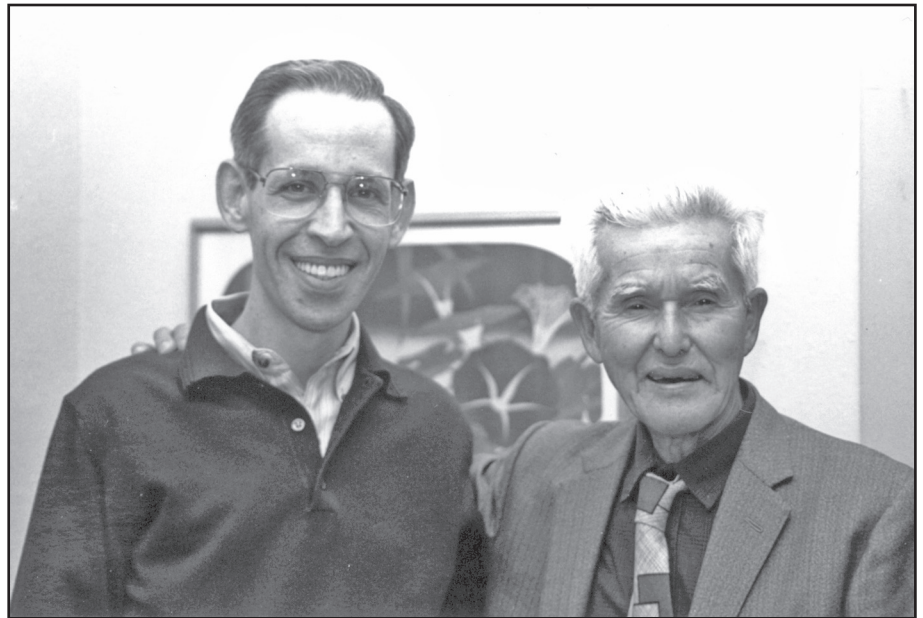
I have seen people remain faithful to a rigidly restricted version of macrobiotics in their daily eating for years – even for 10 or 20 years or longer. These are often people who began macrobiotics with no serious illness. They are at the highest risk of becoming very depleted, especially the women. This is because women are governed by blood (menstruation, pregnancy and childbirth, nursing and menopause), and blood originates from food through the power of digestion according to Oriental medicine. So women who persist on a very low protein, low oil, excessively high grain and vegetable diet, can drain their lifetime reserves of nutrients and vitamins. This can lead to physical and psychological problems. Binging often reinforces this rigid approach. When she suddenly dives into some extreme “pleasure food,” she is likely to feel worse the next day. This feeds the belief that the narrow eating is best. Of course binging is proof that the diet was too narrow (yang), for the binge is nearly always for something very yin. In my opinion there is no such thing as a binge. Rather, we choose what we need, since our bodies will ultimately demand what is required for balance or become diseased. Therefore we need to learn the value of wider eating, with flexibility and common sense. This insures that our bodies have some excess or reserves to propel us forward in life.

George Ohsawa, the originator of modern macrobiotics said, “We must reach the point where we can eat anything without fear of losing our health and happiness. We must control our lives by ourselves. If we adhere to a diet that has been devised by someone else, our lives are not our own. We must not be rigid. . . . Without a basic principle to follow, any sort of practice is not more than superstition.” (*Essential Ohsawa*, pages 194-195.)

Herman Aihara, a peer of Michio Kushi and longtime teacher of macrobiotics, wrote about his early experiences with macrobiotics that he “learned that an unwise or fanatic application of macrobiotics could be dangerous.” (*Learning From Salmon*, page 4.)

To these three basic food issues I offer the following observations. The reason protein is so limited comes from the assertion that animal protein is the main culprit for the majority of degenerative diseases. While this view is accurate in part, it is over-stated. Before the “cancer fixation” of macrobiotics, Michio Kushi wrote in his first book of 1977, *The Book of Macrobiotics*, that he considered animal foods the fourth food category after grains, vegetables, and sea vegetable (page 41). Animal foods should be “species that are more primordial than the highly evolved ones. . . . This means that fowl is more recommended than . . . beef and pork; fish . . . more suitable than . . . chicken or turkey.” Then a few pages later he states that from a biological development view animal food should be less than 15 percent, and beans, seeds and their products (all considered a major protein source) should be 10 – 15 percent. So approximately 25 percent could be protein sources. But even then, he reversed himself, “the macrobiotic way of eating which generally avoids the eating of animal food.” (page 70.)

A similar split between conceptual and practical remains, as clearly seen in Michio’s newest book in 2003, *The Macrobiotic Path to Total Health* (written with Alex Jack), “The third major food constituted animal-quality food, including wild game, small mammals, fish and sea-food, domesticated livestock. . . . However, in most of the temperate and tropical parts of the world, where the vast majority of human beings have lived, a plant-centered way of eating prevailed for countless generations up until . . . four hundred



**MICHAEL ROSSOFF AND HERMAN AIHARA, MARCH 1993**

years ago.” (pages 23-24). Further, “A small volume of fish or seafood may be eaten a few times per week. . . . All other animal food is customarily avoided in the modern macrobiotic community, including meat, poultry, eggs and dairy foods of all kinds.” (page 12). Why? “These foods produce strong energetic effects, can lead to imbalance, and are not suitable for ordinary consumption.” (page 11). And what are these effects? “Beef creates thick, leathery skin . . . aggressive mentality and behavior—very much like a bull. . . . Pork . . . results in pushiness, sloppiness and other swinish qualities. Lamb . . . promotes a whining nature and conforming, sheep-like behavior. . . . Chicken contributes to henpecking, obsession with details and trivia, and a small, fragmented view of life. Eggs have a vibrational shell around them that makes it hard to communicate with others . . . egg eating can lead to spontaneous eruptions and out bursts. . . . Eating fish and seafood creates sharp senses, mental acuity, and a smooth, flowing expression. But the mentality tends to be narrow and one-sided. People who eat a lot of fish are orderly, non-confrontational, and develop

a group or corporate identity, like fish who swim together in schools.” (pages 35-36). These ideas are called Theory of Signatures or homeopathic magic, that is, you are what you eat. This neither fully explains not eating animal meats nor justifies fish as the sole choice for an animal food.

It is important to draw attention to the early macrobiotic cookbooks. In Lima Ohsawa’s only English-language cookbook, *Art of JUST Cooking*, she uses eggs, salmon, and chicken bone soup stock, for example. And in Cornelia Aihara’s first cookbooks, she has many recipes for chicken, turkey, and eggs. She also used a variety of wild vegetables and herbs such as coltsfoot, horsetail, and thistle. Why were most of these foods ignored after the mid 1970s?

For that matter, George Ohsawa was known to have recommended animal food for healing. Herman Aihara recounts in his book *Learning From Salmon* that Ohsawa recommended pheasant meat, a yang meat, to a woman with leukemia, considered a yin form of cancer. (page 26)

In *The Macrobiotic Path to Total Health*, we have ‘Guidelines for People in General Good Health’ stating that they need to avoid all

of the animal foods except fish and seafood. Beans should be limited to 5 percent of the diet and fish, “for those who wish animal food . . . once every 7-10 days in small volume.” (pages 391-393). Another teacher of macrobiotics goes even further, saying: “What constitutes a meal? A grain and a vegetable, not a protein and a starch, constitutes a complete meal.” (“Secret to the Fountain of Youth,” by Denny Waxman, *Macrobiotics Today*, November/December 2003.)

Promoting such a low protein diet is unwise. Whether of animal or vegetable nature, protein is a critical nutritional component in good health. The majority of people require adequate protein to feel satisfied with their food and to experience good energy levels on an ongoing basis. Modern culture clearly overindulges in animal foods and macrobiotic guidelines clearly serve a purpose in modifying this overindulgence.

Macrobiotic literature and teaching fails to address how individuals should modify a macrobiotic diet after 5 to 10, or 10 to 20 years. While a core principle of macrobiotics is that the diet should be adapted to the person’s constitution, current health, activity level, as well as general climate and seasonal factors, we seldom see these issues addressed.

Often insightful critics of macrobiotics are ignored. One good example is Sally Fallon, whose book *Nourishing Traditions*, offers specific critiques of the dangers of macrobiotics. For example, she warns that eating excessive quantities of rice and bean products with a few vegetables, can create deficiencies of nutrients, and can lead to the exhaustion of proper digestive enzymes. Further she adds, “the exclusive use of just a few foods can lead to severe food addictions.” While she has a deep respect for the broad concepts of macrobiotic food principles, she correctly points to various unhealthy extremes. For instance, Fallon says

that strict macrobiotics can lead to dangerously low cholesterol levels, “resulting in depression, poor concentration and even strokes and cancer have been associated with diets that call for the elimination of animal proteins and fats and an over reliance on vegetable oils—diets found in many macrobiotic cookbooks.” Other areas of concern include the need for ample fermented foods; the danger of mineral deficiencies, particularly zinc, from an excessively grain-based diet; and over emphasis on tofu for protein, because of its high phytate content, which can inhibit enzymes. (pages 57-62). Such thoughtful opinions, with scientific research to support them, can open

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discussion within macrobiotics.

The issues surrounding limited oil are directly connected to the protein viewpoints. All oil, animal or vegetable, comes from protein sources (except corn oil, which therefore requires strong chemicals to extract its oil). Saturated fats can congest and interfere with blood circulation and even organ functions over time. While Nathan Pritikin in the 1970s and 1980s demonstrated that a low fat diet could reverse heart disease, he was not eliminating fats or animal foods altogether. As a broad statement, fats and oils are storable forms of energy. These serve as a cushion to buffer the ebbs and tides of blood sugars and energies. One cause of overeating, especially in strict macrobiotic meals, is that there is little immediate energy from the complex carbohydrates of grains and veg-

etables, and little oils that could help this need.

This leads to the use of excessive consumption of grains. The “rule” of 50 – 60 percent grains comes directly from Ohsawa, through Kushi and Aihara. It is certainly an Oriental mainstay, though without full equivalent in the West. In *Nourishing Traditions*, Fallon says that Oriental people have evolved a larger pancreas and salivary glands to acclimate to this grain-based diet. For all of the many benefits of whole grains, excessive intake can tax the digestive powers and fill the stomach without room for other foods that could fully nourish the body. This leads to a ‘full-but-not-satisfied’ syndrome. The prior issues of low protein and low oil can heighten this even more.

After 3 to 7 years of strict macrobiotics, most people face a decision: reject or revise. Those who reject macrobiotics will still keep some of the useful lessons and food understandings. Those who revise macrobiotics usually start by adding a broader selection of foods, changing proportions of food groups and cooking styles.

Revision means adaptation based upon experience. This offers the best solution for true growth. Through experimentation, we can learn useful lessons. Through further studies, we can widen our understanding of foods and their place in our life. Experience and study becomes true education that can benefit our growth for a lifetime.

This widening approach can accept that some foods and food-as-medicine have been excluded from macrobiotics inexcusably. A prime example is culinary herbs such as sage, thyme, basil, dill, rosemary, and fennel. “In a temperate climate, spices and herbs with a stimulant, aromatic effect can produce excitability, hyperactivity, and overall cooling, weakening effects,” writes Kushi in *The Macrobiotic Path to Total Health* (page 37). This cat-





**DENNY WAXMAN, MICHIO KUSHI, GARY SMITH, AVELINE KUSHI, MICHAEL ROSOFF, AND MURRAY SYNDER IN THE MID-1980S**

egorical statement shows ignorance of the wide variety of herbs, both culinary and medicinal. Their effects are widely respected and traditionally used in most cultures. Refusing to embrace these temperate-climate herbs, which can grow in your garden, conflicts with the well-stated goal of eating foods that can grow in our own environment. In fact the line between garden herbs and vegetables is often blurred, for example celery, parsley, or fennel.

The wider and wiser approach to macrobiotic eating and lifestyle needs to recognize that there is a time and a place for many “excluded” foods. Most of these foods are categorized as yin, expansive (and by implication, weakening). The best known are potatoes, tomatoes, peppers, asparagus, and tropical fruits. These could be excellent for people who are overly yang, especially when organic and used as part of a wholesome meal. Instead, there are those within macrobiotics who speak out strongly against these foods. For example, Denny Waxman writes in an article titled, “Meat and Potatoes,” posted on his website ([www.strengthenhealth.org](http://www.strengthenhealth.org)), “Potatoes destroy our

ability to think and act independently. They are the food of oppression and possibly the most addictive food on the earth.” We need a more adventurous attitude toward food.

## **RE-CONNECTING AND SHARING**

What I propose is a dual approach to macrobiotic education and lifestyle. One is for the general public, and the other is for those people seeking personal healing through macrobiotic guidance.

The general public—who are seeking a new direction for a healthier lifestyle and wholesome eating—often see macrobiotics as too fanatical and too time consuming. They can benefit from significant changes for healthier eating. We can offer useful guiding principles for better selection and preparations of wholesome foods. Key foods to avoid, such as most meats and simple sugar foods, can begin to cleanse and strengthen them. Accepting that the demands of modern work life and family life consume extra time, we can encourage simple, wholesome meals and some pre-cooked foods

available in natural food stores. We can offer a vision of the relationship between what we eat and how we feel, think, and act. We can point to the easy application of yin-yang principles for discovering balance and adaptability. And we can show that food is only a part of a truly healthy lifestyle. Commonsense self care, exercise, relationships, emotional, and spiritual aspects are also vital.

For people seeking macrobiotics for their personal healing, we need to educate counselors well. We need to embrace food-as-medicine, which has been the mainstay of macrobiotic healing, combined with the powerful uses of traditional natural remedies, especially herbal medicine and modern remedies including vitamin supplements. When Michio Kushi wrote, with Phillip Jannetta, in the 1991 book, *Macrobiotics and Oriental Medicine*, “herbal medicine is a symptomatic treatment, and, although capable of providing temporary relief, it cannot change the underlying cause of an illness,” (page 153) he discards over 2,000 years of healing work in Chinese and other traditional healing heritages. Isn’t macrobiotics providing the same symptomatic help when one is advised to drink ume-sho-kuzu for a stomachache? Further on in the same book, “Today, when many of our problems are produced by degenerative disorders that develop over many years, it should come as no surprise that herbal remedies can offer only limited relief, or may not be effective at all.” He could have proposed that when someone is eating macrobiotically, then using herbs wisely could aid their healing many fold. Instead it feeds fears by proclaiming that herbal remedies mask symptoms, have side effects, and are “simply an extension of our quick-fix mentality.” (page 155).

The longtime macrobiotic teachers and advocates have been in the vanguard of cultural changes. Now we must re-connect and share our

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understanding that has grown from our life experiences. There needs to be a sharing and an exploration into further healing, through foods and other realms. There are several possible stumbling blocks, though. One is allegiance to a single person, like Ohsawa, Kushi, or Aihara. To honor and respect all that they have given us is forever true. Yet we cannot lose sight of Ohsawa's core teaching of non-credo, which is to do justice to the bigger dream.

Another stumbling block is that macrobiotics has separated itself from the growing world of Oriental medicine. One example was given concerning Chinese herbs. But the deeper issue is that the yin-yang of macrobiotics does not correspond with that of traditional Chinese medicine. Ohsawa switched the yin and

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*“ . . . we can show that food is only a part of a truly healthy lifestyle. ”*

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yang around. For macrobiotics to have a strong, clear voice in modern society, we must change the yin-yang to the traditional standard. Then we can communicate and share our outlook with the growing world of Oriental medicine in America and beyond.

We are at a crossroads. Do we change or hold on to certain ideals that have not worked out in everyday life? I am recommending two paths for macrobiotics. One educates and inspires newcomers and embraces broad dietary suggestions, and the other strives to evolve into a true healing modality. These can transform and inform a new generation of people. It will be for those who are dedicated to macrobiotics to expand the horizons of macrobiotics into the world of the 21st century.

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**Michael Rossoff, L.Ac.** began his journey in macrobiotics in 1969. He traveled to Boston to find Michio Kushi teaching in a study house on a Sunday afternoon in mid-June. He accepted Michio's challenge of living in Boston for four seasons to fully experience the rhythm of change. He left his hippy lifestyle and moved into a study house in Brookline, Massachusetts, working various odd jobs while eating the food and learning from classes by Kushi 2 to 3 times a week and others 1 to 2 times a week. After four months he became very sick with a skin discharge, later diagnosed as scabies. Though the external compresses failed, and he finally surrendered to a prescribed, external treatment, his enthusiasm for macrobiotics remained. Soon he was working at Sanae restaurant in downtown Boston, beginning as dishwasher, then short-order cook, and finally as head cook of this macrobiotic restaurant.

He was fascinated by acupuncture. When J.R. Worsley came to speak at one of Kushi's Tuesday night lectures, he realized that this was his special path. Several years later he went to England to study acupuncture since there were no acupuncture schools in America in the mid-1970s. Before acupuncture school he married and had one child, with the second one born while he was away in England. He left Boston to start sharing macrobiotics with others. He moved to his hometown, Washington, D.C. area. There he and his wife taught classes and he began counseling and acupuncture and a third child was born.

He remained in the Washington, D.C. area for the next 20 years. He remarried and began a larger center in Bethesda, Maryland. By 1981, he started a local newsletter that quickly became a national magazine, MacroMuse. Over the next 7 years MacroMuse would have an important voice in the expression of macrobiotics. It

was subtitled, "Macrobiotic Forum Magazine." This was clearly expressing his goal of making an arena for discussion about the growth and evolution of macrobiotics. Many fine people contributed to this effort. See his website (below) for some reprints from those issues.

When MacroMuse ended and was sold to another magazine, Michael knew that he wanted to leave the Washington, D.C. area. It would finally happen in 1995, when he moved to Asheville, North Carolina. He continued to return to the D.C. area bimonthly, and continued his teaching in other cities too. During the 1980s and 1990s he taught in many United States cities, plus Toronto, Canada, England, Belgium, Switzerland, Italy, and Israel. During the past two years he has resumed teaching in Italy.

In 1999 Michael decided to take a sabbatical for a year of further studies in Chinese medicine. He studied and graduated from Maryland Institute of Traditional Chinese Medicine, whose faculty was 95 percent Chinese. Their perspective was valuable for gaining new insights into the Chinese understanding of acupuncture. When he returned to Asheville in 2000, he was asked to teach at a new school, Atlantic University of Chinese Medicine, in Mars Hill, North Carolina, just north of Asheville. Soon he also became the academic dean. He continued these works for three years, leaving in May 2003. During many of these years in Asheville, he has taught shiatsu massage at an accredited massage school. He continues these teachings and providing macrobiotic counseling and acupuncture treatments, plus travels occasionally to other cities for teaching and counseling. He happily lives in Asheville with Caren Bakkum and their cat, Kombu. His hobbies include photography, playing the piano, and martial arts.

To learn more, please visit his website, [www.michaelrossoff.com](http://www.michaelrossoff.com).