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The First Wine Newsletter Exclusively Devoted to Pinot Noir

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## News from the 3rd International Wine & Heart Health Summit

The International Wine and Heart Health Summit is held annually to critically study the heart health benefits of wine. The Napa Valley event is directed at physicians, but consumers and interested wine professionals are equally welcome. The most recent event, the 3rd, was held at the Silverado Resort on March 2nd-5th. The sponsor and host of the program is the Desert Heart Foundation, a non-profit research and education foundation with the purpose of studying and promoting the cardiovascular health benefits of wine. I attended the inaugural meeting, but could not be at this year's event because of the conflicting WOPN in Shell Beach. I did, however, obtain transcripts of the meeting and would like to pass on some interesting information.

In the last several years there have been multiple studies to suggest that moderate consumption of alcohol provides a risk reduction for cardiac and all cause mortality. However, Todd Goldfinger, DO, Chairman of the Summit, points out that in the absence of a well-executed, randomized, double-blinded, intervention trial, controlled for confounding variables, the debate as to the health benefits of wine and beverage alcohol, as a part of a healthy lifestyle, will undoubtedly continue. Important questions and issues remain, such as the role of beverage type, pattern of drinking, and the risk that moderate drinking can lead to problem drinking. Arthur Klatsky, MD, Senior Consultant in Cardiology at Kaiser Permanente Medical Care Program in Oakland, California reported on data collected from Kaiser Permanente about total alcohol intake and frequency of drinking beverage types. Data showed a lower risk of coronary heart disease hospitalization for both beer and wine frequency than for liquor, and a lower risk related to frequency of wine drinking for total mortality and coronary heart disease death. None of the data show a difference for drinkers of red or white wine. He feels it is clear from these studies that frequent wine drinkers have lower risks than beer or liquor drinkers. But it remains unresolved whether this is due to non-alcoholic wine ingredients, drinking pattern or traits associated with wine drinking.

A group of researchers at the National Institute of Public Health in Denmark reported that alcohol intake is associated with a significantly increased risk of rectal cancer, but the risk is reduced when wine is included in alcohol intake. This suggests an anti-carcinogenic effect of wine, consistent with the findings of experimental studies.

**If You Drink  
No Noir, You  
Pinot Noir**

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Wine acts to quell stomach upsets. The phenolic substances in red are effective against salmonella and shigella bacteria which cause food poisoning and dysentery. Advice to travelers to warm climes: forget Pepto, pack the Pinot.

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Inside this issue:

Winemaker Physicians	2
Austrian Reds	3
<i>Pigeage</i>	3
Physician Books on Wine were First	4
Aussie Wine Doctors	4

Another study from Denmark supports previous ones in showing an increased risk of breast cancer among postmenopausal women with increasing average daily intake of alcohol. For the first time, the study showed this relationship with alcohol intake did not depend on drinking frequency. There was no evidence for differences by type of alcoholic beverage in the associations with risk of breast cancer. More studies are needed.

A French study reported in the *American J Clinical Nutrition* found that a moderate intake of wine is associated with a lower risk of mortality from all causes in persons with hypertension. The results are consistent with the observation that for a given blood pressure, the absolute risk of death from coronary heart disease in northern Europe and the US is much higher than in wine-drinking Mediterranean countries. The authors of this study conclude that “these findings may have important implications for hypertensive middle-aged and elderly patients who are already moderate wine drinkers. This habit may lower the patients’ risk of death, especially that from all causes, which has not improved even with recent antihypertensive drugs.”

Since 1991, when CBS broadcast a 60 Minutes program on the “French Paradox”, there has been an explosion of publicity about the protection against coronary heart disease from the moderate consumption of red wine and hundreds of scientific articles have been published. The mechanisms of protection have been extensively studied and include beneficial effects of alcohol and /or wine flavonoids on blood lipids, lipid oxidation, coagulation, fibrinolysis, arterial endothelial function, heart ventricular function, inflammation, and glucose metabolism. Most of the research has shown the most favorable effects of wine when it is consumed daily in moderation (2-3 glasses for men, 1 glass for women) with meals. R. Curtis Ellison, MD, Professor of Medicine and Public Health at the Boston University School of Medicine notes that “Since it is projected that the USA will lead the world in the volume of wine consumed by the end of this decade, it is hoped that such knowledge will help Americans who have no contraindications to alcohol use to adopt moderate and responsible wine consumption as part of their healthy lifestyle.”

## **Winemaker Physicians Have Long Advocated Wine as Part of a Healthy Lifestyle**

The medicinal properties of wine have been recognized by multiple cultures for centuries. Hippocrates championed the value of wine as a medicine, and considered wine to be vital to a healthy diet. Louis Pasteur, the noted French biologist, stated “wine to be the most healthful and hygienic of beverages.” William Heberden’s classic description of angina pectoris in 1786 included the statement, “wines and spirituous liquors afford considerable relief,” and postulated that alcohol was a coronary vasodilator. Near a 100 years ago, Sir William Osler stated, “Wine is milk for the aged.”

Cardiovascular surgeon and winemaker, Thomas J. Fogerty, MD (Fogerty Winery) has long been an advocate for the positive health benefits of wine drinking. He has even gone so far as to claim that, “the protective therapeutic benefits against heart and peripheral vascular disease, and strokes related to embolic (clot) origin, are so significant that it could be construed as negligent and unethical not to offer information on wine’s positive attributes.” He goes on to say, “Those patients who have multiple risk factors for developing cardiovascular disease would most benefit from this daily libation.” Fogerty typically recommends three glasses (two for women) of wine daily, preferably red, to his patients, colleagues and friends.

David Bruce, MD, carried two careers in his early years as both a dermatologist and winemaker. He has extolled the virtues of wine drinking for years, actually predating the 1991 “French Paradox” television program. He published a booklet titled “Ten Little Known Medical Facts about Wine that You Should Know.” He was one of the first doctors to publicize that resveratrol in red wine increases the good cholesterol and reduces the bad cholesterol. He recommended that hospitals have wine on their menus and encouraged a glass of wine for the elderly to improve their appetite and raise their self-esteem. He pointed out that sulfites in wine are a non-problem to 99.9% of people, that true allergies to wine are extremely rare (and only to egg white used as a fining agent in wines), and defused the hysteria about elevated lead levels in wine.

## Austrian Reds Have Becoming Lusty

Ask any wine enthusiast about Austria and they will rhapsodize about the luscious dry Rieslings, the zesty Grüner Veltliners, and the tasty dessert nectars. But it is Austria's food-friendly red wines that are creating a buzz. Red wines actually make up close to 30 percent of wine production in Austria. The 2003 vintage was very hot in Austria as in all of Europe and the top producers in the Burgenland, Carnuntum, and Thermenregion regions, southeast of Vienna, produced full-bodied and full-flavored serious red wines. The wineries in these regions, with subsidies from the Austrian government, have all the latest technology to produce fine wine including the best open top French wood fermenters, the best oak barrels, gravity flow and so on. Michael Broadbent reflected on the quality of Austrian wines, "After years of being taken for granted, there is a new awareness of the frankly brilliant quality of Austria's top producers."

Austria has 13 officially recognized red grape varieties (and 21 white), but it is the three indigenous reds, St Laurent, Blaufränkisch, and Zweigelt, along with Blauburgunder (Pinot Noir) which show the most potential. According to Rudi Graeter, writing in *Wines & Vines* (May, 2005), the varietal bottlings tend to be true to character, while most red blends are international in style (fruit-forward, aged in *barriques*). The blends are often a combination of indigenous grapes and international varieties.

Austria's Zweigelt is characterized by aromas of plum and cherry and is reminiscent of Barbara. It is made in both a light-bodied and lusty style. Blaufränkisch produces a hardy wine rich in berry and cherry fruit. St Laurent is Austria's answer to Pinot Noir. It is deeper and sturdier, but goes well with the same foods such as game birds, duck and pork. Sommeliers in this country are always interested in introducing new wines to customers and they have picked up on the food-friendly Austrian reds. I recently enjoyed a Zweigelt at the Slanted Door Restaurant in San Francisco and the waiter told me they sell cases of it each month. Exports to the United States have been rapidly rising, from 49,000 cases in 2002, to 71,000 in 2003, to 100,000 in 2004. America is now Austria's third best customer for exports behind Germany and Switzerland.

**2003 Peter Schandl Pinot Noir** 13.5% alc., \$27. This wine comes from a 250 year old family wine estate located in historic Rust near the Hungarian border. (Burgenland). The family farms 16 ha of vines, 1/3 of which are red. The wine is off-beat for Pinot Noir and you would never guess the varietal in a blind tasting. It is light in body, and spicy in taste. It won't please lovers of plump fruity California Pinot Noirs, but it is a very pleasant drink that goes down nicely with food. A good summer barbecue wine. Available from K&L Wines.



*Peter Schandl*

## Pigeage

In a humorous book, *From Barrel to Bottle*, written by Edward Ott and published in 1953, comes this amusing anecdote about why modern Burgundies aren't what they used to be. On a visit the author made to Clos de Vougeot, founded by the Cistercian monks, he found an old blackboard behind the presses with notations chalked on it: "1P, 2P, 3P." Investigation disclosed that the letters stood for the French word *Pigeage* meaning a routine carried out by monks in the olden days, when on three occasions during fermentation, the monks jumped naked into the vats to stir up the grape skins. According to Mr Ott "it was the only occasion in the year when the monks had a bath and for many years after this unhygienic, stirring was abandoned it was said that a real Burgundy expert could declare by the taste whether a wine was pre or post *Pigeage*."

**James Gabler, author of *Wine into Word*, while compiling his book on wine publications was struck by the many early contributions to wine literature by physicians. The first book about wine (1478) was by Arnaldus of Villanova, a physician. Arnald of Villanova was a physician, surgeon, botanist, alchemist, philosopher, writer, astrologer, lay theologian and counselor to kings and popes. About 1310, Arnald wrote a book on wine, but because the printing press had not yet been invented, his book was handwritten. In 1478, his book was translated into German and printed, making it the first book on wine to use this new invention. Arnald attributed many qualities to wine including its ability to clarify turbid blood, to open the body's passages, to warm cold bodies and to cool hot ones, to prevent the "drying out" of the old and to medicate the young. The first complete book in English on wine (1568) was by William Turner, a physician and the first (Sir Edward Berry), the second (Robert Shannon) and third (Alexander Henderson) books in English that discuss modern wines were by physicians.**

## **Aussie Wine Doctors**

At the 3rd International Wine & Heart Summit, Justin Ardill, MD, presented a fascinating paper on the role of Australian medicos in the country's wine industry. Australia is unique amongst wine producing countries in that 60% of the fruit from any vintage is processed by wine companies established by Australia's over 160 wine doctors. Australia's three largest wine companies Lindemans, Penfolds and Hardys for example, were all founded by doctors as were other famous Australian labels such as Angoves, Stanley, and Houghton.

Wine was used as a medicine throughout the voyages to Australia from Northern Europe to prevent malnutrition and disease in the 1700s. The turning point in the medical treatment of convicts during transportation came in 1814, with the voyage of the *Surrey*. The *Surrey* had on board 200 male convicts, marine guards and crew. By the time the *Surrey* reached the east coast of Australia, the death toll from 'gaol fever' or typhus was 51. The convict's cells below deck were poorly ventilated and not properly cleaned or fumigated. Governor Macquarie ordered an inquiry into the death toll during the voyage of the *Surrey*. He appointed Dr. William Redfern, Sydney's leading doctor, to investigate. Redfern later established a vineyard at 'Campbellfields', in Sydney's south west in 1818, becoming Australia's first wine doctor. Redfern was also an ex-convict. His investigations and recommendations were to have a significant impact on Australia's wine industry. He found that the captain had withheld rations from the convicts, including their wine ration. As a result, the convicts became weak and susceptible to disease. Redern's recommendations included a quarter pint of wine, with added lime juice, be given to each convict every day to prevent malnutrition and scurvy. He also recommended that each transport ship have a qualified doctor on board. As a result, Australia found itself host to many naval surgeons doing convict transport. These doctors knew the health benefits of wine.

Only the poorer quality wines were ever shipped out to Australia, the better European wine was kept back by the English wine merchants. After spending six months in a leaking oak cask in the bilge of a transport ship, the wine was frequently oxidized and contaminated with sea water. So, many doctors that had retired to Australia established vineyards to avoid the problems associated with transporting wine to Australia and to provide wine as a medicine for their patients.

The Australian medical profession's symbol should not be the traditional snake caduceus, but a glass of wine and a convict's leg iron, because Australia's medical profession began with convict transport doctors, maintaining their convict patient's health with wine.