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Review principles

- **Quality**. We strive to produce book reviews that are more informative and objective than anything else available.
- **Fairness**. We strive to be as fair as possible and give authors the benefit of the doubt.
- **Professionalism**. Our writing is polite and critiques ideas, not people.
- **Integrity**. We don't refrain from pointing out low evidence quality, improper use of references, and poor logic, even when it may ruffle feathers.
- **Transparency**. We disclose our scoring method and possible conflicts of interest of our reviewers.
- **Humility**. Current evidence is limited, and our knowledge of it is also limited. We strive to respect the limits of our knowledge when we review books.

Book selection

The primary reviewer will choose a book and an in-house peer reviewer with relevant expertise. Reviewers should avoid choosing books that would create a substantial real or perceived conflict of interest. The primary reviewer must read the book in full. The peer reviewer is not required to read it in full, but should have a copy of it available, and can read it if they want. The primary reviewer and peer reviewer should have the same edition and format of the book to ensure that quotes and page numbers line up.

The book should be obtained in paper or e-reader format, but not audio format. Paper format is preferable because it provides easily-understood page numbers, but e-reader format with location numbers is acceptable as long as both reviewers have the same format.

Scoring Key

The primary reviewer will score the book on three primary qualities: scientific accuracy, reference accuracy, and healthfulness. These will be averaged together to form the book's overall score, which will be expressed on a percentage (0-100) scale. He/she will also score the difficulty of the book's advice as a supplemental measure. This will all be recorded in the review document.

1. Scientific accuracy

The primary reviewer will identify three key claims that are central to the book's thesis and evaluate them scientifically. Evaluation may involve some searching/reading in the scientific literature, depending on the reviewer's expertise. Reviewers are encouraged not to rely solely on references provided by the author, but to perform independent literature searches.

The reviewer will apply the following criterion to each claim:

Criterion 1.1: How well is the claim supported by current evidence?

Score	Summary definition	Full definition
0	Claim is opposed by current evidence	Overall, relevant evidence is intrinsically convincing and predominantly undermines the author's claim.
1	Evidence relevant to claim is neutral, nonexistent, or based on personal observations	Overall, relevant evidence neither supports nor undermines the author's claim. Or, the reviewer is unable to locate evidence in the book or elsewhere that meaningfully evaluates the author's claim. Or, evidence for the claim relies overwhelmingly on personal observations such as anecdotes about the author's patients/clients.
2	Claim is weakly supported by current evidence	Overall, relevant evidence is intrinsically weakly convincing but is consistent with the author's claim. Or, relevant evidence is intrinsically convincing but only weakly supports the author's claim.
3	Claim is moderately supported by current evidence	Overall, relevant evidence is intrinsically moderately convincing and is consistent with the author's claim. Or, relevant evidence is intrinsically convincing and moderately supports the author's claim
4	Claim is strongly supported by current evidence	Overall, relevant evidence is both intrinsically convincing and predominantly supports the author's claim.

Relevant evidence includes peer-reviewed scientific journal articles; college-level textbooks; government publications such as those issued by the CDC, USDA, or FDA; neutral NGOs such as the Cochrane Collaboration; and other similarly credible sources. Relevant evidence can include citations provided in the book as well as citations the reviewer identifies independently. Personal observations are not relevant evidence, including the clinical observations of medical practitioners. Personal observations can be used to illustrate claims that are supported by other evidence, but not as primary support for claims.

When evaluating this criterion, please consider references cited in the book to support the claim. In addition, consider how the strength of the claim lines up with the strength of the argument. For example, discussing ideas without strong evidence is OK as long as it's clearly identified as speculation and isn't used as a basis for diet/lifestyle advice. This should be scored more leniently than speculation that's presented as fact.

Each of the three claims receives one 0-4 score, for a total of three scores, which are recorded separately in the review document. The three scores are then averaged together to yield a single score for scientific accuracy.

2. Reference accuracy

The primary reviewer will randomly select ten references from the book, identify the claim associated with each reference, and evaluate how well each reference supports its claim. The reviewer is free to choose a method for selecting references that suits the reference structure of the book, as long as it is random. For example:

1. If the book has a single reference list at the end, the reviewer can simply choose numbers from that list randomly.
2. If the book has references separated by chapter, the reviewer can randomly choose chapters, then randomly choose references from those chapters.

We recommend using random.org to generate truly random numbers.

The reviewer will then apply criterion 2.1 to each reference. If the book contains fewer than ten references, the reviewer will take the average score of the references that they scored (rather than averaging in 1s for missing references). If the book contains no references that are linked to specific claims, it will receive a score of 1 across the board. This is to indicate to readers that the book does not explicitly use evidence to support its claims.

The reviewer will score the quote/citation pair as it is presented in the book. For example, sometimes authors accidentally mis-number citations such that a citation is unrelated to the quote it's associated with, but the correct citation appears a few citations down the list (associated with a different statement). The reviewer should score the quote/citation pair as

presented rather than making assumptions about which reference the author intended to cite. This is because reviewers can't be sure what the author's intention was, and mis-numbered citations are a form of reference inaccuracy that should be reflected in the reference accuracy score.

Criterion 2.1: Does the reference support the claim?

Score	Summary definition	Full definition
0	Reference undermines the claim	Reference offers evidence that is intrinsically convincing and predominantly undermines the author's claim
1	Reference does not convincingly support the claim	Reference offers evidence that is intrinsically unconvincing but is consistent with the author's claim. Or, reference offers evidence that is irrelevant. Or, reference offers evidence that is intrinsically convincing but neither predominantly supports nor refutes the author's claim.
2	Reference offers weak support for the claim	Reference offers evidence that is intrinsically weakly convincing but is consistent with the author's claim. Or, reference offers evidence that is intrinsically convincing but only weakly supports the author's claim.
3	Reference offers moderate support for the claim	Reference offers evidence that is intrinsically moderately convincing and is consistent with the author's claim. Or, reference offers evidence that is intrinsically convincing and moderately supports the author's claim.
4	Reference offers strong support for the claim	Reference offers evidence that is both intrinsically convincing and predominantly supports the author's claim

Each of the ten references receives a 0-4 score, and these are recorded separately in the review document. All scores are then averaged together to yield a single score for reference accuracy.

3. Healthfulness

The primary reviewer will identify the health-related intervention proposed by the author and record a summary of it in his/her review document. The primary reviewer will then identify and record the condition targeted by the book, if applicable (for example, type 2 diabetes, excess body fat, or cardiovascular disease). He/she will then identify the audience that appears to be targeted by the book (for example, a general audience, people who want to lose weight, or the elderly).

With the book's intervention, target condition, and target audience in mind, the reviewer will apply the following three criteria.

Criterion 3.1: Is the intervention likely to improve the target condition in the target audience, relative to typical diet and/or lifestyle patterns, in the medium-to-long-term (6+ months)?

Score	Summary definition	Full definition
0	Intervention is likely to worsen the condition	Relevant evidence suggests that the intervention proposed by the author is likely to worsen the target condition in the medium-to-long-term (6+ months)
1	Intervention is likely neutral for the condition, or effects are unknown	Relevant evidence suggests that the intervention proposed by the author is likely neutral for the target condition in the medium-to-long-term (6+ months). Or, relevant evidence is unavailable or insufficient to meaningfully evaluate the healthfulness of the intervention for the target condition in the medium-to-long-term (6+ months).
2	Intervention is likely to slightly improve the condition	Relevant evidence suggests that the intervention proposed by the author is likely to slightly improve the target condition in the medium-to-long-term (6+ months)
3	Intervention is likely to moderately improve the condition	Relevant evidence suggests that the intervention proposed by the author is likely to moderately improve the target condition in the medium-to-long-term (6+ months)
4	Intervention is likely to greatly improve the condition	Relevant evidence suggests that the intervention proposed by the author is likely to greatly improve the target condition in the medium-to-long-term (6+ months)

Relevant evidence includes peer-reviewed scientific journal articles; college-level textbooks; government publications such as those issued by the CDC, USDA, or FDA; neutral NGOs such as the Cochrane Collaboration; and other similarly credible sources. Relevant evidence can include citations provided in the book as well as citations the reviewer identifies independently. Personal observations are not relevant evidence, including the clinical observations of medical practitioners. Personal observations can be used to illustrate claims that are supported by other evidence, but not as primary support for claims.

If the book does not identify or imply a specific target condition, this score will be left blank.

Criterion 3.2: Is the intervention likely to improve general health in the target audience, relative to typical diet and/or lifestyle patterns, in the medium-to-long-term (6+ months)?

The reviewer should consider diet as well as lifestyle guidelines such as physical activity, smoking cessation, and stress management. “General health” is defined broadly as including chronic disease risk, body composition, reproductive health, and physical and cognitive performance. Reviewers are strongly discouraged from basing their answers on opinions that are not based on evidence. If relevant evidence is unavailable or uninformative, the reviewer should assign a score of 1.

Score	Summary definition	Full definition
0	Intervention is likely to worsen general health	Relevant evidence suggests that the intervention proposed by the author is likely to worsen general health in the medium-to-long-term (6+ months)
1	Intervention is likely neutral for general health, or effects are unknown	Relevant evidence suggests that the intervention proposed by the author is likely neutral for general health in the medium-to-long-term (6+ months). Or, relevant evidence is unavailable or insufficient to meaningfully evaluate the impact on general health in the medium-to-long-term (6+ months).
2	Intervention is likely to slightly improve general health	Relevant evidence suggests that the intervention proposed by the author is likely to slightly improve general health in the medium-to-long-term (6+ months)
3	Intervention is likely to moderately improve general health	Relevant evidence suggests that the intervention proposed by the author is likely to moderately improve general health in the medium-to-long-term (6+ months)
4	Intervention is likely to greatly improve general health	Relevant evidence suggests that the intervention proposed by the author is likely to greatly improve general health in the medium-to-long-term (6+ months)

Criterion 3.3: Does the diet portion of the intervention promote an adequate nutrient intake for general health in the target audience, relative to prevailing recommendations, in the medium-to-long-term (6+ months)?

Score	Summary definition	Full definition

0	Diet is likely substantially nutritionally inadequate	Diet will likely provide moderately insufficient levels of three or more relevant nutrients, and/or dangerously insufficient levels of 1-2 relevant nutrients, in the target audience over the medium-to-long-term (6+ months)
1	Diet is likely somewhat nutritionally inadequate	Diet will likely provide moderately insufficient levels of 1-2 relevant nutrients in the target audience over the medium-to-long-term (6+ months)
2	Diet is likely nutritionally adequate	Diet will likely provide adequate levels of all relevant nutrients in the target audience, but not a level of nonessential health-promoting nutrients that is superior to typical diets over the medium-to-long-term (6+ months)
3	Diet is likely more than nutritionally adequate	Diet will likely provide adequate levels of all relevant nutrients in the target audience, and a level of nonessential health-promoting nutrients that is somewhat superior to typical diets over the medium-to-long-term (6+ months)
4	Diet is likely substantially more than nutritionally adequate	Diet will likely provide adequate levels of all relevant nutrients in the target audience, and a level of nonessential health-promoting nutrients that is substantially superior to typical diets over the medium-to-long-term (6+ months)

Relevant nutrients include 1) essential micronutrients such as vitamins and minerals, 2) protein quantity and quality, and 3) nonessential but health-promoting nutrients such as fiber and polyphenols. The reviewer will use Institute of Medicine Estimated Average Requirements (EAR) as the benchmark for adequate essential nutrient intakes, except carbohydrate because it is not an essential nutrient. We recognize that some diet interventions will be difficult to evaluate for many essential nutrients. Accordingly, the reviewer may judge the risk of specific nutrient insufficiency based on the general diet pattern rather than a detailed analysis of all nutrients in the proposed diet. Typically, diets that promote a minimally refined, diverse eating pattern should score well on criterion 3.3, but this will not necessarily be the case for all combinations of diet and target population.

Each of the three criteria receives a 0-4 score, which are recorded separately in the review document. These are averaged together to yield a single score for healthfulness.

4. Difficulty

Difficulty is a supplemental measure that will not receive a numerical rating and will not be averaged into the overall score. Rather than representing difficulty with a star value, it will be described verbally underneath the other ratings using the terms “very difficult”, “fairly difficult”, “fairly easy”, and “very easy.”

Summary definition	**Full definition**

Very difficult	Intervention proposed by the author would be very difficult for the target audience to implement.
Fairly difficult	Intervention proposed by the author would be fairly difficult for the target audience to implement.
Fairly easy	Intervention proposed by the author would be fairly easy for the target audience to implement.
Very easy	Intervention proposed by the author would be very easy for the target audience to implement.

The primary reviewer will identify the audience targeted by the author and the intervention proposed by the author, and record a summary of them in his/her review document. The reviewer will then determine how difficult it would be for the target audience to follow the author's advice. Difficulty is based on the following four considerations:

1. **How much effort/discipline the intervention requires**. For example, a diet that requires a person to regularly refuse tempting food in her personal surroundings involves a high level of effort/discipline.
2. **How much time the intervention requires**. For example, a diet that requires a person to shop at a farmer's market and cook complex recipes from scratch involves a large amount of time.
3. **How much money the intervention requires**. For example, a diet that is heavy in grass-fed meat, exotic ingredients, and/or organic nuts can be expensive.
4. **How difficult it is to obtain the required foods**. For example, all-organic foods or free-range meats may not be readily available in some areas.

Narratives

The narrative portions of the review explain the scores and give necessary context. They should provide an informative, concise, and cohesive narrative that helps website users efficiently assess the book.

The primary reviewer is also at liberty to discuss strengths and weaknesses not covered by the scoring portion, or expand upon scientific or factual issues raised by the book. However, reviewers are strongly encouraged to be concise. Reviewers are encouraged to use a clear and accessible writing style that is easy to read and minimizes technical language. The tone should be less formal than this document.

The most visible part of the narrative will be the one-paragraph summary, which will appear below the cover image and percentage bars at the top of the page. Below the summary, the page will have an outline of the full review that can be clicked to arrive at specific sections.

All references should be added using digital object identifiers (DOIs) or PubMed links whenever possible, because they are stable over time. References should be added by adding links to words in the text of the review, like this.

Peer review

Peer reviewers are responsible for ensuring/improving the quality of the primary reviewer's work. The primary reviewer will send the review document to the peer reviewer. The peer reviewer should have the same edition/format of the book on hand to verify that the primary reviewer has interpreted passages in a reasonable manner. He/she should also rely on pre-existing expertise to evaluate the quality of the primary reviewer's arguments, particularly in the scientific accuracy and healthfulness sections, which are the most knowledge-dependent and subjective.

Since we do not currently have an editor, the peer reviewer should also make suggestions related to spelling, grammar, and other aspects of writing quality. The peer reviewer should point out places where technical or complex language can be replaced by simpler language without losing information value. All suggestions should be logged in track changes mode or equivalent so the primary reviewer can see and evaluate them.

Once the peer reviewer has commented on the review document and returned it to the primary reviewer, the latter will review the suggestions. The primary reviewer is expected to accept all suggestions except those with which they disagree. For minor differences of opinion such as those over grammar, the primary reviewer can choose his/her preferred version and no further discussion between reviewers is required.

For more substantial differences of opinion such as those over scientific or factual matters, the reviewers should attempt to resolve their differences and come to the most accurate conclusion. If the reviewers cannot agree, the review should include a note briefly explaining the dissenting opinion of the peer reviewer.

Interactions with authors

We will link to one author response on another site as long as we are aware of it and it is respectful and in good faith. We treat authors with respect and we require the same of them. We will not post the text of author responses on our site. The primary reviewer can choose to respond to author responses, but they are not required to. The primary reviewer may also update the review, including scoring, if they believe the author has made compelling points. These updates will be recorded in the “updates” section of the review.