

Fringe 2024 – The Cabaret of Dangerous Ideas – Food and Paracetamol

The Cabaret of Dangerous Ideas is a series of debates taking place monthly at The Stand; during Fringe 2024, however, we're getting a bumper serving, with a grand total of 47 challenging topics on offer.

The CoDI was originally developed by Edinburgh's four universities, Fair Pley Productions, comedian Susan Morrison and The Stand itself, but now involves academics from all over Scotland – even, as Morrison, our host for the hour, informs us,

'From England! I thought they'd sealed the border!'

The idea today is that each speaker will have 20 minutes in which to talk about their subject. Boring? Not at all! Both the researchers I saw were lively, engaging, funny and very interesting – and unlike some Fringe performers, they stuck to their timeslots and knew when to shut up, even though none of us wanted them to.

Morrison is a great warm up act, sharing that she only married her husband when she found out he could cook, and that her favourite comfort food remains Dairy Lea cheese triangles on crackers, dunked in a bowl of Heinz tomato soup. (Cheers of recognition from the enthusiastic audience, who are packed into a small room at The Place, a boutique townhouse hotel part-annexed by The Stand this August.)



Sheila Erskine

Today we are hearing first from **Sheila Erskine**, lecturer in Sociology at Robert Gordon University in Aberdeen; her subject is food (hence Morrison's soup story.) We all eat it, but Erskine isn't concerned with its nutritional values – her interest is in its emotional and symbolic meanings, the memories attached to it, and the way in which our early feeding experiences can shape our whole lives.

And the most important experiences, Erskine says, start the minute we are born. And no, this is not a lecture about breast being best, or indeed the opposite. Erskine talks instead about what happens while we are feeding; vocalisation, skin-to-skin contact, the baby-carer gaze. They're all so important; a positive feeding experience soothes babies' stress and helps them to adapt.

Covering the different treatment of boys and girls (parents, usually entirely unintentionally, feed boys for significantly longer – they 'need building up'), the four types of adult we become as a result of childhood experiences with food, and [Carol Adams'](#) theories about meat eating and its connection to patriarchal values ('red meat is seen as a masculine thing – aren't men always in charge of the barbecue?' – cue more laughter) in the space of 20 minutes is no mean feat, but Erskine does it brilliantly.

Debate is at the centre of CoDI talks, so the floor is then thrown open for questions, and there are certainly plenty of

those. One woman wants tips on how to get her teenagers back round the family table (good luck with that one.) Erskine says it's normal for teens to kick back against their parents; don't worry about it. Another audience member says that his son lived on cereal till he was 8 years old, and still smells any new food before eating it. Again normal! says Erskine; it's just the hippocampus in action; ancient man needed to make sure food was safe.



Giorgi De Paoli

Second to speak is **Giorgi De Paoli**, a pharmacist and forensic toxicologist from the University of Dundee. De Paoli moved to Scotland fifteen years ago. She thought it'd be like the USA, where she'd previously lived; it wasn't, and she gives some very funny examples of Italian-Scottish culture shock.

But De Paoli's real concern is paracetamol, those handy white pills that you can get for 49p in any supermarket. Or at least, any UK supermarket. We all have them in our homes – 'hands up how many of you have more than one packet?' 99% of the audience own up. They're commonplace in the UK, with over six thousand tonnes of them going down out throats every year. You may be surprised, then, to hear that in Italy they are used rarely, must be sold only at the pharmacy counter, and cost eighty euros a box. Yes EIGHTY. No wonder Italians don't take paracetamol in a hurry.

De Paoli gives us the grim statistics. In countries where paracetamol is freely available – eg the UK, Sweden, Australia and the USA – overdoses, both accidental and deliberate, are common. In the UK alone these result in 100,000 people per year going to A & E departments. 50,000 are admitted to hospital; the worst affected may need liver transplants.

De Paoli explains (via the excellent example of family visit overload at Christmas) how too much paracetamol can affect the liver. It is, she assures us, safe if taken at safe levels –

but even the leaflet inside every box is confusing and doesn't make sense. (Not that most of us will have noticed; I can't be the only person who consigns it straight to the recycling bin.)

Why do people overdose by accident? De Paoli's research shows that many are simply in so much pain they stop caring, they just want it to stop. Others are confused, especially if they are taking other medications at the same time. She reads out a roll call of commonplace medicines containing 'hidden' paracetamol. Some are well known, some surprising.

But the issue that De Paoli really wants to address is *why* the UK is so dependent on such a potentially toxic drug. She was shocked when, on her first visit to a GP in Scotland for back pain, she was told to go home and take paracetamol,

'Why not physiotherapy?

I think all of us know the answer to that, and it's not a clinical one.

De Paoli was given the same advice about migraine, and again after the traumatic birth of her son. A friend of hers has even been told to take it for candida (a yeast infection for which creams and tablets are available.) De Paoli thinks the UK's relationship with paracetamol needs a drastic reset,

'Let's talk to our GPs, pharmacists and families, about paracetamol and have a country of happy, healthy livers.'

Once again the questions come thick and fast. What do Italians take if they don't take paracetamol? 'Ibuprofen.' Isn't that just as bad? Antibiotics, which we in the UK keep being told should only be used for the really serious stuff, are probably prescribed more quickly in Italy.

But, as De Paoli acknowledges, paracetamol does work. Her own

mother asks her to bring some to Italy every time she visits. The point De Paoli is making is that we must learn to respect this drug far more than we do now, to understand its dangers, and to stop turning to it for every single ailment.

It's easy to see why paracetamol is so popular here. It's readily available, but perhaps even more importantly, it's cheap. Physiotherapy? If you can't afford to pay for that you'll likely be waiting many months. See a doctor? Though my own surgery is fantastic, in some places appointments are like gold dust. Paracetamol? Just pick some up with your groceries, or pop into a pound shop.

De Paoli's talk offers a real wake-up call to all of us who see paracetamol as a quick fix. The only problem is, what other fix can we get?

This was a genuinely informative, stimulating hour, and I'm sure the audience would have loved to have continued the discussions, I know I would. *The Cabaret of Dangerous Ideas* has lots more sessions coming up over the next few weeks, covering everything from *Is AI Real?* to *The Brie-ggining of Time* ('why Emmental is the key to understanding the elemental') and *Moving On After Brain Injury*. Sheila Erskine and Giorgi De Paoli are also each reappearing in their own separate shows, on 19th and 16th August respectively. Full details and tickets [here](#).

The Cabaret of Dangerous Ideas is at Venue 319, The Place, 34-38 York Place. Tickets *can* also be purchased on the door, subject to availability, but be warned, book early – several sessions have already sold out.