Eating Disorders

Introduction

Food allergy is a very real condition and often displays its symptoms as many other ailments and diseases. The diagnosis is crucial to properly treat the condition, because getting to the root cause will save the patient excess physical discomfort, precious time and money. Unlike most common illnesses, there are no definite and completely accurate laboratory tests to determine food allergies and which foods are harmful, moderately harmful or safe. And because food allergies may be displayed with many other symptoms, a proper initial diagnosis is hard to conclude. This presents the nutritionist or doctor with a more challenging situation, however, the successful management of such a case will also prove to be very gratifying because the results will be fast and more immediate than most other illnesses because food has a direct relationship to the condition.

WHAT ARE FOOD ALLERGIES?

In order to diagnose and render proper treatment for food allergies, it is important to define what a food allergy is. When first coined, the term "allergy" commonly referred to an adverse reaction to any substance that does not bother most people. It involves the adverse physiological reaction to something that is usually not harmful. According to Dorland's Medical Dictionary, allergy is "a state of hypersensitivity induced by exposure to a particular antigen resulting in harmful immunological reactions on subsequent exposures."

In the 1920's, it was discovered that a type of antibody called IgE was involved in many allergic reactions. So medicine started defining allergies as IgE-mediated responses. IgE-mediated allergies are easy to detect by standard skin or blood tests and, they are simple to understand. The reactions happen rapidly, usually within a few minutes of exposure to inhaled substances or eating a food. Small amounts of the offending substance trigger the reactions, which commonly occur in the respiratory tract, digestive system or skin. IgE-mediated food reactions are often fixed, which means that after months or years of avoiding a problem food, eating any amount of it will still cause symptoms.

With the development of modern science, it is now known that many adverse reactions to foods do not necessarily involve IgE antibodies. The absence of IgE does not make them less real because other immune mechanisms, such as IgG antibodies, immune complexes, or cell-mediated reactions are involved instead. These reactions can happen quickly, or they can be delayed for two to seventy-two hours or even longer. This makes the diagnosis much more difficult, however, there are blood tests that are available. About 95% of IgG-mediated reactions are not fixed. Therefore,

after several months of avoidance, problem foods can be reintroduced into the diet in moderate amounts without causing symptoms as long as they are not eaten too frequently. For this paper, food allergy will be used to describe any adverse reaction to a food without debate about the immune mechanisms involved.

Conditions Associated With Food Allergies

There exists a vast and wide spectrum of related symptoms that may be associated with food allergy or intolerance. The list is very long and continues to grow as new scientific findings arise. By identifying and eliminating certain foods or treating food allergies, many chronic health problems can be improved or eradicated. Over seventy medical conditions are thought to be associated with food allergies.

The conditions may be respiratory, such as hay fever, asthma, bronchitis, recurring ear infections, sinusitis, post nasal drip rhinitis, laryngitis, sneezing, cough, sore throat and hoarseness. They may be digestive, such as gastroenteritis, colitis, Crohn's Disease, irritable bowel syndrome (IBS), celiac disease, inflammatory bowel disease, diarrhea, constipation, colic and malabsorption. They may be cerebral, such as headaches, migraines, dizziness, vertigo, sleep disorders, learning disorders, tension-fatigue syndrome, foggy thinking, irritability and depression. They may be skin-related, such as dermatitis, acne, eczema, angioedema, hives and rashes. And they may be related to other body systems, such as arthritis, myalgia, urinary irritation, conjunctivitis, edema, hypoglycemia, diabetes, weight disorders, premenstrual syndrome and fatigue.

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THE FACTS AND MYTHS ABOUT FOOD ALLERGIES - Facts About Food Allergies

1) Fact: A food allergy is the immune system's reaction to a certain food as the body creates antibodies to that food. When the antibodies react with the food, histamine and other chemicals (called mediators) are released from various cells within the body.

2) Fact: Eight foods cause 90% of all food allergic reactions. They are milk, egg, wheat, peanut, soy, tree nuts, fish, and shellfish.

3) Fact: Peanuts, nuts, fish and shellfish commonly cause the most severe reactions.

4) Fact: As little as half a peanut can cause a fatal reaction for severely allergic individuals.

5) Fact: Being kissed by someone who has consumed peanuts (for example), can cause a reaction to severely allergic individuals.

6) Fact: Allergic symptoms can begin within minutes after ingesting the food.

7) Fact: Food and nutrition play a viable role in treating food allergies by normalizing the immune system, regulating bodily functions, balancing vital organs, normalizing the endocrine system, and providing necessary nutrients that the body needs.

THE FACTS AND MYTHS ABOUT FOOD ALLERGIES - Facts About Children and Food Allergies

1) Fact: Children with asthma and food allergies are at increased risk for a severe reaction.

2) Fact: Milk is the most common cause of food allergies in children. Other very common foods are eggs, wheat, peanut, soy and tree nuts.

3) Fact: A 1994 report suggests that the prevalence of food allergy in children is less than 4-5%, in contrast, other reports suggest that the incidence of food allergy in children is up to 8% and that food related complaints afflict as many as 28% of children.

4) Fact: Most children outgrow their allergies, although an allergy to peanuts and tree nuts is considered life-long.

5) Fact: Some severely milk-allergic children can have a reaction if milk is splashed on their skin. A 1994 report suggests that cow milk allergy in infants is conservatively estimated at 2-3%.

THE FACTS AND MYTHS ABOUT FOOD ALLERGIES - Facts About Anaphylaxis

1) Fact: Anaphylaxis is a sudden severe potentially life-threatening allergic reaction. Food allergy, insect stings, or medications can cause an attack.

2) Fact: Although any food can potentially cause anaphylaxis, peanuts, nuts, shellfish, fish and eggs are foods that most commonly cause this reaction.

3) Fact: As little as 1/5 of a teaspoon of the offending food has caused death.

4) Fact: The symptoms of anaphylaxis can include hives, swelling (especially of the lips and face), difficulty breathing (either because of swelling in the throat or an asthmatic reaction), vomiting, diarrhea, cramping, and a drop in blood pressure. This can occur in as little as 5 to 15 minutes.

THE FACTS AND MYTHS ABOUT FOOD ALLERGIES -Myths About Food Allergy

1) Myth: A recent study showed that many adults have food allergies. This is not true. Scientific studies show that only 1 to 2 percent of adults truly have a food allergy.

2) Myth: Food allergies are not real. This is not true. An allergic reaction involves the body's immune system. In the case of food allergy, the immune system misinterprets a food as a harmful invader and releases histamine and other chemicals to protect the body from harm. Symptoms can include hives, vomiting, diarrhea, and respiratory distress.

3) Myth: Food allergies should not be taken seriously. Every year more people die of food allergic reactions, than allergic reactions caused by insect stings. Food allergies must be taken seriously.

4) Myth: Food additives and artificial flavors cause the majority of food allergic reactions. Contrary to common belief, natural foods account for the majority of allergic reactions. The foods that most commonly cause reactions are peanuts, milk, eggs, wheat, soy, tree nuts (almonds, walnuts, pecans, etc.), fish and shellfish. These foods may appear in foods as ingredients or under natural flavors.

CAUSES OF FOOD ALLERGIES

There are many causes of food allergies and often it may be hard to determine the exact etiology and pathology. But by addressing the root cause of the condition, the food allergy will be most effectively treated, rather than just have the symptoms covered up. The main causes of food allergies are increased intestinal permeability,

heredity.

CAUSES OF FOOD ALLERGIES - Increased Intestinal Permeability

A common cause of multiple food allergies is having a 'leaky gut', or increased intestinal permeability. Small openings can occur in the lining of the intestine, which allow large molecules of undigested or incompletely digested food to enter the bloodstream. If the quantity is too great for the liver to clear almost immediately, the immune system recognizes these molecules as being foreign to the body and produces antibodies against them. When antibodies bind with the food, these antibody-food complexes may travel through the bloodstream to any part of the body to cause problems.

There are many causes of 'leaky gut'. Immaturity is one of them. Babies are born with higher intestinal permeability than older children or adults. Therefore, ideally infants should consume only breast milk for the first several months of life. Other foods should be introduced slowly and cautiously. Cow's milk is highly allergenic and should not be given to babies. If breastfeeding is impossible, a completely hydrolyzed formula should be used because it is already broken down into simple sugars, free amino acids, and small units.

Many types of toxins may also increase intestinal permeability. These include alcohol, nonsteroidal anti-inflammatory drugs (aspirin, ibuprofen, arthritis medications, and many others), cytotoxic drugs used to treat cancer, corticosteroid drugs, and, by their action on bowel flora, antibiotics. Radiation therapy to the abdomen also increases intestinal permeability.

Internal factors in a patient's body can cause or contribute to increased intestinal permeability. These include nutritional deficiencies, inflammatory bowel disease, colitis, gastritis, Crohn's Disease, poor digestion and food allergies. There is a vicious cycle involved with these internal factors because the "leaky gut" also causes them or contributes to their severity and visa versa.

Lastly, unfriendly micro-organisms present in the digestive tract can cause increased intestinal permeability. These infections can involve protozoan parasites and yeast such as Candida Albicans. It can also involve pathogenic bacteria such as Salmonella, or an overgrowth of nonpathogenic bacteria usually, such as Klebsiella, Proteus, or Pseudomonas. Other micro-organisms can also increase intestinal permeability.

By correcting the factors that contribute to food allergies and increased intestinal permeability, it is possible to enhance the effectiveness of treatments and overcome food allergies. The body depends on the nutrients from food for energy, repair and all functions of life. Even with a good diet, those with food allergies are often

malnourished because nutritional status does not depend only on what is consumed, but upon what is digested and absorbed.

Therefore, attention to diet and nutrition is crucial to repair the "leaky gut" and to maintain optimum health.

CAUSES OF FOOD ALLERGIES - Diet and Nutrition Repair for Increased Intestinal Permeability

Foods that cause allergies do not get readily absorbed because they contribute to the irritation of the intestines and hinders digestion. Therefore, the first thing to consider in planning a dietary regimen is simply not to eat the foods that cause allergies. A diet high in oligoallergenic (low allergens) nutrients is recommended for proper gut repair. This means that the diet should not contain foods that the body is allergic to or the chemically altered, nutrient stripped and highly processed foods that are a major part of the standard American diet.

As the condition improves, add back some of the least problematic foods on a carefully rotated basis, using a longer cycle than four to five days. If a patient has some degree of allergy to most common foods, encourage them to seek out new foods that have never been tried before. Large health food stores often carry a wide selection of vegetables and fruits in the produce department. Extremely restricted diets often utilized by severely allergic patients may damage their nutrient profile, further weaken the body and compound the problem of malnourishment.

A highly varied diet is the healthy approach because the body is not deprived of vital nutrients. Fresh vegetables and fruits should make up a large portion of the diet because of the vitamins, minerals, trace elements, phytochemicals and fiber they contain. Dark green leafy vegetables are nutritional powerhouses in every way, and even contain good quantities of essential fatty acids. But please make sure to chew the food thoroughly before swallowing, in order to maximize proper digestion.

High quality, non-allergenic protein is essential for tissue repair involved in healing the intestines. Vegetarian diets are popular among those with health problems and when properly used, can supply abundant protein. If a vegetarian is allergic to beans and grains, which are the best protein sources, and must omit them from the diet, then fish or game meat should be recommended. This should be taken with a hydrochloric acid supplement to facilitate digestion.

Proper fats play an important role in the body's health and wellness. While the fat in commercially raised meats is unhealthy, game meat is at times a good source of some essential fatty acids. Essential fatty acids are important to intestinal integrity and are especially high in fatty fish such as salmon and mackerel and cold pressed oils such as flaxseed oil. As with all foods, using one single oil everyday without change,

an allergic reaction may develop. Rotating a variety of oils is safer and proves more beneficial for the body. Dietary supplements are an excellent way to improve nutritional status. The supplements taken should be hypoallergenic because nutrients from preparations that contain fillers made from foods that the body is allergic to may not be absorbed well. Sufferers of food allergies may be very deficient in some nutrients, so restoring the balance is essential to recovery.

However, taking large quantities of single nutrients can cause deficiencies of other nutrients and be very harmful. It is crucial to consult a doctor or nutritionist who is specialized in this area to help determine individual needs. Determining the nutrients that the body does and does not need is the key.

Finally, consider the effect that attitude toward food has on the nutritional status. Often when a patient suffering from food allergies thinks of food, the emphasis is placed on what cannot be eaten and the entire focus is on the elimination of foods. This attitude has to change. The emphasis should be placed on putting good and healthy foods into her body. Seek out the most nutritious foods the body will tolerate and learn to prepare, cook and eat them with enjoyment.

CAUSES OF FOOD ALLERGIES - Impaired Digestion

The root cause of many people suffering from food allergies is impaired digestion. The incompletely digested food is passed through a leaky gut into the bloodstream and becomes a major contributing factor to the problem of food allergies. There are several ways to improve digestion and normalize the digestive tract. The most basic solution is to pay close attention to diet and eating habits.

Diet and Nutrition Repair for Impaired Digestion

Try to be in a relaxed frame of mind during meals. Chew very thoroughly before swallowing, 30-50 times. Chewing breaks food down into smaller particles that can be easily acted on by the digestive system, starting with enzymes in the mouth. When chewing is done properly, the process of starch digestion begins with the mixing of food and salivary amylase.

Drinking water with meals is a controversial subject. Some have suggested that it dilutes the digestive juices. However, studies have shown that moderate intake of one to two glasses of water with a meal improves digestion. It does so by facilitating both the production of gastric secretions at the time of the meal and also the secretion of bicarbonate into the small intestine that occurs one to two hours after a meal. It is recommended that using large quantities of water to wash down food rather than taking the time to chew thoroughly is a practice to be avoided.

The presence of undigested food in the stool indicates a deficiency in the

secretion of hydrochloric acid by the stomach, of digestive enzymes by the pancreas, and/or both. These deficiencies can be helped through dietary supplementation. Digestive enzymes are available as supplements in several forms. Improving digestion and removing addictive allergic foods from the diet helps overweight patients to lose weight easily as well as underweight patients to gain weight successfully. The treatment of maldigestion and food allergies should lead to normal weight.

Pancreatin is an extract of the pancreas of cows or pigs and is a very potent, broad-spectrum aid for the digestion of proteins, fats and carbohydrates. However, if a patient is allergic to beef or pork, the body will probably not tolerate pancreatin. Broad-spectrum plant enzymes are derived from the fungus Aspergillus Orazeae. They are also active in the digestion of fats, proteins and carbohydrates. It is recommended to rotate digestive enzymes on a four-day cycle. This can be accomplished by using pancreatin (from pork and beef), plant enzymes (from Aspergillus Orazeae), bromelain (from pineapple), and papain (from papaya).

Bromelain and papain are active in the digestion of protein only, and studies have shown them to be much less potent than pancreatin.

It is estimated that 80% of patients with food allergies suffer from some degree of impairment of hydrochloric acid secretion by the stomach. This can range from the complete absence of hydrochloric acid (achlorhydria) to deficiency in the amount of hydrochloric acid secreted (hypochlorhydria). The passage of acidic stomach contents into the small intestine is the stimulus for the pancreas to release digestive enzymes and bicarbonate. Therefore, if a patient has hypochlorhydria or achlorhydria, digestive enzymes may be unable to be properly secreted, even if the pancreas is fully funtional. This is one of several reasons why hydrochloric acid supplements may be an essential addition.

However, hydrochloric acid supplements, if not needed or if taken in too large amounts, can cause stomach ulcers.

Supplementation with betaine-HCl from beets or glutamic-HCl from grains should be done only under medical supervision. A Heidelberg gastrogram test to determine the stomach's ability to secrete hydrochloric acid may be performed. To do this test, the patient swallows an instrument the size of a large capsule with a string attached to it for retrieval. The instrument then transmits information about the pH of the digestive tract and how it changes when the patient drinks a bicarbonate solution. Also, a stool analysis to detect undigested food may be a sufficient indicator of impaired digestion.

Surprisingly, a common symptom of hypochlorhydria is heartburn. Television commercials often misinform the public that when there is heartburn, it should be neutralized with various antacids. Even more drastically, patients are told to take

over-the-counter medications, such as ranitidine, cimetidine, nizatidine, or famotidine, which reduce the production of stomach acid. For those who have heartburn due to hypochlorhydria, these medications may bring relief of heartburn but could lead to impaired digestion, dysbiosis, leaky gut, and food allergies. Before compromising the body's health with these medications, it is important to first find out the root cause.

In addition to stimulating the release of digestive enzymes, hydrochloric acid plays other roles in health. It is essential for the ionization of minerals so they can be absorbed. It is interesting to note that some cases of iron deficiency anemia and other mineral deficiencies can be traced to low hydrochloric acid production. Protein cannot be digested without sufficient hydrochloric acid. This acid is responsible for nearly sterilizing food in the stomach, and insufficient secretion can result in bacterial overgrowth in the small intestine. Finally, hydrochloric acid promotes a friendly pH for the growth of Lactobacillus and Bifidobacterium in the small and large intestine. A final possible way to improve digestion is the system of food combining, which has been in use for over eighty years. It is based on the principle that protein and starch require different conditions in the stomach for optimal digestion. A very acidic stomach is best for protein digestion and a less acid stomach, in which salivary amylase is more active, is best for starch digestion.

Therefore, to make the job of digestion easier, protein and starch should not be eaten together in the same meal. In simpler plans, foods are divided into three groups: protein, starch, and neutral. Foods from the neutral group may be eaten with either starch group or protein group foods. Some of the stricter plans direct that fruit be eaten alone on an empty stomach for quick, thorough digestion. This may help some people with yeast problems to better tolerate fruits.

Patients with candidiasis who have tried many other ways to overcome it report great improvement and finally achieving health. Food combining may make things a little easier for the digestive system, improve nutrient absorption, and decrease the amount of undigested food present to feed unfriendly organisms. It has not yet been scientifically proven and may not work for everyone, but may be "worth a try".

Dysbiosis

A healthy person lives in harmony with the intestinal flora by providing a home and food to over 400 species of bacteria. The bacteria in a healthy person will be predominantly friendly and will do a myriad of health-promoting things including detoxification, production of vitamins, and protection from unfriendly organisms. This state is called 'symbiosis".

Sometimes this state of perfect balance does not exist due to the presence of pathogenic organisms, the overgrowth of nonpathogenic but unfriendly organisms, or the absence of friendly bacteria.

Then, dys-symbiosis, or dysbiosis exists. Some of these organisms are not considered pathogenic by modern medicine. However, weak pathogens or a predominance of unfriendly organisms can cause severe illness in a chronically ill, weakened or malnourished patient. The eradication of these organisms can make a dramatic difference in the patient's health.

Dysbiosis may be caused by protozoan parasites, such as Entamoeba Histolytica, Entamoeba Coli, other Entamoeba, Dientamoeba Fragilis, Endolimax Nana, Giardia Lamblia, Blastocystis Hominis, Chilomastix Mesnili, and others. It may be caused by yeast, such as Candida Albicans, other Candida, Torulopsis Glabrata, and others. Dysbiosis may be caused by bacteria, such as Salmonella, Shigella, Campylobacter Jejuni, Yersinia Enterocolitica, Klebsiella Ppneumoniae, Citrobacter Freundii, Citrobacter Diversus, Proteus Mirabilis, Pseudomonas Aeruginosa, some strains of Escherichia Coli, Staphylococcus Aureus, some strains of Bacteriodes, Clostridium Difficile, and others.

A very common cause of bacterial or fungal dysbiosis is often the repeated or long-term use of antibiotics. Antibiotics kill both the harmful as well as the needed friendly bacteria in the intestines and the vagina. This leaves these areas open to be colonized by yeast, unfriendly bacteria, and parasites.

Parasitic infestations are on the increase due to changes in lifestyles that have occurred over the last few decades. International travel is now commonplace. Even if one is not a traveler, parasites can travel through imported produce and immigrants from countries where sanitation is sub-standard. Eating out in restaurants frequently and the close contact of day care centers contribute to the spread of parasites.

Maldigestion can also promote dysbiosis because intestinal flora is a reflection of what it is fed. If food is completely and rapidly digested and absorbed in the small intestine, it is not available to nourish unfriendly bacteria or yeast in either the small or large intestine. Almost all that is left to reach the large intestine is fiber, which is a favorite food for friendly bacteria such as Lactobacillus and Bifidobacterium and promotes their growth.

Diet can also contribute to dysbiosis. A diet high in flesh protein and low in plant foods promotes the growth of Bacteroides species. A lacto-vegetarian diet, based on milk products and plant foods, promotes the growth of Lactobacillus and Bifidobacterium.

Diagnosis and Testing for Dysbiosis

Dysbiosis caused by bacteria or yeast can be diagnosed using a stool test called a Comprehensive Digestive Stool Analysis (CDSA). The microbiology part of this test

differs from a standard stool culture, which usually only reports the presence or absence of aerobic bacteria considered pathogenic by modern medicine, such as Salmonella and Shigella. A CDSA tests for the presence, amount of or absence of all aerobic organisms and the friendly anaerobic organisms Lactobacillus and Bifidobacterium.

The organisms a CDSA reports include yeast of all kinds, all normal and abnormal aerobic bacteria, Bacteroides, Lactobacillus, and Bifidobacterium. A CDSA also gives the doctor chemical information that reflects the health of the digestive system. This information includes the presence and amount or absence of undigested protein and plant fibers, fats, fatty acids, occult blood, and other metabolic markers. This information may be suggestive of conditions that affect general health. In-depth parasitology testing should also be done to determine if parasites are causing dysbiosis. Such in-depth testing can be done best by specialized parasitology labs. The testing for dysbiosis differs from the standard ova and parasites test done at most hospital laboratories in several ways. This testing will report organisms that would not be reported on a standard test because they are not considered pathogenic by modern medicine, such as Blastocystis Homonis. Also, since specialized laboratories have more experience in looking for parasites, they are more likely to find any that are there.

Stool samples, by their very nature, contain a lot of debris mixed with a very few parasites, eggs, or cysts. It not always easy to distinguish degrading white blood cells or other materials from something that is significant. For this reason the test may be reported as negative when the patient does have parasites, even if performed by a competent technician at a reputable laboratory. The more samples submitted, the more likely a parasite will be picked up. The use of purged stool specimens or rectal swabs also increases the chance of recovering parasites because they are dislodged from the intestinal wall. A patient may have several negative tests but have parasites.

Diet and Nutritional Repair for Dysbiosis

Intestinal dysbiosis can be treated with a variety of prescription and botanical medicines to rid the body of unfriendly organisms. CDSA results include sensitivity testing that indicates which medicines are effective against a particular unfriendly bacteria or yeast. Treatment of dysbiosis caused by bacteria and/or yeast will also usually include supplementation with friendly probiotic organisms such as Lactobacillus and Bifidobacterium.

Certain nutrients are recommended to help the intestines heal. L-glutamine is a major source of nourishment for cells lining the small intestine. N-acetyl-glucosamine helps stimulate the production of intestinal secretary IgA, a protective factor. Butyric acid promotes healing in the large intestine.

Certain nutrients may be counterproductive to the treatment of dysbiosis and should be avoided. Iron supplements feed unfriendly bacteria and protozoan parasites. Fructooligosaccharides (FOS) also feed some unfriendly bacteria, especially Klebsiella Pneumoniae, hemolytic E. Coli, Bacteroides species, and Staphylococcus Aureus. As mentioned above, protozoal parasites eat bacteria, so the patient may be advised to avoid probiotics during the course of anti-parasitic treatment. Cysteine, glycine, and glutathione, while important antioxidants, can stimulate the growth of yeast in some patients with candidiasis. And because botanical medicines kill parasites and bacteria by oxidizing them, the patient may be advised to temporarily avoid all antioxidants

Heredity

Heredity is often cited as a cause of food allergies, and certainly plays a role since a recessive gene has been identified as being linked to IgE-mediated food allergies. Repeated exposure to the same foods, especially in large quantities, is also implicated. Yet other factors also contribute to the severity and number of allergies most allergy-prone people endure.

Other Harmful Factors

Some substances cause increased intestinal permeability and can compound the problem of "leaky gut" and contribute to food allergies. They include alcoholic beverages, nonsteroidal anti-inflammatory drugs (aspirin, ibuprofen, ketoprofen, naproxen, prescription arthritis medications, etc.), chemotherapy drugs for cancer, radiation therapy to the abdomen, and corticosteroid drugs. At times these treatments are necessary. But stay away from the avoidable ones, such as alcohol and nonsteroidal anti-inflammatory drugs for pain relief.

Nonsteroidal anti-inflammatory drugs are now being sold without a prescription and without much warning about the side effects. This is unfortunate, as is the sometimes seemingly indiscriminate prescribing of these drugs. For anyone with even the possibility of compromised intestinal health, a single dose of a nonsteroidal anti-inflammatory drug can increase intestinal permeability. If pain is severe, try heat therapy, herbal pain relief, acupuncture, acupressure, magnetic therapy, supplements such as DL-phenylalanine instead of nonsteroidal anti-inflammatory drugs.

Studies confirm that the interaction of indomethacin, a prescription nonsteroidal anti-inflammatory drug and the intestinal flora produces inflammation. The Physician's Desk Reference warns about the possibility of gastrointestinal bleeding, ulceration, and perforation when using nonsteroidal inflammatory drugs, and reports that one arthritis drug can lead to the development of inflammatory bowel disease. It is true that all nonsteroidal anti-inflammatory drugs cause some degree of mucosal atrophy in the intestine, therefore, it is wise to avoid nonsteroidal anti-inflammatory

drugs to prevent such problems.

DIAGNOSIS AND TREATMENT OF FOOD ALLERGIES

The diagnosis of food allergies can seem complicated because reactions to foods are often delayed and may be affected by many factors, including insufficient rest, stress, and other allergens the body is exposed to at the same time. It is usually difficult for the patient to determine what food allergies they have unless they only have one or two. Therefore, medical testing and help from the right health professionals is important.

The treatment of food allergy can, like its diagnosis, seem complex. Food allergy is definitely not a problem that fits the preconceived notions of - for every ill there is a pill?. Food allergies are often treated from several directions at the same time, such as eliminating allergens, providing food and nutritional support, giving treatment, and modifying the immune response. It is an involved treatment process by both the physician and patient.

DIAGNOSIS AND TREATMENT OF FOOD ALLERGIES - Diagnostic Methods

Elimination and challenge are the first types of testing used for food allergies. It is still often used in the clinical ecology units of hospitals or clinics and is considered the "gold standard" method of allergy testing for foods. The patient either fasts for several days in a clinic under medical supervision or eliminates the foods to be tested from the diet for five to ten days at home. The suspected foods are then eaten one at a time and symptoms are recorded. This method is difficult to use for delayed non-IgE food allergies. In severely allergic patients, it can be dangerous and should be used only under medical supervision, such as in a clinic setting.

Intradermal or scratch skin tests are used by many conventional allergists and are proper for inhalant allergies. However, they are usually not reliable for food allergies because they detect only IgE-mediated food allergies, which make up only about five percent of all food reactions.

Provocation-neutralization testing is the most common in-office, or in-vivo test for food allergies. A small amount of a dilute extract of the food to be tested is injected into the skin of the patient's arm or given under the tongue. Any symptoms that result are recorded and the skin reaction is monitored. Then injections or sublingual drops of weaker or stronger dilutions of the same food extract are given. The dilution, which does not provoke a skin reaction and clears up the patient's symptoms is the neutralizing dose and is used for neutralization treatment. This test works best with food reactions that happen quickly whether mediated by IgE or lgG and is about 80% accurate.

Blood tests are the easiest tests for the patient to take. Hundreds of foods can be tested using one blood sample. There are several types of tests including RAST (Radio-Allergo-Sorbent Test), ELISA (Enzyme Linked Immuno-Sorbent Assay), and ELISA/ACT (Enzyme Linked Immuno-Sorbent Assay/ Activated Cell Test). RAST and ELISA tests can detect either IgE or IgG antibodies to foods in the blood sample. ELISA/ACT tests can detect IgG, IgA, and IgM antibodies, immune complexes, and cell activated reactions. Blood tests can detect delayed as well as immediate food allergies. Food allergies that show up as positive on a blood test should be confirmed by an elimination and challenge test.

DIAGNOSIS AND TREATMENT OF FOOD ALLERGIES - Treatment Methods

Special diets are the most commonly used treatment for food allergies. If the patient is allergic to only one or two foods, eliminating the offending foods may be the only treatment necessary. This is the course usually taken in the case of children with peanut anaphylaxis. Some patients are able to treat, for example, a milk allergy by simply eliminating dairy products.

DIAGNOSIS AND TREATMENT OF FOOD ALLERGIES - Rotation Diet

When a patient has multiple food allergies, the offending foods must be eliminated and all other foods should be eaten at intervals of four to five days or longer. This is known as a rotation or rotary diversified diet. Rotation diets are necessary for patients with multiple allergies because if there are overt allergies to many foods, it is likely that there are subclinical allergies to many other foods. Eating them on a rotated basis reduces exposure to them and helps preserve tolerance for them. Doctors prescribe rotation diets of varying degrees of strictness depending upon severity of the allergies. On very strict diets, each food is eaten only once on its rotation day and the length of the rotation cycle may be longer than four to five days.

. Some specialists consider rotation diets with very long cycles to be counterproductive. For most patients, a four to five day interval between eating foods gives the best masking of symptoms. A longer cycle may lead to "unmasking" symptoms and the patient reacts to and loses yet another food. However, there are patients who find that some foods agree better if rotated at longer intervals. The ideal rotation interval can vary from patient to patient and from food to food, but should not be less than four days.

. On most patients' rotation diets each food may be eaten more than once on the rotation day and the cycle is usually four to five days long. The rotation day can be any twenty-four hour period, not necessarily a calendar day. This means that leftovers from dinner can be eaten for tomorrow's lunch. No food should be eaten in extremely large quantities. As long as many foods are included in the diet, this is an easy rule to follow.

. On a rotation diet, foods are rotated according to their biological classification in food families because foods in the same family have similar antigens. Usually the entire family is kept on the same rotation day. However, some doctors allow their less severely allergic patients eat a different member of certain families on each day of the cycle. The families most often treated this way are the grain family and the cattle family. If a doctor advises against, for example, eating a different grain every day, simply eliminate grains for two or three days and instead eat the listed non-grain alternative on those days.

. On a rotation diet, food families that are not a major problem may be split. This means that some of the foods in a family are consumed on, for example, day 1 of a four day cycle, and others of them on day 3. When a patient first starts on rotation, it may be easiest to follow a set rotation diet. However, after a while, the patient will crave a change.

. For variety, some may choose to rotate different categories of foods on different lengths of cycles. For example, rotate grains or non-grain alternatives, oils and other foods in the same family, and fruit sweeteners used in baking on a four-day cycle. Rotate meats or other protein foods and vegetables on longer cycles. Decide each day what vegetables and proteins are to be eaten and record the foods to avoid mistakes. Rotating at longer intervals may also improve tolerance, although this is not the case for all patients. Since most food allergies are not fixed, after avoiding the problem foods for several months, the doctor or specialist may advise reintroducing them into the diet. However, still eat the problem foods in moderate amounts and on a strictly rotated basis.

DIAGNOSIS AND TREATMENT OF FOOD ALLERGIES - Medications

Drug medications are sometimes prescribed to help deal with food allergy symptoms, however, they have side effects and do not treat the cause. Sodium cromolyn, a drug, which is taken by inhalation for hay fever and asthma, may be prescribed orally for food allergies. It must be used before exposure to an allergen and works by preventing the release of histamine and other chemicals, which initiate and mediate the allergic response. Such drugs suppresses symptoms without treating the causes of food allergies and some patients will get progressively worse while taking it, although initially there appears to be improvement. Other allergy medications, such as antihistamines, also suppress symptoms

DIAGNOSIS AND TREATMENT OF FOOD ALLERGIES - Consult A Qualified Doctor and Nutritionist

It is important for patients suffering from food allergies to receive proper health care, therefore, natural medicine is highly recommended. Acupuncture, herbal

medicine, food medicine and dietary supplements treat food allergies and related symptoms. Seek the help and advice of a healthcare provider who has achieved proven methods of success in the area. Our clinic offers quality food and nutrition consultations, seminars, and a PERSONALIZED FOOD MEDICINE manual to help food allergy patients with dietary guidelines. We recommend the essential nutrients needed by the body as well as educate the patient on proper food care for recovery and healing.

DIAGNOSIS AND TREATMENT OF FOOD ALLERGIES - Nutritional Supplements

General supplements recommended for patients suffering from food allergies include:

- Digestive Enzymes - Digestive enzymes help break down food into smaller less allergenic molecules, thus decreasing reaction to the consumed foods. They can be quite useful for short-term use as part of the recovery process. Because digestive enzymes are large complex protein molecules, it is not recommended to use them for long periods of time without rotating the sources they come from or the patient could become allergic to the enzyme preparations
- Vitamin C : Vitamin C strengthens the immune system, protects the body, and is a general anti-allergy supplement. Allergic symptoms are experienced when an allergen-antibody complex causes mast cells to release histamines and other allergy-mediating chemicals. Vitamin C helps to stabilize mast cells so they are less likely to release these substances
- Quercitin Quercitin may also be helpful to some allergy patients
- Pantothenic Acid : Pantothenic acid is sometimes used for general allergy relief. It supports the function of the adrenal glands, which produces hormones that help cope with allergic reactions. Bicarbonate preparations are useful for food reactions. The pH of the body becomes more acid during an allergic reaction, and these supplements help alkalinize the blood. However, they should not be over-used because they neutralize stomach acid, which is essential to good digestion and to the support of healthy intestinal flora.
- Important supplements: Daily Essentials, 30-Ingredients Super Health Cereal, Green Tea, Chrysanthemum Tea, Spirulina, and Chlorella. Please consult a healthcare professional first before beginning these or any supplements.

DIAGNOSIS AND TREATMENT OF FOOD ALLERGIES - Immunotherapy

Two types of immunotherapy were developed in the 1960's that are used to treat food allergies, however they pose damage to the immune system as well as vital internal organs. In the United States, neutralization is the most widely used type of

immunotherapy for food allergies. The patient is tested using the provocation-neutralization method, and the dilutions of food extracts that neutralize the patient's reactions are determined. These dilutions are called neutralizing doses. The doctor's office then prepares a solution containing neutralizing doses of extracts for all the foods to which the patient is allergic. The patient takes this neutralizing solution either under the tongue or by self-injection. When an allergenic food is eaten, the neutralizing solution should turn off the patient's reaction to the food. Because neutralizing doses change, patients must be retested frequently to keep their neutralizing drops current and working effectively.

Enzyme Potentiated Desensitization (EPD) is another type of immunotherapy, which has been used in England for about thirty years and for several years in the United States of America. EPD is used to treat inhalant allergies, adverse reactions to chemicals, and food allergies all at the same time. It stimulates the body to make T-suppressor lymphocytes specific for allergen suppression. These lymphocytes retrain the body not to react to allergenic substances. An EPD shot contains very minute amounts of allergens combined with an enzyme, beta-glucuronidase, that causes the body to make these T-suppressor lymphocytes.

Before EPD treatment begins, factors that may interfere, such as dysbiosis, hormonal imbalances, heavy metal toxicity, and poor nutritional status, should be corrected as well as possible. It is estimated that after conditions, such as dysbiosis, impaired digestion and "leaky gut" are treated, only about 25% would still need EPD treatment. These are forms of treatment utilized by modern medicine, however, for real treatment and healing, natural medicine is the preferred choice. Natural medicine gets to the root of the problem so that those with food allergies can progress towards optimal health and lead a normal life.

Food allergy is a treatable condition that, too often, gets misdiagnosed due to the many displayed symptoms. Therefore, doctors and nutritionist have to be well educated and aware that such a condition exists and there are successful treatments available. Once it is properly diagnosed and the harmful foods are determined, it is as if the correct key is in place and the door will just open. The response is quick and more immediate than most conditions because food is the direct cause of the allergy.

Patients suffering from food allergies have to possess the knowledge of food and nutrition care because it is almost impossible for a specialist to live with the patient and monitor all dietary consumption. Therefore, the doctor or nutritionist has to spend the time to educate the patient as well as draw out a thorough diet plan that displays food groups, specific foods, dietary supplements and essential nutrients. It is equally important to do consistent follow-up in order to gage the progress and rotate foods to meet the current body needs of the patient.

The body's entire processes depend upon food and essential nutrients to survive.

This is fact. Therefore, a correct diet will normalize bodily functions, strengthen the immune system, allow proper cell function, balance vital internal organs, and benefit circulation. All these factors will prove vital to the healing of diseases and correcting internal imbalances. Certainly, it is important to start with food and nutrition to treat food allergies and its related symptoms.