



Nature Cures *QuickGuide Series*



QuickGuide:
Food Allergies & Elimination Dieting

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Introduction

Caring for health isn't much of a mystery. Health, after all, is the state that our bodies naturally move toward when two simple requirements are met. First, we need to supply everything that is needed (i.e. vitamins, minerals, and other nutrients). Second, we need to remove anything that interferes with the innate movement toward balance (i.e. chemical exposures, reactive foods, excessive stress, heavy metal toxicities, etc.). It seems simple enough, but obviously this can be very challenging in practice.

Any adequate plan to improve or maintain health needs to at least address these two requirements. The single most important aspect of our daily lives in this regard is our diet. Obviously, our selection of foods each day needs to supply the nutrients our bodies need to function efficiently. Just as importantly, we cannot be eating foods that interfere with our bodies' ability to move toward balance.

This book maps out a process for determining which foods you are eating that interfere with your ability to achieve optimal health. It has identified one or more reactive foods for virtually all of the hundreds who have followed it. A reactive food is one that, when reintroduced after an extended elimination, causes symptoms of some kind: runny nose, headache, anxiety, joint pain, fatigue, digestive complaints or reflux, asthma attack, etc. There is no end to the ways that our bodies will let us know that a given food isn't welcome.

If you experience chronic symptoms and/or chronic disease, the elimination/reintroduction process described here could very well be the cheapest and most effective health care you have ever received. But what's even better, this isn't health care you are receiving; it's health care you are doing.

Chapter One

Anyone with chronic symptoms of any kind should rule out the possibility that they are reacting to one or more types of food. It seems like a pretty straightforward approach. After all, symptoms are commonly caused by an exposure of some kind, and there is no greater source of exposure to our environment than through our foods.

The challenge here is that we all generally like what we eat. If milk chocolate is your favorite sweet snack, you probably aren't happy with the idea that the dairy or the sugar in that snack is associated with some chronic symptoms you are experiencing.

The 3-week hypoallergenic diet described in this book is a test for identifying foods that cause some kind of unhealthy reaction in your body. It isn't foolproof. It's possible for this method to fail to identify an allergenic food. In this regard it is no different from any other kind of food allergy test. Whether it is a blood test, a skin test, an energy test, etc., they all might miss an important reaction. But in clinical practice, just under 100% of patients experience a reduction of their symptoms that range from slight improvements to profound relief.

It is not uncommon that a chronic disease that has gone on for years such as asthma or psoriasis will either dramatically improve or completely resolve once one or two allergenic foods are identified and removed using this 3-week diet. For those people, as long as those foods stay out of the diet, the disease is unlikely to return. Other conditions commonly improved by eliminating foods identified with this diet include fatigue, headaches (including migraines), hyper/hypothyroidism, anxiety, hormonal and menstrual symptoms, chronic digestive complaints and many others.

Is this a long-term diet or is it a short-term food allergen test?

It's both. The food guidelines can be used short-term to identify specific foods that are associated with symptoms in some way. Once identified, those specific foods can be eliminated and the rest of the foods (the ones that don't cause symptoms when reintroduced during the test period) can be eaten as you like.

The guidelines can also be maintained indefinitely. Following the diet guidelines described in chapter 2 virtually guarantee that you are eating a very healthy, nutritious diet. Most people – but not all people – who eat that diet will lose weight, feel more energetic and generally reduce their risk of chronic disease.

It's just a healthy way to eat, no matter how long you do it.

You might ask, "Why not just do a blood test or a skin prick test?" The answer is that there are at least 6 different ways that any given person might react to a food. Some of those are reactions that involve the immune system, but not all of them are.

Any test that might be done will check for 1 or maybe 2 types of reactions, but no test will check for them all. The only way to determine for sure if you react to a food is to eliminate it for a while, then reintroduce it and look for symptoms.

Mentally Preparing for the Diet

As with most things about health, this diet is simple, but it isn't easy. Following this diet probably means a very radical change in how you currently eat. Therefore, I encourage people to go through a few steps prior to beginning the diet period.

First, realize the importance of what you're doing. This may very well be the only time in your life that you will get to discover the detrimental impact that foods you're eating on a regular basis have on your health. The vast majority of people will never take the opportunity get that information. This simple test may very well be the difference between a lifetime of persistent symptoms and a lifetime free of those symptoms.

So, step one is to congratulate yourself for doing something that will benefit you for the rest of your life.

The second step is to get out a calendar. You need to pick a string of about 5 weeks (the introduction period takes about 2 weeks) where you won't be traveling, won't be going to dinner parties, won't be attending weddings or office parties or celebrating big holidays. Some people manage to stick with the diet through these kinds of events, but most find it difficult. Since we're trying to maximize your chances of finishing the test with 100% compliance throughout, I recommend avoiding these kinds of temptations unless you have full confidence in your level of discipline.

Pick a starting date. It can be as far in the future as you like. I suggest that you mark it clearly on your calendar. You want to give yourself enough time between now and your start time to do some menu planning and grocery shopping (see chapter 3 for suggestions). It's good to tell friends and family what you're doing, *but only if you feel sure that they'll be supportive*. If you think you're probably going to have to justify to each one

Explaining vs. Justifying

It's fine and even good if friends and family ask you to explain the test that you're doing, why you're doing it and the potential advantages of it. This gives you the opportunity to educate people in your life about the impact of foods on health.

However, many people might feel threatened by your choosing to follow these diet guidelines. You might be told that it's unnecessary to eliminate foods, or that you aren't going to get enough protein, or that you will become vitamin deficient, or any number of other things.

I encourage you to resist getting into arguments about these things. You can be confident that these "concerns" are unfounded, and are possibly triggered by their own resistance to restricting their diet.

Food choices bring up lots and lots of issues for many people. Simply express your appreciation for their concerns, then suggest that they read this short book if they want to understand this program more thoroughly.

of them why you are doing it and assure them that you aren't joining a cult or starving yourself, that's a kind of support you can probably do without.

Finally, an important word of caution about any medications you may currently be on.

This diet is not a medical treatment. It is not intended to diagnose or treat any disease. However, be aware that if you are taking medications to manage one or more chronic diseases or symptoms, your need for those medications may change over the course of this diet. If you take medications "as needed" to control conditions such as allergies, asthma, reflux or pain, then keep in mind that you might be needing those less by the end of this process. If you take medications daily for things like high blood pressure or hyper/hypothyroidism, then it's possible that the dosage needed to control those conditions may change as you do this test.

For example, a patient with diabetes was taking insulin. Even with the daily insulin the patient's fasting blood sugar hovered around 200. Within a week of starting this diet the fasting blood sugar had dropped to around 80. The insulin dosage needed to be reduced accordingly.

It is *extremely important* that your physicians know that these changes could take place so dosages can be adjusted as necessary.

You should consider telling the prescribing physician that you are doing this hypoallergenic diet to identify any foods that might be contributing to your symptoms. If you don't get their full support, encouragement and willingness to help monitor your changing medication needs, then run-not-walk to a different physician. You need to work with a physician who is going to care for your health and support you as you do the same.

Physically Preparing for the Diet

Now that your mind is fully prepared, there are a few physical things that you should do to prepare. These are intended to maximize the amount of information you get out of doing this whole thing.


1)Go now to Appendix A and fill the entire spreadsheet with any and all symptoms you currently experience on a regular or semi-regular basis. Put checks in the column labeled "Pre."

2)Pulse – Take your resting pulse rate at least 5 times throughout each of the 3 days prior to beginning. Ideally you will take your pulse just prior to and about 30 minutes after eating each meal prior to beginning the diet. You should record your pulse rate somewhere you can refer to it later.

3)Temperature – One negative affect food can have on the body is the suppression of thyroid function. In order to screen for this (without ordering labs), you should record your basal body temperature before the diet, during the diet, and especially during the re-introduction period.

Prior to starting the diet, I recommend the temperature be taken 1 hour after waking, again 3 hours after that, and again 3 hours after that, for a total of 3 readings.

Once the diet starts, take your temperature at least 3 days each week, following the same 1hr/3hrs/3hrs pattern.



During the reintroduction, it is very important that you take your temperature in this way on the day after you introduce each new food group. You are looking for a drop in your basal body temperature in response to an introduced food. There is a chart in Appendix A with a column where you can record your temperature during the reintroduction.

4) Weight – I know, I know, you can't stand stepping on a scale and you haven't even looked at your weight in years. You're only going to weigh yourself twice during this entire process: once before you begin, and once again after the last of the food groups has been reintroduced. The point isn't to obsess about weight; the point is to have another gauge for how your body has responded to the diet.

Chapter Two

OK, it's time to lay it on the line. For three full weeks, the following foods are to be avoided in all forms and in all quantities:

Gluten grains: Remember BROWS, which stands for Barley, Rye, Oats, Wheat and Spelt. There are a few other gluten grains, such as kamut, bulgur and malt, but the BROWS are the most common that you'll run into.

Dairy: read labels and eliminate anything that contains any kind of milk protein or lactose. **This includes dairy from all kinds of animals.** Milk proteins include casein and whey.

Soy: Watch out for lecithin, which is a common food additive and is usually derived from soy (unless otherwise stated on the label). Also, virtually all vitamin E found in multivitamins is derived from soy. Therefore, I recommend you stop taking multivitamins and all non-essential supplements for the duration of this diet.

Corn

Eggs: This includes both whites and yolks.

Nightshades: This family of vegetables includes eggplant, tomatoes, potatoes and peppers. The exceptions to this are sweet potatoes and black pepper, both of which are OK to eat (yams are **not** OK to eat).

(Mostly) Red meat: This obviously includes beef, and I also include pork and lamb. I know that these aren't technically red meat, but I've seen them be reactive for people.

Peanuts: These are best to eliminate from your diet permanently. It isn't because of the allergy issue, but because of the mold issue. All peanuts – including organic peanuts – grow mold on them, and that mold produces something called aflatoxin. Look it up if you'd like. It's an extremely potent cancer-causing substance and you're better off not being exposed to it.

Coffee Coffee **and all other caffeinated beverages** are to be eliminated for the first 10 days of the cleanse. Starting with day 11, those who wish can add back in no more than 1 cup (6oz) of green tea or 8 ounces of kombucha each day.

Alcohol

Sugar: This refers to added sugar and honey. Obviously fruit has sugars in it, but we're not counting that here. There are other kinds of sweeteners that are acceptable in small quantities. These include raw, unfiltered, organic agave syrup, maple syrup and brown rice syrup. A total of *itbs* of only one of these three is acceptable per day.

Some things are not on this list, but hopefully are obvious: no artificial sweeteners (aspartame, sucralose, saccharin), no artificial food colorings, no artificial anything. And you'll notice that those things aren't on the reintroduction schedule, either. I hope the reason is obvious.

There you have it. Give yourself a few moments for that sense of dread to pass. Take a few deep breaths (unless you are already hyperventilating). Remind yourself why you are doing this.

This short eBook can't possibly take the time and space to explain the rationale behind each food group included on this elimination list. If you're interested in a more thorough explanation for including each group here, you can find copious amounts of information on the web. Search specifically for the inflammatory effects of each food and/or the health risks associated with each one.

Now that you have the master list of foods to eliminate, the next thing you need to know is what to do along with the eliminations in order to maximize the accuracy of the test. The more pronounced your symptoms are when you reintroduce an allergenic food, the better the chance that you'll notice them. And if you fail to notice symptoms that show up, then you've missed the main point of doing the test in the first place.

Chapter Three

Shopping List and Quick Menu Suggestions

The first question people usually have when they see the list of foods they will be eliminating is, "What am I supposed to eat?" The eliminated foods are typically such a central part of our daily diet that we often know of very few meals we could have that don't contain them.

Appendix C has some food, snack and menu ideas laid out in table format, but here are some initial ideas.

Grains:

This is usually the most challenging category for most people. However, this is mostly because wheat has come to dominate our daily diet so much that we've often never learned that there are several very healthy and delicious grains that don't contain gluten.

Quinoa is great; high protein and very easy to make. Two cups water, one cup quinoa, about 20 minutes on the stove. Use it as a starch side dish or put steamed veggies on top of it (more on that below).

Other grains that can be eaten as much as you want include millet, amaranth, buckwheat, and brown or wild rice. There are oodles of online resources to tell you quick and easy ways to prepare any of these.

You can also find pastas and breads made out of many of these foods. Most health food stores now have gluten-free sections. Read labels to make sure none of the other foods on the list are in the gluten-free foods.

Snacks:

I recommend almonds as a first choice for a protein snack, walnuts as a second choice. Of course, carrots, avocados, bananas and many other fruits and vegetables will also work just fine as snacks. Kombucha is a drink that is now pretty widely available and can really help to curb your appetite and potentially satisfy your sweet tooth. And it's good for you, which is a nice bonus. Keep in mind that kombucha (and green tea) are only allowed after day 10 of the diet.

Meats:

It's fine to eat chicken, turkey and fish, but I encourage you to avoid shellfish, as these are the most allergenic type of fish.

Anything not on the exclusion list is OK to eat. These are just some extra ideas for people that might be struggling to imagine that they won't be starving for the duration of this test.

Legumes:

Don't forget about beans. People often are leery of eating too many beans because of their infamous gas-producing effects. This effect can be mostly eliminated by soaking beans overnight before cooking them. The added advantage is that this will reduce the cooking time significantly. There are lots of resources on the web about how to soak and how to cook beans. They're a good protein source and can add healthy variety to your diet during this process.

Menu Ideas:

You are probably wondering how in the world you can make a meal out of the foods that aren't being eliminated. Here are a few simple ideas.

Breakfast:

Smoothies are great. It's easy to throw several things into a blender and end up with a drink that will fill you up. Include a protein powder (rice, hemp or pea protein), and use enough that you get 15-20 grams of protein in the drink. Other possible ingredients include frozen berries, almond butter, a banana, coconut milk (small amount), flax seed powder, probiotics (acidophilus, for example), or anything else that sounds good and isn't on the list to avoid. There are several gluten-free hot cereal choices. There are rice-based cereals, multigrain cereals, as well as recipes on the web for cereals made of amaranth, millet and others.

Also, don't forget that there's no reason you can't have fish, chicken or turkey for breakfast (but I wouldn't put them in your smoothie).

Lunch:

Salads are your best friend here. Vinegar and oil is the dressing that keeps you on the elimination diet; most other dressings have added dairy, soy, egg or other eliminated food. Always read labels, and don't necessarily trust a server in a restaurant who assures you that there's no dairy (or other eliminated food) in a menu item. Sometimes chefs use butter for cooking or flour in a sauce, for example, and servers might not know this. In fact, you are encouraged to avoid restaurants during this diet. Even if a certain dish doesn't contain a food on your list, it could be that there is residue from one of those foods in the pots and pans used to prepare your food. It might seem like a trivial exposure, but I can assure you that some people will experience symptoms even with this small amount. And the whole point of doing this is to give it the best possible chance of accurately testing your food reactions during the reintroduction period. If you've had these small exposures throughout, it might spoil your opportunity to see significant reactions at the end.

Dinner:

Again, salads can be scaled up as large as you like. Top them with salmon, tuna, chicken, beans, almonds, dried cranberries, etc. Experiment with different kinds of lettuce if you haven't already (red leaf, butternut, romaine, etc.).

Steamed vegetables over a grain such as quinoa is a quick, simple dinner as well. There are resources out there for how to steam vegetables. The trick is in the timing so that you don't over-steam them. Once you figure it out, this makes for a great, healthy dinner that can be topped with fish, for example, then dressed with flax oil, olive oil and/or balsamic vinegar.

The part that many people dread the most is giving up sweets, and often this comes up the strongest after lunch or dinner. It's true: this diet doesn't give you too many options for sweets, since virtually anything that tastes sweet has some kind of concentrated sweetener in it.

If this is likely to be an issue for you, then one suggestion is that you brush your teeth immediately after your dinner. This not only cleans out any food taste in your mouth, but it is a signal to your brain — developed over the course of your life — that nothing more will be eaten after your teeth are brushed.

Conclusion

With that, you're ready to begin. If you've never done any dietary restrictions before, this is going to be a dramatic change for you. It will likely make you aware of many kinds of attachments you have to food that you didn't even recognize you have. It will also make you aware of other people's attachments to food as well whenever you mention what you're doing. You'll hear all kinds of comments about how you are being too extreme, you're harming yourself, you're going to lose muscle mass, your teeth are going to fall out, and perhaps lots of other nonsense as well. However, once you're a week or two into the diet and reaping

the benefits of lost pounds, better health and enhanced vitality, you'll also have lots of people asking what your secret is. As you educate people about what you're doing and why, you just might change someone's life when they, too, decide to give this elimination diet a try. Don't underestimate the power of your example.

This is a relatively short test to discover how you react to foods. When it's over, you'll know more about the relationship between food and your everyday well-being than the vast majority of people. And if you continue to stay away from foods that you discover cause you symptoms, then the reward will be greater vitality for the rest of your life.

Not a bad payoff for a few weeks of discipline.

Is this a long-term diet or is it a short-term food allergen test?

It's both. The food guidelines can be used short-term to identify specific foods that are associated with symptoms in some way. Once identified, those specific foods can be eliminated and the rest of the foods (the ones that don't cause symptoms when reintroduced during the test period) can be eaten as you like. The guidelines can also be maintained indefinitely. Following the diet guidelines described in chapter 2 virtually guarantee that you are eating a very healthy, nutritious diet. Most people – but not all people – who eat that diet will lose weight, feel more energetic and generally reduce their risk of chronic disease. It's just a healthy way to eat, no matter how long you do it.

Chapter Four

The suggestions in this chapter are just that: suggestions. The diet will very likely give you accurate information without doing these things. However, while you're at it, why not just take the opportunity to go all the way with it? If you've conjured up the will-power to do the test already, then these supplemental ideas are going to be easy.

Since many foods cause some kind of reaction in the gut, it is important that your gut be functioning as well as it can when you do this test. In the week leading up to starting this diet, it is strongly recommended that you avoid deep fried foods and heavily processed foods such as packaged pastries, hotdogs, and candies. These often cause inflammation in your gut, and we want your gut working as optimally as it can.

Ideally, you would get a colonic just prior to beginning the test period. If you aren't familiar with colonics, you can find information about them on the web and can probably find out if anyone in your area can do them. In short, a colonic is like a high-powered enema. Any residual allergenic food particles that are still in your large intestine will be flushed out with the colonic, making you an even cleaner slate before you start.

Next, drink way more water than you think you need to. Use this formula: divide your body weight in half, then drink a minimum of that many ounces of water each day. For example, if you weight 200lbs, then you should drink no less than 100oz of pure water daily.

Keep in mind: pure water means pure water. Twenty ounces of green tea doesn't count as water.

Finally, if you don't have a regular exercise routine that you follow, then you should plan to move your body more than you typically do. Many people worry that they'll be tired if they're following a diet like this. In fact, most people have much more energy, especially after the first few days of adjustment.

Something as simple as a 10 minute walk after lunch or dinner is adequate. If it can be 20 minutes, even better. And it doesn't have to be a fast walk, just a moderate pace. And while you're at it, take the opportunity to notice the world and get a few deep breaths into your lungs.

You can help your liver clean itself out by making use of one of Nature's best kept secrets: castor oil. When you apply castor oil to your skin, it gently stimulates the lymph vessels underneath. This, in turn, facilitates removal of wastes. I suggest that you get some castor oil and keep the bottle by your bed. At night, put a small amount of castor oil on your skin over your liver area.

Be sure to put an old t-shirt or something on after you apply the castor oil. It's thick and goopy and will stain any cloth it touches. But that's a small price to pay for the extra detox.

Another easy home therapy that will enhance your overall health is to do regular Epsom salt baths during this diet. Epsom salt is magnesium sulfate, and your body can put both the magnesium and the sulfate to good use detoxifying your body. At least 3 evenings each week, add about 3 cups of Epsom salt to a warm/hot bath and give it time to dissolve. Soak for about 20 minutes before getting out. The best time for this is just before bed, because you'll be very relaxed from the extra magnesium in your system.

Where is your liver?

It's on the right side of your abdomen. If you line up the pinky of your right hand with the bottom of your rib cage on the right side, then lay your hand flat against your skin, your hand will be covering your liver. Your liver is tucked up under the bottom of your rib cage on your right side. It's approximately the width and length of your hand.

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Chapter Five

Following the diet as closely as possible is very important, but following the reintroduction instructions is critical. If you get anxious and rush the reintroduction process, you may very well lose out on the most valuable aspect of this whole thing, which is clearly identifying foods that cause symptoms.

The Reintroduction Schedule

A new food group is introduced every 3rd day. This is because it can take 2 days for a food to cause a symptom. The process goes like this: On the first day a food is introduced. It should be eaten as a substantial portion of breakfast and lunch. Then, for the rest of that day and for the next day, that food group is completely removed from your diet again.

For example, let's say you're introducing gluten on a Monday. For breakfast, then, you might have a few pieces of multigrain toast (no butter!) and/or a bowl of wheat-based cereal in rice milk, (See Appendix B for suggestions on re-introductions). For lunch Monday you might have a pasta dish, using caution to avoid any of the other food groups in your meal.

Use the symptom check list found in Appendix A as a way to help you notice any changes in how you feel. Keep in mind that *any* new symptom that appears after you introduce a food should be assumed to be caused by that food. For instance, perhaps you don't normally have pain in your knee. But if you introduce a new food, and the next day you wake up with a stiff or painful knee, the knee pain is very likely related to the food you introduced (the food caused inflammation that manifested in your knee).

The symptoms listed in Appendix A are just guidelines. Many symptoms that you could experience are not on that list. You want to pay close attention to how you are feeling throughout the reintroduction phase so that you don't miss any signals your body is giving you.

If, by the end of Tuesday you have had no change at all in how you feel and noted no new symptoms, then you can assume that you do not react to that food group. You can now eat gluten grains (in this example) as a normal part of your diet for the rest of the reintroduction period and beyond. You are ready to introduce the next food group on Wednesday morning. However, if you experienced a symptom, then it is very important that you not introduce the next food on the list until the symptom caused by that food has completely resolved.

As another example, if you introduce egg, and then notice that your chronic sinus congestion has returned that afternoon, you need to be sure your sinuses have completely cleared again before introducing the next food on the list. Your sinuses might open up again in a few hours, or they might not open up again for 3 days. The important point is that you wait patiently until they are completely clear. If you don't allow the symptom to resolve completely, then you might not realize that the next food you introduce causes the same symptom.

If, after introducing a food at breakfast, you experience clear and obvious symptoms (e.g. stomach ache, headache, intense fatigue, etc.), you do not need to eat that food again for lunch. You have already discovered your reaction to that food and it should be eliminated from your diet.

Also, for the purposes of this test it is important that you eliminate from your diet any foods that you discover cause a symptom. You should eliminate it at least for the remainder of the reintroduction process so that it doesn't obscure a symptom caused by another food. My recommendation is that you eliminate that food group permanently, and depending on the severity of the symptoms you experience that might be your only option for comfortable living.

Assuming you've had no symptoms show up within 2 days, then on the morning of the 3th day you introduce the next food group in the same way: eat it for breakfast and lunch, then remove it for the rest of the day and the next day. And so on. The key point is that a new food is introduced every 3th day.

I recommend the following order for reintroducing foods. In a clinical setting this order is often altered somewhat, and I'll tell you some of those alterations later.

1) Gluten 2) Dairy 3) Egg 4) Soy 5) Sugar 6) Nightshades 7) Red meat 8) Corn 9) Alcohol 10) Coffee 11) Peanuts

Here are the three changes I would make to this schedule based upon certain conditions:

If you experience asthma, introduce egg first.

If you have a history of strep throat, ear infections or sinusitis, introduce dairy first.

If you have a particular craving for one of the eliminated food groups, then I'd introduce that group first. For example, if it just kills you to think about eliminating tomatoes because you eat them every day and love them, then introduce nightshades first. Likewise, if you love soy in any form and eat lots of it every day, then introduce it first.

What if the food you crave isn't in one of the categories, like chocolate? If chocolate is your craving, keep to the recommended introduction schedule. The vast majority of people have their cravings for chocolate and sweets decline significantly or disappear completely over the course of this diet.

These are the only three changes I make to the schedule. If one of these changes is made, move that food to the top and everything else shifts down one. So if egg is introduced first, then the order would be egg, gluten, dairy, etc.

Congratulations! You're ready to use Appendix A and Appendix B to reintroduce foods and track your symptoms as you do.

Why eliminate every food that causes some symptom?

Any food causing a symptom upon re-introduction will probably be doing more negative things in your body than causing that symptom. So, if dairy causes a stomach ache, it's quite likely that it's doing more than just causing the upset stomach.

Using the example of dairy, let's say that you re-introduce it and symptoms of heartburn return. And let's say that you are thinking you can live with the heartburn so you can continue to eat the dairy products that you love.

The problem is this: the dairy is probably not just causing heartburn, which after all is just a sensation caused by a malfunction in your digestive tract. For you, dairy could also be:

- *provoking inflammation in your gut*
- *disrupting the balance of healthy bacteria in your gut*
- *altering your ability to absorb nutrients in your gut*
- *compromising the integrity of your gut lining*
- *contributing to overall stress levels in your body*

Each one of those things can be tied to a long list of related problems. It's because of this "collateral damage" – in addition to any single symptom caused by a food – that I recommend any reactive food be eliminated completely from the diet.

Appendix A: Symptoms to Monitor

This is not a comprehensive list. Any negative change in how your body or mind feels following the reintroduction of a food group constitutes a reaction to that food. This list is simply to assist you in monitoring some of those possible reactions.

Prior to beginning the diet you should put a check mark or a number 1-5 (see below) in the column labeled "Pre" next to every symptom you experience on a regular basis. On day 21 of the diet (before reintroducing foods) it is very important that you do the same thing, putting check marks in the column labeled "Post" next to symptoms you are still experiencing. This will help you keep track of exactly which symptoms have changed during the diet.

Prior to each food introduction, it is important that you take your resting pulse rate immediately before eating the meal with the introduced food. Then, about 30 minutes after finishing the meal, again take your pulse. Finally, take it 1 hour after eating the meal. If it has risen by more than 10 beats per minute (and you have done no physical activity that would justify a faster heart rate), this is another indication that your body is reacting to that food.

It is recommended that you put a number 1 (virtually non-existent) through 5 (severe symptom) to indicate the severity of your response to that food. So, for instance, if gluten causes a moderate headache and intense stomach pains, then put 2 in the headache box under gluten and 5 in the stomach pain box. If no symptoms occur, then either leave it blank or put a 0. Obviously, make any notes about symptoms you wish for your future reference.

	Pre	Post	Gluten	Dairy	Egg	Soy	Sugar	Nightshades	Red meat	Coffee	Alcohol	Peanuts
Pulse before												
Pulse 30 Min. After												
Pulse 60 Min. After												
Temp ave												
Headache (common)												
Migraines												
Earache												
Ringing in ears												
Itching in ears												
Itching in eyes												
Dry eyes												
Runny nose												
Stuffy nose												
Itching in mouth												
Ulcers in mouth												
Sores on tongue												
Itching throat												
Sore throat												
Stiff neck												

	Pre	Post	Gluten	Dairy	Egg	Soy	Sugar	Nightshades	Red meat	Coffee	Alcohol	Peanuts
Swollen lymph nodes												
Stomach pain												
Indigestion												
Gas/bloating												
Meal feels heavy in gut												
Nausea												
Menstrual cramps												
Reflux/ heartburn												
Urinary frequency												
Urinary urgency												
Constipation												
Diarrhea												
Anal itching												
Pain in any joint												
Muscle soreness												
Upper back/shoulder pain												
Low back pain												
Hand/feet tingling												
Fatigue												
Sleep disturbances												
Mood swings												
Heart palpitations												
Flutter feeling in chest												
Chest pain												
High blood pressure												
Anxiety/panic												
Depression												
Brain "fog"												
Dizziness/ lightheaded												
Shortness of breath												
Acne												
Skin rash with itch												
Skin rash no itch												
Mucus in throat												
Mucus ("rattle") in lungs												
Other:												
Other:												
Other:												

Appendix B:

Suggestions for food introductions

Each group that you eliminate obviously contains many different kinds of foods. For example, there are several kinds of grains that contain gluten (barley, rye, oats, wheat, spelt, kamut, semolina, etc). You can challenge with each food any way you like, but I'll recommend the following foods to use as challenges in each category, in order to maximize the potential for a reaction. After all, the whole point of this is to notice a reaction that happens. Keep in mind that these suggestions are in addition to whatever else you might eat at the meal.

1) Gluten

- a. Breakfast: three slices of multigrain toast
- b. Lunch: wheat pasta

2) Dairy

- a. Breakfast: 6oz of cow's milk in a glass or on cereal
- b. Lunch: at least 4 ounces of soft cheese (gouda, for example) and some cottage cheese

3) Egg

- a. Hard boiled eggs or any dish that contains both egg whites and yolks at both meals

4) Soy

- a. Breakfast: 6oz of soy milk in a glass or on cereal
- b. Lunch: Plain or seasoned tofu (avoiding other allergens, of course)

Note: Soy sauce can also be used, but most contains gluten. Tamari sauce is typically wheat-free. If gluten has been introduced without symptoms, then this isn't an issue. If gluten caused symptoms, then be sure it doesn't slip in with the soy.

5) Sugar

- a. Breakfast and Lunch: At least 3 teaspoons at each meal of refined cane sugar, either in food or simply mixed in water and drank.

6) Nightshades

- a. Breakfast: Ideally this is a mix of potatoes and red/green peppers, perhaps fried stovetop

- b. Lunch: tomatoes (in a salad, for example). If it's possible to include eggplant in the meal, all the better

7) Red meat

- a. Ground beef added to an omlet (if eggs are OK to eat) or as a hamburger works fine. You could also do at least 4 strips of (pork) bacon at breakfast and a hamburger at lunch.

8) Corn

- a. Choices should be obvious, at both meals

9) Alcohol

- a. OK, you probably aren't going to introduce this one at breakfast. If a glass of beer/wine at lunch is appropriate for your schedule, that works. At dinner, perhaps another glass. Ideally, you get exposure to each of the three main forms of alcohol: wine, beer and liquor, but limit the amount of each to prevent intoxication.

Note: It is important that you not drink to intoxication when you introduce alcohol. Alcohol has metabolites that are toxic, whether you have a true allergy or it or not. Thus, if you drink too much you will feel sick simply due to those toxins in your system. The point here is to find out if you react even to small amounts of alcohol with symptoms like sinus congestion, headache, etc.

Also, it is important to know that many alcohols contain other eliminated foods. For example, most beer contains gluten (barley), some hard liquors are derived from corn or potato, etc. If you've already noticed a reaction to one of these food groups, then you'll need to introduce a kind of alcohol that doesn't contain it so that you're seeing your reaction to the alcohol itself and not to the reactive food in the alcohol.

10) Coffee

- a. Introduction should be obvious

11) Peanuts

- a. Strongly consider eliminating these permanently and substituting other kinds of nut butters. Otherwise, their introduction should be obvious.

Appendix C

Food Selection Ideas

Proteins	Starches	Fats	Vegetables	Fruit
<i>Chicken Breast</i>	<i>Brown or wild rice</i>	<i>Olive oil</i>	<i>Mixed steamed vegetables</i>	<i>Apple</i>
<i>Salmon</i>	<i>Gluten-free pasta</i>	<i>Ground nuts</i>	<i>Mixed salad green</i>	<i>Pear</i>
<i>Chicken or turkey burger</i>	<i>Sweet potato</i>	<i>Nuts such as almonds, walnuts or cashews</i>	<i>Spinach salad</i>	<i>Berries</i>
<i>Almond butter spread</i>	<i>Quinoa, millet, buckwheat, amaranth</i>	<i>Homemade vinegar & oil salad dressing</i>	<i>Any vegetables not on the list: carrots, broccoli, olives, mushrooms, etc.</i>	<i>Melon</i>
<i>Cooked lentils</i>				<i>Kiwi</i>
				<i>Plums</i>

Daily Meal Suggestions

Breakfast	Lunch	Dinner
<i>Hot amaranth with rice milk</i>	<i>Mixed greens salad with vinegar & oil dressing</i>	<i>Baked chicken, turkey or fish</i>
<i>Gluten-free hot rice cereal (Bob's Red Mill brand, for example)</i>	<i>Salad with salmon or tuna topping</i>	<i>Steamed veggies over whole (non-gluten) grains such as quinoa or brown rice</i>
<i>Chicken, turkey or salmon</i>	<i>Chicken breast, turkey sandwich (non-gluten bread) or salmon with side vegetables</i>	<i>Vegetable or turkey stew (recipes are online)</i>
<i>Granola with rice milk</i>	<i>Steamed veggies over quinoa and topped with flax oil or olive oil and balsamic vinegar</i>	<i>Rice pasta with cheese-free pesto (use nutritional yeast in place of parmesian cheese)</i>
<i>Hot teff or buckwheat cereal with rice and a side of turkey bacon</i>	<i>India curry dish or Thai food (always read ingredient lists carefully)</i>	<i>Large salad with added garbanzo, black or kidney beans; chicken or salmon (top salad with raisins, crushed walnuts, almond slivers, sesame and/or pumpkin seeds, etc.)</i>
<i>Smoothie with rice milk, banana, protein powder (15-20 grams of rice, pea or hemp protein), 1tbs almond butter, frozen berries, etc</i>	<i>Tacos or other Mexican dish using rice tortillas and avoiding dairy and other specified avoided foods (beans, rice, fish, cilantro, chicken, etc. are all acceptable)</i>	<i>Turkey meatloaf, non-gluten pasta salads or casseroles, sushi (in place of soy sauce use a small amount of balsamic vinegar, toasted sesame seed oil, or simply eat without sauce)</i>

Also be sure to search online for recipes to make these or hundreds of other dishes that are free of the eliminated foods.

Other Suggestions

Remember to drink **WATER** throughout the day, every day. It not only keeps your body flushed out, but it will also help to curb appetite.

Ideas for snacks to have around:

- *almonds*
- *walnuts*
- *cashews*
- *berries*
- *granola (gluten free)*
- *baby carrots or other veggies*
- *fruit (fresh or dried)*
- *rice cakes with almond butter*
- *rice cakes with hummus*
- *dolmas (rice and olive oil wrapped in grape leaves)*
- *smoked salmon*
- *cashew or almond butter on a banana or apple slices*

Many online resources give recipes for healthy sauces, curries, salad dressings and other foods.

Appendix D:

Quick Summary of the diet and reintroduction

Food groups to eliminate for 3 full weeks:

- 1) **Gluten grains** (*BROWS*)
- 2) **Dairy** (*reintroduce first if history of ear, throat or sinus infections*)
- 3) **Egg** (*reintroduce first if history of asthma or allergies*)
- 4) **Soy**
- 5) **Sugar**
- 6) **Nightshades**
- 7) **Red meat**
- 8) **Corn**
- 9) **Alcohol**
- 10) **Coffee**
- 11) **Peanuts**

Reintroduce the foods in the order listed above (exceptions noted). In the reintroduction phase, add a food group once every 3rd day. Eat a large amount of the introduced food for breakfast and lunch of the first day, then remove that food group for the rest of that day and the next day. Monitor your symptoms closely. Be sure your breakfast and lunch contain only the one food group you intend to reintroduce!

If you are unsure if you experienced a symptom upon introducing a food, eliminate that food group again and reintroduce that food a second time as the last food (after peanuts).

Appendix E:

Frequently Asked Questions

What about products where the label says, "Made in a facility that also processes wheat, dairy, nuts, soy, and egg"?

Don't worry about those. Whether there is any contamination that happens through machines in this way has yet to be demonstrated. If someone has an anaphylactic reaction to peanuts, then I'd suggest they avoid foods processed in plants that also process nuts. Beyond that limited example, it's fine to eat foods labeled like this even while those foods are on your elimination list.

Why isn't fruit on the list of foods to eliminate? My [uncle/cousin/mother/friend/etc] has a really allergy to citrus fruit.

This is the food group that I've been asked about the most often. And it's true: some people have significant negative reactions to fruit, which can range from migraine headaches to serious bladder and kidney problems. My answer? You have to eat something.

If you go completely through this diet without getting relief from your symptoms, without dropping any pounds, without feeling more vitality, etc., then I would suggest you do another elimination process that includes "B list" foods, such as citrus fruit, all nuts, legumes, and the other meats (chicken, turkey, fish).

What if I'm only reacting to wheat? Why do I need to eliminate all gluten? Or if I'm only reacting to cow's milk, why eliminate all dairy?

Unfortunately, our bodies seem to react to these foods as a group, rather than as individuals. There are reasons for this that involve chemistry and immunology, but that's all too boring to go into.

The fact is, it's possible for someone to react only to wheat, but not to other gluten grains. Ditto for, say, milk and other dairy. I believe that there is very likely a reaction to all foods in a group, but reactions to some foods may be much more subtle than others.

Nevertheless, if you're just dying to narrow a reaction down to just one particular food, here's a method that might work: At the end of the introduction process, after peanuts have been introduced (if you're going to introduce them), start introducing the individual foods within a symptomatic group just as if they were different foods in the original list.

For instance, if gluten was found to cause symptoms when it was introduced (and, thus, got re-eliminated), then introduce gluten again at the end, one grain at a time. For gluten grains, the order of re-introduction should be wheat, barley, rye, spelt, oats.

Each food group can be approached the same way. However, I restate my caveat: I think this is mostly a "wishful thinking" technique. Some foods in a group might be more reactive than others, but if you're honest with yourself I think you'll find that all foods in a group produce symptoms to some extent.

What if I get nauseous on the day I introduce a food, but it's also the first day of my period and I always get nauseous on that day?

Don't introduce a food on a day when you expect to have a symptoms for another reason. This will mean delaying the re-introduction schedule by however many days necessary. In this example, if nausea typically happens on day 1 of your period, then introduce on day 3 (making sure there's one day without nausea before introducing a food).

You say to eliminate coffee. What about green tea? Decaf coffee? Black tea? Twig tea? Other caffeinated teas or unsweetened drinks?

While coffee is the caffeinated drink that most people use to cover up fatigue, there are many people who use green tea or other healthier drinks for the same reason. I recommend that all caffeinated drinks be completely eliminated for the first 10 days. After those 10 days, it is acceptable to have no more than 1 cup of green (not black) tea or 8 ounces of kombucha daily. Coffee is eliminated because it's the drink that's used primarily for the high caffeine content.

Will a food that causes a symptom have to be eliminated for the rest of my life?

There's no single answer to this question. There are some kinds of reactions to foods that are caused by a genetically based inability to digest that particular kind of food. For example, some types of gluten reactions and dairy reactions happen because a person doesn't have the genetic machinery required to digest those types of food. If that's the case, the food will have to be removed from the diet permanently.

There are other types of reactions that aren't due to any genetic issues, but are due to some current problem in the gut. For example, perhaps there is inflammation in the gut that has led to "leaky gut," or a loss of the integrity of the lining of the digestive tract. This allows food particles to pass into the blood stream, which provokes an immune response, which can lead to symptoms.

However, if the digestive system gets repaired, then the lining regains its integrity. No more food passes through into the blood stream, and symptoms caused by that resolve. In this case, let's say egg protein was leaking into the blood and causing a reaction. Once the gut is healed, no more egg protein leaks into the blood. It would then be OK to resume eating eggs, and no symptoms would recur.

Can I continue to take my vitamins and other supplements?

I recommend that you stop these supplements during the elimination. There are two reasons for this. First, many supplements contain or are derived from corn, soy, or other avoided foods. Even these minute exposures can cause reactions in some sensitive individuals. Second, it is important that supplements not "hide" an underlying symptom, such as fatigue, allergies, etc. Most of these symptoms will resolve on their own over the course of this elimination process, and it is very important to know that they've resolved due to the diet change and not due to any supplements.

End Note

If you have a story to share about how this diet has improved your health, please send it to diet@naturecuresclinic.com. Please also let us know if you'd be willing to let us use your story in our promotion of the book.

About the Author

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<http://www.naturecuresclinic.com>