



How To Tell If Your Family Has Food Intolerance

Deborah Manners BSc(Hons)DipEd

©COPYRIGHT 2009 The Food Intolerance Institute of Australia Pty Ltd ABN 37644931517

This material is Copyright and may not be reproduced in any form without written permission of the owner.

TABLE OF CONTENTS

Hov	w it all began	3
1.		
2.	Food intolerance is linked to disease	5
3.	Your health history influences your health future	
4.	Mapping your family's health history	<u>c</u>
-	TABLE ONE: Chronic symptoms in four generations	11
-	TABLE TWO: Chronic disease in four generations	14
5.	Managing your family's health future	17
6.	Food intolerance in babies	18
7.	The chance of disease is in your hands	19
The	e Healing Program	20
ΑW	Vhole New Lease on life!	20
F	REFERENCES	21

Another foodintol® e-book

How it all began



Before the Food Intolerance Institute of Australia (foodintol®) was founded in 2003 – there was no single body gathering together information on all types of food sensitivity.

For most of my adult life I suffered terribly with constant symptoms that could never be explained.

But after a great deal of research of peerreviewed medical journals I discovered my years of poor health had been nothing more than food intolerance.

Changing the foods I eat has rewritten my life. Now I am well, I have motivation and energy and I am slimmer - 18 kilograms (40 pounds) lighter*!

It needed no medications, procedures or strange food drink powders. Just common sense and a simple journal! Eventually I decided to share my knowledge and started foodintol[®] in 2003 as a central resource about food intolerance. The following year we opened the Food Intolerance Healing Program specifically designed to help people *identify their food intolerances* and start a new life - like I had.

My research of the medical literature still continues. Despite popular belief - food intolerance can actually be serious. If left unattended its symptoms can develop into chronic disease. You have probably seen in the media that food intolerance is associated with eczema, diabetes, arthritis, learning difficulties, depression, colitis and many other conditions.

There is now so much strong scientific supporting evidence that it is difficult to ignore.

_

⁽I used to be 87 kg, or 190 lbs.)

Another foodintol® e-book

For You and Your Family

If you are anything like me – your family means everything to you. And this little e-book has been created specifically for you to see if your family is affected by food intolerance.

The good news is — it's *really easy* to find out if you might have food intolerance using information about chronic disease in your family. Simply print this e-book and fill in the two tables. (Remember — the information you enter is for your eyes only.)

Then you can take steps to *prevent disease* in your family – your husband, wife, daughters and sons (even your grandchildren) - by identifying food intolerance.

First there are a few things you need to know.

1. Food intolerance gives you chronic symptoms

You probably arrived at our website foodintol® because you are suffering from chronic symptoms. We say symptoms are *chronic* when you get them all the time – they never really go away.

Sure - you can get temporary relief with medications – but after a while most people want to find out *why* it happens. Our research of the medical journals shows that food intolerance is responsible for *dozens of symptoms*. (See Index at foodintol.com)

Sometimes the first appearance of food intolerance is eczema or psoriasis (say in a baby). Sometimes it is rheumatoid arthritis or pre-diabetes in adults. In other people food intolerance interferes with intestinal function (irritable bowel, constipation etc.) or metabolism - causing weight loss or weight gain at any age.

Common gastro-intestinal symptoms like bloating, diarrhea and irritable bowel are also indicators of untreated food intolerance – and so are high blood pressure, colitis, osteoporosis and diabetes. *Almost any chronic symptom* can be traced back to food intolerance!

Food intolerance affects different people in different ways. In some people it brings on miscarriage, infertility, depression or anaemia. For others the main indicator is an immune system under threat – recurring infections: fungal (e.g. thrush, *Candida*), bacterial or viral. Yes, if you seem to catch colds all the time or you cannot get rid of yeast infections – you very likely have food intolerance!

Another foodintol® e-book

1. Food intolerance is genetic

Some people cannot digest certain foods properly. It is a physiological inability to fully process foods - we simply don't have the right biological equipment.

Decades of research shows that food intolerance is determined by your genes¹,².

So - you either have the ability to digest modern foods - or you don't:

- Dairy in all mammalian milk and derived products
- Fructose in some fruits and some vegetables
- Nightshade vegetables
- Corn and corn products
- Soy and soy products
- Gluten in wheat and some other grains
- Yeasts in baked goods, other foods and beverages
- Additives, preservatives

Remember - nobody has all these food intolerances! Most have one or two only.

However - you cannot change your genes! They were given to you by your parents and your grandparents, and your great grandparents before them. But you can begin eating correctly for your particular body (and lose the chronic symptoms). . . if you find out your problem foods.

2. Food intolerance is linked to disease

The medical literature also tells us that if you have food intolerance but you are *unaware* and do nothing about it - your symptoms can develop into chronic disease.

So when say - arthritis or heart disease appears – it might be nothing more than simple untreated food intolerance. Wow!

Now here's the thing: food intolerance is genetic – so it 'runs in family'. So . . . does that mean . . . your particular 'family health issues' may have started out as untreated food intolerance? *Yes. it does!*

Does that mean chronic disease in past generations of your family could have been untreated food intolerance? *Yes!*

From this you can see then that mapping the chronic disease in your family will show whether food intolerance is likely to be present.

- Could your Uncle Jim's arthritis be related to your own stiff knees and sore back? Absolutely!
- ♣ Could your husband's high blood pressure be linked to his mother's hardened arteries? Very likely!
- Could your daughter's eczema have something to do with your sister's lifelong dermatitis? Strong possibility!

There are particular health issues running in every family. But what if the health issues in your family are nothing more than long-term untreated food intolerance?

'Does that mean if I stop eating the foods that are wrong for me - my health issues will get better?'

The research says . . . yes!

Does it mean - if I identify my food intolerance and eat correctly for it – I will reduce my risk of getting the 'family diseases'?

The research says, yes!

In fact there is a great deal of evidence in the medical literature that untreated food intolerance causes chronic disease – and that *the disease improves when you eat the right diet.* That's why we ask:

Why use medications when it could be a simple food issue?

At the end of this e-book we provide references to the latest medical research on *just two* of many disorders suffered commonly in western societies:

- > Diabetes 3,4,5,6,7,8,9
- > Depression 10,11,12,13,14,15

Now - not all cases of diabetes are caused by food intolerance – but what if your father's diabetes is? And not all cases of depression are caused by food intolerance – but what if your son's depression is?

It means you can do something about it! You can investigate whether they have food intolerance using a simple journal. No blood tests or procedures or drugs are needed.

And getting *proof* of their intolerance, and getting them onto the right diet sets them on a path to recovery.

3. Your health history influences your health future

Sometimes you can have obvious symptoms of food intolerance – but sometimes not. (Yes, it's true that you can have food intolerance *but suffer no obvious symptoms*.)

However disease can still turn up later in life 'out of the blue' if you have this kind of 'silent' food intolerance. The good thing is - a closer look at your family's health history will reveal lots of clues *now*.

What have you inherited? When you think about the word 'inheritance' you might think about material things like property or jewellery or money passed on when your parents die – that is one type of inheritance.

But your *genes* are your real inheritance. And with genetic material you don't need to wait and wonder. You can already see what is on the horizon - if you look carefully.

The types of disease caused by untreated food intolerance are called *modern diseases* or the *Diseases of Civilisation* – because there is no evidence of them in prehistoric fossils. They only appeared when farming began and humans started eating modern foods.

Here are a few of the so-called Diseases of Civilisation:

- o Heart disease
- High blood pressure
- o Eczema, psoriasis
- o Arthritis
- Diabetes
- o Colitis
- Intestinal cancer
- Obesity

- Multiple sclerosis
- Osteoporosis
- Chronic respiratory disease
- o Thyroid disease and many others

Are some of these diseases in your family? If 'Yes' then it might be the result of long-term untreated food intolerance.

In a moment you will find two tables to fill in about your family's health. It will give you a really good indication of whether there is food intolerance in your family and how you can protect your family going forward.

Different symptoms turn up in different people – but they can mean the *same intolerance*. Just because you get irritable bowel syndrome (IBS) from eating dairy - it doesn't mean everybody in your family will get IBS.

And it doesn't mean dairy intolerance is the only thing that can cause IBS. Intolerances to either fructose or gluten can also cause IBS. Food intolerances are expressed differently in different people.

But they are all easily detected using a simple testing journal.

Do you have an aunt who had multiple miscarriages? Did your father have a lifetime of eczema? Or perhaps your brother has osteoporosis?

Maybe you have a sister who is overweight or obese, or an uncle with colitis? Perhaps there is a diabetic nephew? There may be cancer in the family, or depression or psoriasis.

If there are, they may be caused by food intolerance. And they could be different expressions of *any combination of* food intolerances. It's best to find out for sure.

Now, if you have children – think what you might already have passed on to them. Are there already sicknesses or chronic symptoms apparent in the *next generation* of your family?

Chronic runny nose, eczema, chronic cough, asthma, learning difficulties, digestive issues, recurring infections?

In your children? Your sister's children? Your brothers' children? What about your grandchildren?

Who in your family has chronic medical conditions? . . . long term continuous conditions for which they need constant medication?

Do you come from a family where high blood pressure is the accepted norm? Did your grandfather have it and then your father? What about heart disease? Has there been someone who had blood clotting disorders or a stroke?

Perhaps there is a history of rheumatoid arthritis in your family? Or maybe your family gets respiratory difficulty: chronic cough, recurring bronchitis, snoring or sleep apnoea?

Health difficulties tend to run in families: like a tendency for allergies: skin conditions - psoriasis, eczema, rosacea or dermatitis or respiratory allergy symptoms: allergic eyes, ears, nose and lungs leading to sneezing, eye and ear infections, chest congestion, nasal congestion, sinusitis, rhinitis or asthma.

The one condition may not affect every family member but it can be seen progressing down through the generations. We all know breast cancer runs in families, and a woman's greatest risk factor for breast cancer is whether her mother had the condition.

4. Mapping your family's health history

Now it's time to have a look at the health history of your family.

Why? Because your health history gives you a handle on your health future.

Yes – this is a confronting exercise, but a *really useful* one. Especially in relation to children and grandchildren - forewarned is certainly forearmed. So if you are lucky enough have children or grandchildren this exercise is one you do *for them*.

Red Flags

For if you found out that your teenage son's IBS could have been brought about by food intolerance – and that it could somehow be a Red Flag about the bowel cancer suffered by his grandfather – you would be able to teach him about the risks, wouldn't you? Then he could make more informed food choices.

And if you noticed your eight month old granddaughter seemed to have developed chronic eczema or behavioural changes since she started eating solid foods (Red Flag!) - you might be in a position to make a connection.

➤ Wouldn't you like to know about the possibility of disease in your future — so you can take steps *now* to avert it or minimize its effects?

TABLE ONE: Chronic symptoms in four generations

Following are two special tables designed to make it easier to recognise trends in your family's health. We understand this is private information. That's why this is a pdf document – you need to print it out to write in the tables. It is for your eyes only.

The first table is about *symptoms*. The second table is about *chronic disease*. Look at the tables then fill in the names of family members who have these symptoms or diseases. Include the last four generations – even those loved ones who have passed away.

For those previous generations like grandparents and great grandparents it is useful to try and find out what was the cause of death if you can. Perhaps you could talk to your parents, cousins, aunts, uncles and others to fill in the gaps.

Gather as much information as you can about your own family's previous generations – because this is the genetic material you have been given - and it may start to explain why you suffer from your own familiar chronic symptoms.

Then gather whatever you can about your partner* and his/her predecessors and put it in the tables. Then look at the next generation – your children, nieces, nephews and grandchildren. If your children are adopted get as much info as you can about their biological parents.

When finished putting in the names, fill in the last column and total it all up.

These are the four generations:

- Your grandparents
- Your parents
- You, your brothers and sisters
- Your children

_

^{*} If your partner is not the biological parent of your children, then by all means include him/her. But obviously a step parent will have no genetic influence over step children. Include both biological parents of your children if possible.

TABLE ONE: CHRONIC SYMPTOMS IN FOUR GENERATIONS

Symptoms associated with food intolerance		Names: e.g. Jane, Aunty Jess, Granddad Ryan etc.	No. affected
Respiratory	Coughing, sneezing, runny		
symptoms	nose, nasal congestion,		
	wheezing, asthma, ear		
	infections, snoring, sleep		
	apnoea, pneumonia, bronchitis		
Neural	Poor co-ordination, clumsiness,		
symptoms	headache, migraine,		
	depression, memory problems,		
	learning or cognitive difficulties,		
	dementia		
Immune system	Catching colds and infections		
symptoms	easily, urinary tract infections,		
	mouth ulcers, recurring yeast		
	(Candida) fungal infections like	•	
	thrush, tinea, ringworm etc.,		
	long recovery from viruses, long		
	healing period for sores		*
Skin, hair and	Eczema, dry flaky skin,		
nails	psoriasis, dermatitis, hives,		
	rosacea, rashes, hair loss, split		
	and cracked nails, poor		
	complexion, dandruff		
Metabolism	Mood swings, overweight,		
problems	underweight, obesity, chills,		
	thyroid disease, cravings,		
	addictions		

Symptoms associated with food intolerance		Names: e.g. Jane, Aunty Jess, Granddad Ryan etc.	No. affected
Musculo-skeletal	Back and neck problems, stiff		
symptoms	muscles or joints, tendonitis,		
	arthritis, rheumatoid arthritis		
	Extreme tiredness and lack of		
Malabsorption	energy, difficulty concentrating,		
	vitamin deficiencies, iron		
	deficiency, anaemia , calcium		
	deficiency, bone thinning,		
	osteoporosis, bone fractures		
Gastro –	Irritable bowel syndrome (IBS),		
intestinal conditions	diarrhea, constipation,		
Conditions	excessive flatulence,		
	inflammatory bowel disease		
	(IBD), chronic indigestion,		
	gastro-esophageal reflux		
	(GERD), stomach ulcers, bowel	•	
	polyps or bowel cancer		
Genital and	Infertility, difficulty conceiving,		
reproductive conditions	miscarriage, stillbirth, impotence		
	Total number of people affected		

You may remember more as the next few days pass. Come back and add them to make sure you get the full picture. Now move on to TABLE TWO.

TABLE TWO: Chronic disease in four generations

The next exercise is about the chronic disease that already exists in your family. Remember – a health history gives you a handle on your *health future*.

Each of the diseases in the table is strongly linked to untreated food intolerance. But when you identify your food intolerance and eat correctly for it you can:

- ➤ Heal early stage disease e.g. pre-diabetic conditions
- > Reduce disease progression if already diagnosed
- > Prevent the appearance of disease

Increased awareness of at least four generations of your family will help give you a picture of the *potential for disease* for yourself, your sisters and brothers (the current generation) and for your children, nephews and nieces - the next generation.

Knowing about the possibility in advance is incredibly useful as a predictor.

Why? Because even a low-level awareness of the possibility of disease makes you more likely to notice early warning signs and have them checked out.

Check the list of chronic diseases and fill in any names of family members who suffered from them. Include current family members of course – but also those from the previous two generations, even if deceased.

The Food Intolerance Institute of Australia Pty Ltd ABN37644931517

^{*} References on the website

TABLE TWO. CHRONIC DISEASE IN FOUR GENERATIONS

Chronic disease	Names: e.g. Mum, Uncle Stan, Nanna Forbes, John Junior, etc.
Addiction	
Alcoholism	
Addison's Disease	
Anaemia	
Arthritis	
Asthma	
Atherosclerosis – hardened arteries	
Attention Deficit Disorder (ADD)	
Blood clots – stroke	
Bowel disease e.g. Inflammatory bowel disease	
Cancer of the bowel, breast, or stomach	
Cardio-vascular disease (heart disease)	
Celiac Disease	.
Cognitive (intellectual) difficulties	
Colitis	
Crohn's disease	
Dementia	
Depression	
Dermatitis	
Diabetes type 1	
Diabetes type 2	
Eczema	
Epilepsy	
Graves' disease	
Hashimoto's thyroiditis	
Heart disease	

Chronic disease	Names: e.g. Mum, Uncle Stan, Nanna Forbes, John Junior, etc.
Hypertension (high blood pressure)	
Infertility	
Inflammatory bowel disease	
Irritable Bowel	
Learning difficulties	
Lupus	
Memory problems	
Migraine	
Miscarriage	
Obesity	
Osteoporosis	
Overweight	
Pancreatitis	
Pneumonia	
Psoriasis	
Respiratory disease (chronic)	
Schizophrenia	
Sjogren's Syndrome	
Sleep apnoea	
Stomach ulcer	
Thyroiditis	
Ulcerative colitis	

Incurable diseases?

Diseases are often tagged 'incurable'. Well – they may be incurable *with medicines*. But if you find out the *cause* and simply remove it – *you don't need a cure!*

5. Managing your family's health future

Now that you have filled in the two tables you have some insight into your family's health inheritance. If diseases were present in previous generations then they will very likely turn up in later generations.

But if they are related to food intolerance – younger generations can take measures to avoid contracting them. . . they can find out if they have food intolerance.

We are all the product of what our great grandparents, grandparents and parents handed down to us. And of course it goes back much farther than that. . . all the way back to the beginnings of *Homo sapiens* on this earth. Genes are the very building blocks of life – precious and immutable, and uniquely individual for each one of us.

Like it or not - we cannot change our genes - they are set. Neither can we change the genetic material we have already passed on to our children, or what we may pass on to further beautiful children and grandchildren as yet unconceived.

But we can be aware of what genetic packages may be unwrapped in the future! We can anticipate the possible perils of certain lifestyles and, as concerned parents and partners we can have influence.

Just as we warn our children about the dangers of crossing a busy street we must teach them what to expect in relation to the food intolerance *that you now know* runs in the family.

They must be free to choose a healthy future - rather than having disease thrust upon them later because of ignorance about food intolerance.

The good news is - managing your family's future health is as simple as *investigating food intolerance*.

Aren't there blood tests for food intolerance? Yes, and you should consult your doctor on all medical matters. However there is **no single blood test** that gives *proof of all your intolerances*, so you may need a series of blood tests – followed by other tests. There are breath tests, stool tests and biopsies and other procedures.

However an elimination diet (the journal method) is the most effective and *accurate* and gives you actual proof of intolerance. Ask any doctor or dietician. Most readily admit that clinical methods are not good for identifying food intolerance.

Using a journal - food intolerance can be detected at any age – even in small children.

More good news: even if disease is already diagnosed - the journal method will *still identify* the problem food - and changing the diet will *still improve things*.

6. Food intolerance in babies

Food intolerance often first appears in infants – but is frequently ignored or misread. Even with all our medical and scientific knowledge in the twenty-first century babies get labelled 'colicky' if they have trouble feeding and processing milk, even breast milk.

Colic is extreme abdominal pain – and a real Red Flag to explore for food intolerance. A colicky baby cries and struggles and draws up his knees with the pain in his little belly. If it happens to an exclusively breast-fed baby – then you might first suspect untreated food intolerance *in the mother*. Her inability to fully process certain foods means she is passing on the partly-digested substances to the baby.

And of course – because food intolerance is genetic – the baby is also likely to have that intolerance – so she struggles to digest what is coming through in the breast milk.

Colic is often still seen as something a baby 'grows out of' and something to be endured. But why not test that outdated attitude? It could be as simple as food intolerance. . . . in the baby, the mother and/or the father. Why allow a colicky baby to wail on for hours after every feed?

The baby could easily have inherited food intolerance from either parent. And if the mother is unaware of her food sensitivity she is producing inappropriate food protein substances which can get into the baby's digestive system via breastfeeding.

Or it may be a reaction to formula – or to newly-introduced solid foods. The child – with much of the same genetic fingerprint as his parents has a *much more delicate intestine* than the adults. The baby may be announcing he has food sensitivity. If so - he got it from his parents.

A baby's colic is a strong indication for the mother to investigate food intolerance in herself if she is breast feeding, (quickly – to relieve the baby's discomfort) – and also for the father to explore it also.

7. The chance of disease is in your hands

Why do we say this? For you as an adult there are things you can do to improve your chronic symptoms – (check yourself for food intolerance using a journal.)

But why allow the next generation to run the risk of developing even the first signs?

- ⇒ Food intolerance is genetic. So if you have children the potential for damage has already been passed on to them
- ⇒ But the <u>chance of disease</u> is entirely in your hands!

Investigate yourself first – then the children. The Journal Method (as used in the <u>Healing</u> <u>Program</u>) is the *tried and proven* way to identify food intolerance.

foodintol® Programs to reduce food toxins in your life!



The Healing Program

The Journal Method (as used in the <u>Healing Program</u>) is the *tried* and proven way to identify food intolerance.

This program will find your food intolerances with actual proof.

Find it in the Shop www.foodintol.com/shop

A Whole New Lease . . . on life!

Designed especially for iPhone.

Learn to select low toxin foods and track your progress to healing.

Feel better within days by reducing food toxins.

Find it in the Shop: www.foodintol.com/shop



REFERENCES

More references on website

¹ Eaton S. Stone Agers in the Fast Lane: Chronic Degenerative Diseases in Evolutionary Perspective Am J Med 1988, Vol. 84, 739-749.

² Cordain L, *Cereal Grains: Humanity's Double-Edged Sword.* World Rev Nutr. Basel, Karger 1999, vol. 84, pp 19-73

³ Ludvigsson. Why diabetes incidence increases – a unifying theory. Ann N Y Acad Sci. 2006 Oct;1079:374-82

⁴ Cavallo et al. Cell-mediated immune response to casein in recent-onset insulin-dependent diabetes: implications for disease pathogenesis. *The Lancet* Volume 348, Issue 9032, pages 926 – 928, 5 October 1996.

⁵ Sollid et al. An inappropriate immune response Lancet 2001 Volume 358, Supplement 1

⁶ Kukreja et al. Autoimmunity and diabetes. The Journal of Clinical Endocrinology & Metabolism Vol. 84, No. 12 pages 4371-4378

⁷ Pastore et al. Six Months of Gluten-Free Diet Do Not Influence Autoantibody Titers, but Improve Insulin Secretion at High Risk for Type 1 Diabetes. The Journal of Clinical Endocrinology & Metabolism Vol. 88, No. 1 162-165

⁸ MacFarlane et al. A type 1 diabetes-related protein from wheat (Triticum aestivum). cDNA clone of a wheat storage globulin, Glb1, linked to islet damage. J Biol Chem. 2003 Jan 3:278(1):54-63

⁹ Jonsson et al. Agrarian diet and diseases of affluence – Do evolutionary novel dietary lectins cause leptin resistance? BMC Endocr Disord. 2005;5:10

¹⁰Ledochowski et al. Fructose malabsorption is associated with early signs of mental depression. Eur J Med Res. 1998 Jun 17;3(6):295-8

¹¹ Ledochowski et al. Lactose malabsorption is associated with early signs of mental depression in females: a preliminary report. Dig Dis Sci. 1998 Nov;43(11):2513-7

¹² Varea et al. P0853 Lactose and fructose malabsorption and depression in paediatric patients. *Journal of Pediatric Gastroenterology and Nutrition*. Volume 39 Supplement 1 June 2004 pp S381-S382

¹³ Ledochowski et al. Carbohydrate malabsorption syndromes and early signs of depression in females. *Dig Dis Sci.* 2000 vol. 45, no. 7, pp 1255-1259

¹⁴ Liu et al. Towards a possible aetiology for depression? *Behav Brain Funct.* 2007;3:47

Ludvigsson et al. Coeliac disease and risk of mood disorders – a general population-based cohort study. J Affect Disord. 2007 Apr;99(1-3):117-26