Special Diets & Celiac Disease

There are many, many different kinds of special diets in the world. Many people think of a diet as a way to lose weight. The special diets that I will outline in this Chapter are not intended for weight loss, but rather to relieve symptoms, behaviors or feelings. I have included a brief discussion of some of the more common special diets. Celiac Disease is covered in more detail at the conclusion of the Special Diet material. More information is available on the Internet on each of these special diets:

- Allergen Restricted Diet
- Candida or Yeast-free Diet
- Celiac or Gluten-free Diet
- Elimination Diet
- Feingold Diet
- Gluten-Free & Casein-Free Diet (GFCF Diet)
- Ketogenic Diet
- Low Oxalate Diet
- Raw Foods Diet
- Vegan Diet

Allergen Restricted Diet - just as the name implies someone on an allergen restricted diet is using a diet of foods free from the ingredients that they are highly allergic to or that produce symptoms that are unpleasant. Someone who is mildly allergic to milk, but gets a physical symptom of daily diarrhea, may use a milk-free diet to avoid daily diarrhea. All of these diets are done individually according to that person's reactions to foods, preservatives, or other additives.

Some one who reacts to sulphites or MSG, for example, will restrict foods that are known to contain sulphites or MSG. What is critical for people on allergen restricted diets is to get proper medical guidance from a licensed medical doctor so that you do not become malnourished in the process of avoiding food allergens. This is one of the mistakes that I made with Anne. While I spoke to many Registered Dieticians, none of them were competent to advise me on what should be done to make sure that Anne received the proper nutrients while she was on her allergen restricted diet.

<u>Candida or Yeast-Free Diet</u> - You commonly think of yeast as an ingredient in breads and other baked goods. Foods associated with yeast (or fungus) sometimes use a fermentation, aging, or pickling process. Cheeses, alcohols, vinegars, salad dressings, mayonnaise, ketchup, mustard, chocolate, coffee and tea are also sources of yeast. Many other additives or foods processed with chemicals are typically associated with yeast

including citric acid, enzymes, added B vitamins, stabilizers, anti-oxidants, and flavorings.

An individual who has a Candida or yeast problem, often referred to as Candida overgrowth, may have a wide variety of health symptoms including but not limited to: chronic depression, extreme fatigue, severe PMS or Premenstrual Syndrome, dizziness, weakness, inability to concentrate, headaches, migraine, sinusitis, asthma, colitis, endometriosis, hypoglycemia, constipation, conjunctivitis and arthritis.

If you know or suspect that you have a yeast overgrowth problem or Candida, one book that would be extremely worthwhile is <u>The Yeast Connection</u> by William Crook, M.D. This is considered a classic book on the subject, and if you have this problem, it would be to your benefit to become educated as you have access to huge relief with your symptoms by changing your diet, and in many cases by using a pharmaceutical drug to help kill off the yeast.

Some physicians still tell patients to eat yogurt after they finish a course of antibiotics. The reason they tell patients that is to replace the good bacteria or "flora" that an antibiotic kills. Consumers who can't tolerate milk, yogurt, or dairy can still get the benefits of the components of yogurt, which is acidophilus through commercially available dietary supplements. Our family uses a gluten-free, dairy-free acidophilus capsule that we open up and use in a vitamin shake. So going dairy-free doesn't have to remove your access to acidophilus. Read your supplement label carefully to make sure that your supplement is free of any allergens.

Foods that do not normally contain yeast (or fungus) include fresh vegetables, beans, meats, chicken, fish, some nuts and glass bottled water. People on a yeast-free or Candida diet normally avoid carbohydrates that contain sugar or yeast (sugar feeds the yeast), sweets, and fresh fruits because of the sugar content in addition to the previously mentioned yeast-containing foods. In this book, I have included several recipes that are free of sugar, yeast, and other problematic ingredients.

The health condition of yeast overgrowth or Candida can be extremely debilitating, however there are proven techniques to help a person with this problem improve dramatically. This issue is more common than people realize. If you have had on-going health problems that have not been resolved, this may be one area for you to investigate.

<u>Celiac or Gluten-free Diet</u> - More specific information about celiac disease is available at the end of this chapter as this is an overview. The celiac diet is a gluten-free diet. Gluten is found naturally in specific grains like wheat, barley, rye, kamut, spelt and a few other grains. Gluten is found in many commercially made products like salad dressings, sauces, mayonnaise, gravies, and products made from flours like breads, crackers, cookies, cakes, and other baked goods.

A person who has been placed on the celiac or gluten-free diet has to be willing to read food labels and ask questions to adhere to the gluten-free diet. This is not optional.

Gluten is also found in personal care products, some paper products (like envelope glue), some band-aids, and in many other products. Once a person on the celiac or gluten-free diet becomes educated, they still have to read labels and check for gluten because food manufacturers can and do change their food formulations every so often. A product that is gluten-free today may or may not be gluten-free tomorrow.

The good news is that since 2000 there has been an explosion in the array of gluten-free products available. There are more manufacturers offering a wider variety of products. All of the recipes in this book are suitable for people with celiac disease or who are on the gluten-free diet.

Elimination Diet - Occasionally you may hear someone say that they are on an Elimination Diet. This type of diet is typically recommended to someone who has health issues and a practitioner or dietician is trying to help the patient determine if the health issue is related to their diet. In an Elimination Diet, typically the patient will remove most or many foods from their diet to see if their health issue improves. Then, as directed by their dietician or health care practitioner, the patient will add individual foods back in over time. This can also be quite difficult and annoying. But is can be helpful in discovering the cause and in relieving symptoms.

Feingold Diet (salicylate) - Before I give you an idea of what the Feingold Diet is, I would like to discuss the symptoms and behaviors that the Feingold Diet has been known to address which includes: marked hyperactivity, impulsive actions, compulsive actions, emotional concerns, destructive behaviors, poor self-control, disruptive behaviors, aggression, depression, nervousness, mood swings, low tolerance for frustration, irritability, overreaction to touch, pain, sound or lights, low self-esteem, impatience, inability to follow directions or listen, poor muscle coordination, seizures, tics, eye muscle disorder, dyslexia and reading problems, speech difficulties and disorders, difficulty writing or drawing, auditory or visual memory problems, difficulty in comprehension and short term memory, difficulties in reasoning, ear infections, asthma, bedwetting (enuresis), daytime wetting, stomach aches, headaches, migraines, hives, rashes, eczema, leg aches, constipation, diarrhea, congestion, nightmares and bad dreams, difficulty falling asleep, restless or erratic sleep, and suicidal thoughts.

The Feingold Diet was named after Ben F. Feingold, M.D., a physician who was Chief of Allergy at Kaiser-Permanente Medical Center in San Francisco, California in the 1960's. The Feingold Diet eliminates artificial coloring, artificial flavoring, Aspartame (Nutrasweet, an artificial sweetener), and artificial preservatives BHA, BHT, and TBHQ, and foods that containing salicylate (pronounced Suh-LIH-Suh-Late). Salicylate is a group of chemicals related to aspirin. The Feingold Program incorporates the Feingold Diet but also eliminates fragrances and non-food items, which contain the chemicals previously listed.

Since 1976, there has been in existence a parent support group for families using the Feingold Diet. The Feingold Association of the United States is an outstanding organization which has excellent resources on their website which can be found at:

www.feingold.org. This wonderful organization has medical documentation available on their website which supports this therapy. I would highly recommend parents consider this non-invasive therapy as a method of addressing symptoms listed above. The Feingold Association of the United States can be reached at: 554 East Main Street, Suite 301, Riverhead, NY 11901, FAX (631) 369-2988. They have program materials available for purchase, which guides consumers through the Feingold Program for \$69.00. One book on the subject is *Why Can't My Child Behave?* By Jane Hersey, Director of the Feingold Association.

Gluten-Free & Casein-Free (GFCF) Diet - The Gluten-Free Casein-Free Diet, which is also referred to as the GFCF diet is one in which foods containing gluten and casein (dairy) are removed from the diet. The GFCF diet has become increasingly popular in the last few years as a non-invasive therapy or intervention for autism spectrum disorders.

Decades before the GFCF diet was applied to autism, it was used with some schizophrenia patients and it was referred to as the milk-free and grain-free diet. There are many highly scientific articles on the Internet about gluten molecules crossing the blood-brain barrier, and the opiate-effect of casein and gluten in some individuals. All of the recipes in this cookbook are suitable for individuals on the GFCF diet.

Ketogenic Diet - The Ketogenic Diet is a rigid metabolic diet used as a therapy for epilepsy patients or people who have seizures. The exact reason why the Ketogenic Diet works is at this point not known. With this diet, meals are high in fat and low in carbohydrates and protein to produce a high blood concentration of incompletely burned fat molecules called ketone bodies. This diet is one which absolutely requires medical supervision and should not be done without approval and on-going medical support.

The Ketogenic Diet, which was developed and implemented at the Mayo Clinic and Johns Hopkins University medical schools has produced marked improvements in seizure patients. This diet is often used with patients who have a lot of seizures and who do not respond to medication or surgery. Patients are usually on the Ketogenic Diet for two years, after which many patients remain seizure-free and no longer require anticonvulsant drugs or the diet. More information on the Ketogenic Diet can be found on the Internet or from your medical doctor.

Low Oxalate Diet - You can find information on the Internet about the low oxalate diet to help prevent kidney stones. However, I have included the low oxalate diet topic because it is a relatively new diet being used to treat children with autism and other disorders. Oxalates and the acid form oxalic acid are organic acids that come primarily from three sources: your diet, from molds (fungus) like Aspergillus, Penicillium and possibly Candida, and from your metabolism. A researcher named Susan Owens discovered that the use of a diet low in oxalates markedly reduced symptoms in children with autism and Pervasive Developmental Disorder (PDD).

Oxalates in the urine are much higher in individuals with autism than in normal children according to information put out by The Great Plains Laboratory, Inc. located in Lenexa, Kansas. The Great Pains Laboratory does a great deal of testing and lab work in the area of autism. Susan Owens reports a wide range of cognitive, behavioral and symptom improvements in children with autism. For more information on low oxalates as it relates to autism, search the Internet or contact The Great Plains Laboratory, Inc. and ask for the information flyer titled "Oxalates Control Is a Major New Factor in Autism Therapy" by William Shaw, PhD, Laboratory Director. The e-mail address for The Great Plains Laboratory is: *gpl4u@aol.com*, phone: (913) 341-8949, address: 11813 West 77th Street, Lenexa, KS 66214. Here is a list of some of the foods containing 7 or more mg oxalate per serving. Foods with an asterisk (*) have an extremely high amount of oxalates in them. A complete list of oxalates in foods can be found on the Internet at:

http://patienteducation.upmc.com/Pdf/LowOxalateDiet.pdf

Foods with 7 or more mg Oxalate Per Serving		
Starches	Vegetables	Nuts, Seeds
Fig cookies	Beans, green	Almonds
Fruit cake	Beans, baked in tomato sauce	Cashews
Graham crackers	Beets (tops, roots, greens)	Green beans, waxed and dried
Grits, white corn	Celery	Peanut butter*
Kamut (contains gluten)	Chives	Peanuts*
Marmalade	Collards	Pecans*
Soybean crackers*	Dandelion	Sesame seeds
Wheat germ* (contains gluten)	Eggplant	Sunflower seeds
	Escarole	Soy protein*
Fruits or juices	Kale	Tofu (soybean curd)*
Blackberries	Leeks*	Walnuts
Blueberries	Mustard greens	
Red currants	Okra*	Condiments
Dewberries	Parsley	Cinnamon, ground
Figs, dried	Parsnips	Parsley, raw*
Grapes, purple	Peppers, green	Pepper, >1 tsp/day*
Gooseberries	Pokeweed*	Ginger
Kiwi	Rutabagas	Soy sauce
Lemon peel*	Sorrel	
Lime peel*	Spinach*	Miscellaneous
Orange peel	Summer squash	Beer
Raspberries	Sweet potatoes*	Cocoa
Rhubarb*	Swiss chard*	Chocolate*
Strawberries	Tomato soup	Coffee, instant*
Tangerines	Vegetable soup	Tea*
	Watercress	
Dairy	Yams	
Chocolate milk		

^{*} Extremely high oxalate content.

Raw Foods Diet - The Raw Foods Diet is not a weight loss diet, but rather a way of living for some individuals in the U.S. and around the world. Individuals who adhere to the raw foods diet usually only eat raw foods. They don't cook or bake their foods. Individuals on the raw foods diet typically eat tree nuts, peanuts, and coconut in addition to the raw fruits and vegetables. The rationale behind the raw foods diet is that it is more in line with how our ancestors ate in days gone by. Raw foods contain helpful enzymes that are destroyed during the cooking and baking process. I would highly recommend seeking expert medical advice before considering the raw foods diet if you have food allergies or other health issues as there may be additional concerns. Given my children's food allergies, they would never be able to get enough protein, vitamins and minerals from a raw foods diet.

<u>Vegan Diet</u> - The Vegan Diet contains no animal foods or dairy products. Individuals who use a Vegan diet often are referred to as vegans. It is common for *vegetarians* to eat eggs and dairy, however the vegan diet eliminates both eggs and dairy products thus distinguishing it from the vegetarian diet.

Celiac Disease

This subject is near and dear to my heart personally. My second son was very young when we first began to suspect that he might have celiac disease, so I have been in the celiac disease conversation for more than nine years. He was recently diagnosed as clinically conclusive for celiac disease. Celiac disease is an autoimmune disorder in which foods that contain gluten destroy the villi in the small intestine. Celiac is one of the most treatable diseases on the planet, because if you catch it early and alter your diet to remove gluten, your body has the opportunity to repair itself. Every single recipe in this book is absolutely gluten-free. We are a gluten-free household and we know what life is like to be gluten-free (and dairy-free, and egg-free, and nut-free, etc.).

Gluten is found in wheat, barley, rye, spelt, kamut and other grains which means that gluten is most often found in breads, crackers, and other starches made with flour. Gluten is also found in other food products, which we will get into later. There are around 256 symptoms for celiac disease, which make it confusing to lay people. More important than the 256 symptoms is the fact that 60% of children with celiac disease and 41% of adults with celiac disease will never have any symptoms (or be asymptomatic). The value in getting diagnosed early is that you avoid other serious health complications, like osteoporosis, infertility, neurological conditions and even cancer.

The statistical prevalence of celiac disease in the U.S. in average healthy people is 1 out of 133 people which makes Celiac disease much more common than Alzheimer's Disease, Cystic Fibrosis, Hemophilia, Parkinson's, autism, Rheumatoid arthritis, Lupus, Multiple Sclerosis, and Crohn's disease. Most of the diseases I just listed are household words. People may not know what the disease is or what it means to have the disease, but they have at least heard of it. The celiac community has done a tremendous job in

creating awareness and education in the last seven years. There is a whole new level of awareness relative to celiac disease, but it is just a start.

Because 60% of the children and 41% of adults with celiac will not have symptoms, it means that there are a lot of people who have the disease who simply don't know it. The earlier a child is diagnosed with celiac disease the better they fair in avoiding the development of an autoimmune condition. If a 20 year old is diagnosed with celiac disease, they then have a 34% chance of developing an autoimmune condition. The incidence of autoimmune diseases in the general U.S. population is 3.5% to give you a comparison.

Many children and adults with celiac disease do have symptoms and yet they still do not get diagnosed. According to a Facts and Figures sheet by the University of Chicago Celiac Disease Program, it takes an average of **11 years** for a person with celiac symptoms to be diagnosed. That typically means a consumer experiencing symptoms going from doctor to doctor to doctor looking for an explanation and relief of their symptoms. So what are some of the general or typical symptoms for celiac disease? Before I even list one, it is important to drill into your head that 60% of children will not have any symptoms and 41% of adults also will not have any symptoms.

People with celiac disease may have <u>only one</u> symptom if they have any. The most common symptoms include: anemia, stress, nervous condition, depression, irritable bowel, stomach ulcer, edema, gallstones, food allergy, colitis, diarrhea, fatigue, abdominal pain, constipation, weight loss, weakness, malnutrition, and bloating. The chance of being diagnosed with celiac disease if you have any of the symptoms is 1 in 56. The emphasis is on early detection and getting the individual on a gluten-free diet to avoid the development of additional health problems, which can occur after the intestinal villi are destroyed and other health issues set in.

There are many conditions or diseases associated with celiac disease which include: diabetes (insulin dependent, 6%), thyroiditis, Sjogren syndrome and other connective tissue diseases, primary biliary cirrhosis, Down's syndrome, Turner Syndrome and Williams Syndrome.

Celiac disease is inherited and therefore the risk increases if one of your relatives has it. If you have a first-degree relative who has celiac disease, which would mean your parent, child or sibling, you have a 1 in 22 chance of developing it too. If you have a second-degree relative who has celiac disease, which would mean your aunt, uncle, or cousin, you have a 1 in 29 chance of having it. It has been my experience that many relatives of people diagnosed with celiac disease do not want to get tested. They don't want to know if they could have it. That would constitute avoidance and possible denial, which is sad because celiac disease is a very manageable disease.

What these consumers don't understand is that if they do have celiac disease and don't get diagnosed earlier than later, they are at a much higher risk for developing serious health problems including cancer. The small intestine is where your vitamins and

minerals and other nutrients are absorbed. If the villi in your small intestine are destroyed and you are not absorbing vitamins, minerals, and other nutrients, you are at risk for a whole host of medical issues.

Celiac disease can be tested by biopsy or by blood tests. There has been an FDA approved blood test for celiac disease for several years now. The important action to take is to get tested and rule celiac disease in or out. It is a benefit to other family members to know conclusively if you have celiac disease or are simply gluten intolerant.

Many consumers diagnosed with celiac resort to eating large quantities of rice and rice-based products. I know that is a common mistake as I made it with my son, Noah. Noah could not tolerate any gluten as an infant displaying such symptoms as projectile vomiting when given just a small amount of it. We used rice as a mainstay in Noah's diet and by the time Noah was just two years old, he could not tolerate rice at all. It was a painful day to realize that rice was now the problem. Had I known more about food allergies and the development of additional food allergies when he was born we could have avoided this problem completely. My friend, Linda Breitbach, spent four years in China eating rice every day. She became allergic to rice as well. It is important for people with Celiac disease to vary the foods that they eat or they stand a very good chance of developing additional food problems.

The last time I checked, the organizations who work to promote celiac awareness and education knew that over 40% of people with celiac disease were also lactose intolerant. And a high percentage of people with celiac also had issues with one or more other foods like soy and canola. The celiac community has begun to recognize the incidence of additional food allergies with celiacs. But it needs to move to the next level. Individuals with celiac disease would do very well to incorporate a rotation diet so that they avoid becoming allergic to rice, corn, potatoes, or other foods common to their diet.

A rotation diet is not that difficult. Mostly we avoid doing a rotation diet because it is foreign to us and it "seems like" a lot of work. In a separate chapter I have provided the foundation for anyone to develop their own rotation diet. This is the one thing that is proven to prevent the development of new food allergies. Many people from the celiac support group that I knew well would complain of gastrointestinal issues. Food allergies can show up with the same symptoms as gluten contaminations. I hope over time that the celiac communities will adopt and promote the rotation diet as a way of preventing further hardships for their members. After all, it is a real tragedy to have celiac disease and then become allergic to rice because most of the commercially made gluten-free products contain rice. Trust me on this one. It is not a road you want to go down!