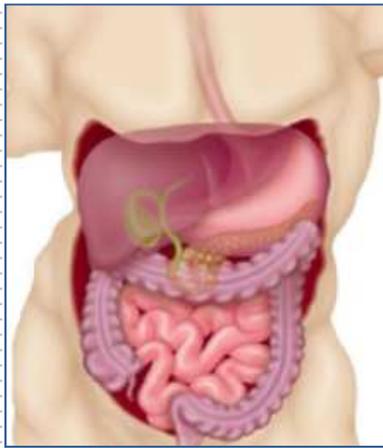


The Complete Digestive Health Guide



Empowering You with
Knowledge and Solutions
for Sustainable Good Health

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Introduction

Chapter 1

We would like to extend a warm word of welcome and gratitude to you for acquiring the Book on Complete Digestive Health.

The reason why we decided to write this book is quite simply because *we are innately compassionate and truly do care about the health and well-being of our fellow man*. Furthermore, we have witnessed an alarming rate of increase in the number people around the world who are suffering unnecessarily from persistent pain and discomfort caused by the presence of H.pylori and other gastrointestinal tract disorders. The main reasons for this are over prescription of conventional drugs that have generally become ineffective in treating the H. pylori bacterium that has now become resistant to most antibiotics.

This book contains the **vital link** you just won't find anywhere else, the link, that is essential for you to finally rid yourself of H. pylori and the other potentially life threatening illnesses and diseases it could cause in your life. In this book we also reveal our personal treatment regimens for all the digestive disorders, including H. pylori. These have all been used very successfully in treating thousands of our clients.

We therefore believe that if you read this book it will almost certainly have a profoundly positive impact on your future health and your quality of life.

If you are currently struggling with your health and feel you are making little or no progress, and even though it may have been for several years already, then please don't despair because **what you are about to read is going to put you right back on the path to good health**.

In summary the **primary purpose** of this book is to provide you with a 4 Point Health Strategy that will enable you to recover fully from your current state of health by ...

1. providing interesting and relevant content that clearly explains the vital role and importance of your Digestive Health,
2. encouraging you to Take Direct Control of Your Own Health - because no-one else will,
3. explaining the role of Health Care Professionals and assisting you to find the right one who will work closely with you,
4. providing you with ALL the facts and 100% PROVEN TREATMENT REGIMENS, that WILL give you the best possible chance of getting completely healthy again.

All of the above will provide you with REAL HOPE and sustainable good health once again!!!.

Well, my friend we wish you all the very best in your quest for good health. Please take time to read through this entire book very thoroughly, as you are sure to discover the great secrets contained in the Chapters and Paragraphs ahead that will help you to achieve sustainable good health.

Happy reading!!!

Are you placing enough emphasis on your Digestive Health?

One of the most prominent illusions the majority of us live with each and every day of our lives is the mania about dying suddenly of an illness or disease. Does this sound just like you? Probably because most of us go through life in constant fear of dying or getting seriously ill from one of the dreaded or opportunistic diseases like **Cancer, Pneumonia, Heart Attacks, Liver failure, Immune dysfunction**, etc..

What is really striking though is that most people simply just don't realize that these diseases or illnesses are **all directly linked** to or associated with some or other Digestive System dysfunction. These include malabsorption of food or decreased ability of our bodies to absorb vital micronutrients, or longstanding and undetected intestinal infection, **like H. pylori or Candida Albicans**. If you feel that you are not currently placing enough emphasis on your Digestive Health, we urge you to read on.

You Are, What You Eat

There is a well known cliché "**You are, What you Eat**" and yet this very truth is so often completely over looked and considered by many as being insignificant. It would seem that we have all been brought up to believe that we only need regular exercise to prevent heart disease and avoid certain foods or smoking to prevent cancer and so on. Whilst all these preventative measures have merit and are necessary, the main focus on maintaining a healthy Digestive System, somehow, seems to have been completely side lined in our thought process.

Let's look at this principle in more detail. If "**You are, What you Eat**", then, what you eat needs to be fully digested, and for the micronutrients to be fully absorbed by your digestive system, it makes sense that you need to have a balanced and fully functional Digestive System. Think of it this way, you have a car that runs on gasoline but somehow the gasoline that you put in your gasoline tank is contaminated with water. If you then run your car, what is going to happen? It is most certainly not going to run at all well and if you run it long enough it is most certainly going to break down completely. It doesn't matter that you have polished the paintwork, topped up the tyre pressures or oil levels. The mixture of water in the gasoline is going to cause problems with the combustion cycle of the engine, causing an imbalance in the ignition that will in turn damage the mechanical parts with ultimate seizure of the engine. Your Digestive System works on exactly the same principle and if you continue to take it for granted your body is not going to absorb enough nutritional value from the food you eat, or lack of it, until one day you experience what you most fear - one of the dreaded or opportunistic diseases.

Doesn't this sound just like one of those "common sense" issues you never thought much about and now all of sudden it makes absolute sense? The stark reality is that the sooner you personally **take direct control of your own health** and recognize that **your Digestive System is actually the most critical element and highest priority you have for achieving sustainable good health**, the sooner you are going to live a far happier, healthier and more productive life.

Taking Direct Control of Your Health

First and foremost, there are too many people around the world that put their health in the hands of someone else. Just think about this a minute and ask yourself - would you normally trust a stranger with anything that could cause devastation in your life? Would you trust a stranger with your Credit Card when you have given them your pin number? I bet that your answer is a definite NO. So the question is, why do you place so much trust in anyone else when it comes to your health? Your health is critical to your future.

There is only one way to put an immediate stop to this and that is **“Take Control of your own Health”** and as quickly as possible.

It really isn't difficult and the benefits in doing so are immeasurable. If you have already been suffering with bad health for a while then you will know precisely what we're talking about here. We bet that you have been through the mill with many different treatments and are probably feeling far worse off now than when you first got ill.

We wouldn't be surprised if you wake up every morning feeling an overwhelming sense of despair when you feel the same old aches and pains again and again. Well, you are not alone! We have seen this so often in the many years. The good thing here is that we are determined to help you to **become a victor rather than another victim**.

The first step is for you to realize that **You (and only you) are responsible for your Health**.

This is what many successful Doctors do for **all** their patients...

They always encourage their patients to “Take Direct Control of their own Health”. You might ask why? This is simply because they have found that patients who are in control of their own health, are generally far more healthier than the ones that don't. They also find that they are less prone to getting sick in the first place because they tend to eat a healthy diet, exercise regularly and are far more positive about life in general.

Here are 6 tips great tips for you ...

1. When you decide to take control of your own health, make sure that you stick to your decision.
2. When you start feeling ill, deal with it as quickly as possible.
3. Supplement your diet with an appropriate range of essential vitamins and minerals.
4. Build up your own knowledge base about the illnesses or diseases you or family members are most prone to. The more you know, the better. This is vital to being able make informed and confident decisions in future.
5. When looking for suitable treatments, always look for natural treatments that are supported by clinical and scientific evidence. Without this most claims made by the manufacturers are worthless.
6. Find a Doctor or Health Care Professional that is open minded and is willing to work together with you. This is an important part of this journey and you should rely on their experience for Diagnosis, Pathological Testing and general medical advice.

Once you have taken direct control of your health you will feel so much more confident about the future. After all **good health is your Divine right and you deserve to live a long, happy, healthy and prosperous life**.

That's all great, but there is still one more very important aspect you need to add to the equation... **you need to find a suitable Health Care Professional**.

Finding a Health Care Professional

To complete your new health oriented structure, we encourage you to go and **find a good Health Care Professional** who you can really relate to and trust. It is extremely important to find a practitioner who will listen to you and be prepared to be part of your healing, one that **holds hope as an ideal**, rather than a fear of disease.

Good health is your Divine right. Remember, your health is your responsibility and **you need to remain in direct control of it**. Practitioners in Complimentary and Alternative Medicines, like licensed Chiropractors, Naturopaths, Acupuncturists, Nutritionists, Homeopaths are generally less rigid and far more progressive in holistic therapy, natural healing and herbal alternatives.

The Complete Digestive Health Guide

When you have learnt something new please share it with your Health Care Professional and seek their confirmation and support before rushing into it. Remember that Health Care Professionals are highly skilled in diagnosing, testing, monitoring, and advising on most aspects of your health and alternative treatments. The key is for you and your Health Care Professional **to work closely together**, with the common purpose focused on your good health.

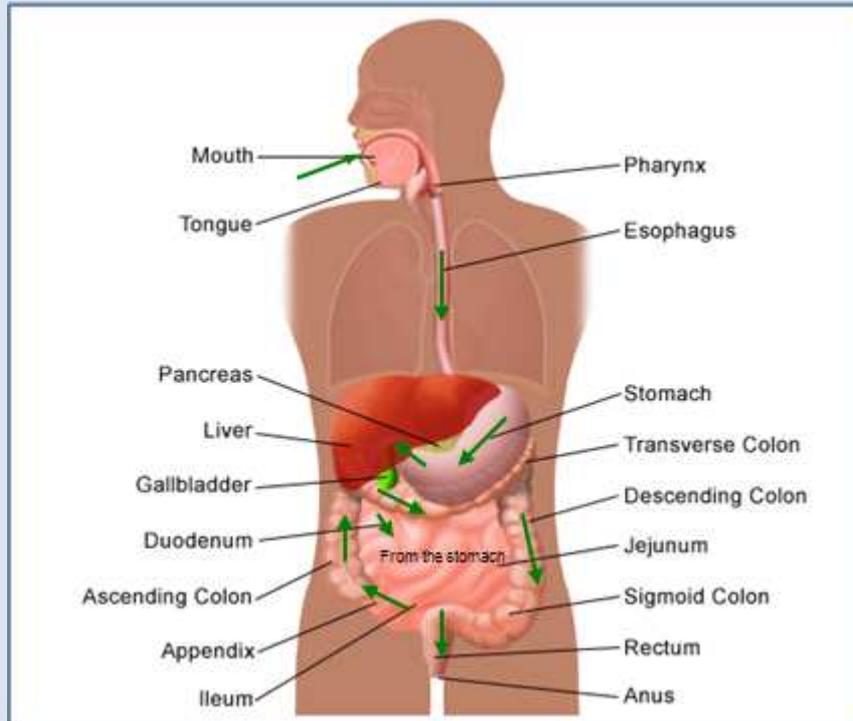
To find a suitable Health Care Professional we suggest that you do so by visiting the websites of various Associations for Naturopathic Doctors, Herbalists, Chiropractors, Acupuncturists, etc. in your country. Most of these associations provide a database where you enter your zip or post code and state/ county/ province and then provide a list of their members who have practices closest to your home.

Once you have located one or more nearby Healthcare Professionals, or in fact found someone with a good reputation for dealing with your specific kind of problem, set up an interview. All Healthcare Professionals are extremely busy, so be prepared to pay for the time you book for your interview. This is YOUR chance to find out whether or not you are going to work well with the Doctor. If such an interview is NOT granted, that's not your Doctor! Did you not choose your own Bank, Mortgage company, Accountant? So choose your Doctor carefully, your life depends on it!

Wishing you an abundant life in good health,

The Natural Health Team

Let's take a look at your Digestive System Chapter 2



The above illustration shows what happens sequentially at each stage of your digestive process. A fully functional digestive system can take you around 18-30 hours from start to finish, to complete the whole process.

Normal System

Your digestive system, also known as the gut or gastrointestinal tract, is essentially a continuous muscular tube about 7 - 8 metres (30ft) long running from the mouth to the anus. It is designed to process your food and fluids that you consume daily, the main processes involve ingestion, digestion, absorption and elimination.

Mouth

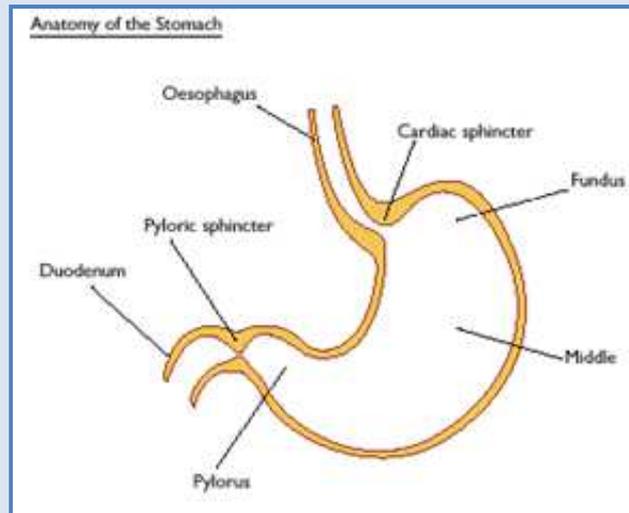
Food enters your body via the mouth where you chew it and it is masticated. This action helps to break up the food enabling it to be swallowed and enter the esophagus. Your chewing action releases salivary enzymes which help to break down the food, heralding the very start of the digestion process.

Esophagus (Gullet)

This section of your digestive tract conveys the ingested food and drink from your mouth to your stomach. This is partly under the effect of gravity but also as a result of the continuous contraction and relaxation of the muscular wall of the esophagus, a process known as peristalsis.

Stomach

Is a muscular j-shaped "bag" which acts as a receptacle for your food and fluids after ingestion. Food is then churned around and mixed with gastric juices, a mixture of acid, enzymes and other materials, which continues to break down food into smaller particles in preparation for the absorption of the nutrients released by digestion. The stomach enzymes in particular are responsible for the breakdown and digestion of proteins.



Small Intestine (Duodenum)

This is the longest section of your digestive tract and consists of the duodenum, the jejunum and the ileum. Your small intestine is very important as it is the major site of digestion of food and subsequent absorption of essential nutrients which your body needs to function efficiently.

Large Intestine (Ascending, Transverse and Descending Colon)

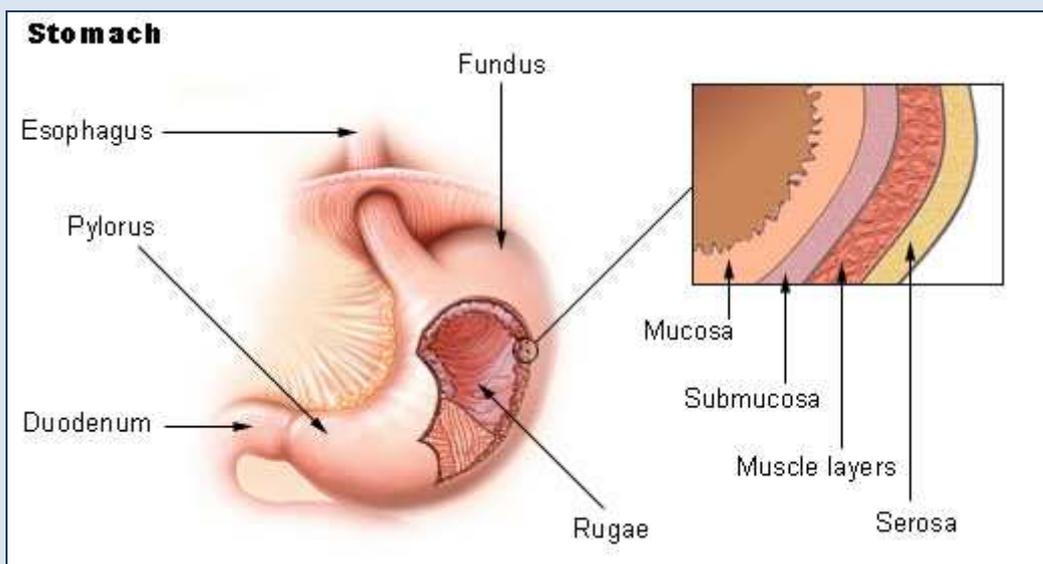
Otherwise known as the colon or bowel, this is the final section of your digestive tract. Indigestible food remains in the colon whilst fluids pass from the small intestine into the large intestine where one of the most important processes involves the absorption of water through the wall of the intestine and into the bloodstream. As a result, as material passes through the large intestine it becomes progressively drier and more solid in consistency and the waste matter forms into "stools".

Rectum

This is essentially a storage reservoir at the end of the large intestine and adjacent to the anus for accumulating of stools prior to elimination from your body.

Anus

The opening at the end of the digestive tract which allows waste matter to be eliminated from your body.



How your Digestive System works

The main function of your digestive system is to take in and process food in order to provide your body with energy (calories from macronutrients like fats, carbohydrates or starches), basic building blocks for enzyme function and tissue repair (amino acids from proteins) and micronutrients (vitamins, minerals, essential fatty acids, trace elements). The gut also handles some substances made in the body such as cholesterol and bile salts, and provides an environment for the growth of 'friendly' bacteria needed for your good health.

A healthy digestive system generally doesn't cause problems, with the result that most of us don't even think about what's happening to our insides. We may sometimes hear bubbling, gurgling sounds or wind coming up (belching) or going down (flatulence). But in fact, these are only tiny parts of the constant conversation that our digestive system has with other parts of our body, particularly our brain.

Our digestive system is similar to a miniature factory. Basic materials go in at one end...they're processed...the flow rate is controlled...products are created and diverted to one side...other things are added... still more products are diverted to the side... and finally accumulated residue passes out at the end.

Good vs Bad Bacteria in your Digestive system

Believe it or not, there are more bacteria in your colon than there are humans on this planet! And just as on this planet, there's competition for space to live. Just as local conditions affect people's preferences for somewhere to live, the local conditions of the large intestine determine the types of bacteria that will grow. Like people, bacteria directly affect their environment: while some bacteria have minimal effect, 'harmful' bacteria may damage their environment and increase the risk of infection, whereas 'good' bacteria help keep the environment healthy, often improving digestion and absorption of nutrients, as well as producing certain vitamins. The key is to get the right balance between 'good' and 'bad' bacteria in the intestine. The target balance should be 85% good bacteria vs. 15% bad bacteria for a health digestive system.

Probiotics and Prebiotics – what's the difference?

There are millions of bacteria naturally and necessarily present in the human gut (colon; large intestine). The population of different types of bacteria are called the microbial flora of the colon, and we know of many useful functions they carry out which support health. The bacteria ferment the small amount of starch that resists digestion in the small intestine to produce 'short-chain fatty acids'; these are an energy supply for the body and also keep the cells of the colon wall healthy. The microbial flora also acts as a physical barrier to protect the colon from pathogenic (disease-causing) bacteria.

The bacteria in the colon described as being beneficial are mainly lactobacilli and bifidobacteria, and the well-being of the 'host' is supported when these prevail over other bacteria that may be potentially harmful. The concept of supporting the balance of microbial flora to favour benign bacteria has led to the development of 'colonic foods' described as probiotics and prebiotics.

Probiotics are live microbial supplements that have been shown to survive transit through the upper digestive system, and may beneficially colonise the microbial flora of the large intestine. Such benign digestion-resistant bacteria have been added to many popular and now widely-available 'functional' foods such as yogurts and milk-based drinks.

Prebiotics are types of carbohydrates (oligosaccharides) that cannot be digested in the small intestine: they reach the colon where they selectively support the growth of benign bacteria already present. In this way, the healthier bacteria in the colonic microflora are stimulated and are given a competitive advantage over other types of bacteria present. Some foods naturally contain small amounts of oligosaccharides (*leek, asparagus, chicory, Jerusalem artichoke, bananas, oats*), but higher levels are usually found in functional foods fortified with prebiotic ingredients. Human breastmilk can be considered the original functional food; it contains many factors that support bifidobacteria growth in the colon, and this may protect the infant from gastrointestinal problems.

The balance of colonic microflora is known to be affected by the use of antibiotics, and may also be adversely influenced by diets low in carbohydrate, ageing and some disease conditions. The use of probiotics/prebiotics have been investigated to support colonic health in inflammatory conditions such as Crohn's disease and inflammatory bowel disease. Some studies also support benefits for the protection from, and the treatment of diarrhoea. Research is currently investigating other possible health effects.

The warning signs when things start to go wrong?

Your digestive system can go wrong in many different ways, but it usually sends out some signals to let you know that things aren't right. The following symptoms may occur: Indigestion, heartburn, bloating, cramping, flatulence, gurgling sounds, abdominal pain, changes in bowel habit, constipation, diarrhea, nausea or vomiting are all tell-tale signs that your food is not digesting, but rather fermenting or putrefying. The usual result is that the micronutrients are not being absorbed properly which may then have the following consequences: fatigue, headaches, dry skin, weight loss, anemia, joint pains and stiffness, lowered immunity, poor concentration, brain fog, depression, PMS, greasy and sticky stool, and in some circumstances may lead to inappropriate weight gain. Clearly these problems arise from deficiencies of nutrients like the fat-soluble vitamins A, E, D and K, generally the B group vitamins, as well as minerals like iron, calcium, potassium and magnesium. The lack of these coupled with the lack of absorption of calories as carbohydrates or fats, and the low uptake of repairing proteins, will cause you to have unexplained cravings. Usually these are sweet cravings.

You should see your Doctor, preferably a Chiropractor, Naturopath, Acupuncturist, Nutritionist or Homeopath, for advice if...

- Your bowel habit has changed within the last two to three months and you've not changed your diet, been traveling or started taking medication
- You've seen blood in your stools – fresh red blood, or black stools (containing digested blood)
- You have persistent, unexplained abdominal pain or discomfort
- You have lost 2-5kg (4lb) in weight recently for no obvious reason
- You have lost your appetite and/or frequently feel sick for no obvious reason
- You are frequently constipated and simple treatments such as a high-fibre diet, more fluids, more exercise and over-the-counter laxatives haven't worked
- You frequently open your bowels more than three times a day or if your stools are often loose or watery
- You frequently get a lot of unexplained wind (flatulence), bloating or abdominal distension

What causes Indigestion?

Considering the digestive organs, namely the mouth and teeth, digestive enzyme glands throughout the mouth, stomach, gall bladder and liver, the pancreas and the small and large intestine, any problem with these areas singularly or collectively will result in indigestion and promote malabsorption. Your stomach produces a strong acid that helps digest food and protects you against infection. A layer of mucus lines the stomach, esophagus and intestines to act as a barrier against this acid. If the mucus layer is damaged, the acid can irritate the tissues underneath causing various degrees of indigestion and discomfort. You may also have too little stomach acid, which will promote fermentation of your swallowed food rather than digestion.

Singularly or collectively the following make the symptoms worse ...

- The food you eat – lack of soluble and insoluble fibre in your diet, high levels of bad fats (trans-fats like margarine, cooking oils, shortenings etc, highly processed foods rich in food chemicals like stabilizers and preservatives).
- Your lifestyle: too much of a hurry, eating too fast and too much. It takes about twenty minutes for your brain to register a full stomach, so eating too much too fast, is definitely overloading your stomach.
- Being overweight, gallbladder disease
- Traveling
- Lack of sleep (you should have at least 7- 8 hours restful sleep every night)
- Dehydration (you should drink 8 glasses of purified water each day)
- Getting older
- Having irregular meals, because long periods between meals give the acid more time to act (each meal neutralizes the acid for a while)
- Drinking excess alcohol
- Smoking
- Long term or Frequent use of Pharmaceutical or other) Drugs and their side effects
- An impaired or dysfunctional Immune System
- Lack of Prebiotics (*allium group of carbohydrates*)
- Lack of Probiotics (especially of the *acidophilus*, *lactobacillus* and *bifidobacter groups*) that are essential bacteria required to digest your food, particularly after use of Antibiotic treatments
- Lack of Omega 3 essential fatty acids
- Stress and anxiety
- Pregnancy
- Peptic ulcer (stomach or duodenal ulcer) and presence of Helicobacter Pylori
- Candidiasis (presence of Candida Albicans) – fungal infection in the stomach
- Chronic Parasitic infections
- Small bowel and gastric surgery
- AIDS related gastroenteritis
- Certain cancers
- Acid Reflux, Heartburn

Digestive Disorders and Infections

Digestive disorders are probably the most overlooked and yet important problem in most Western countries. These diseases, including chronic gastritis (inflammation of the stomach wall), ulcers, gallstones, pancreatitis from chronic alcohol abuse, liver diseases, irritable bowel syndrome, Crohn's disease, ulcerative colitis, and Coeliac's disease are common examples of the condition that result in malabsorption syndromes. Colo-rectal cancer is one of the top three cancers. They also appear to be occurring with increasing frequency when compared to 10 years ago and more alarmingly they are now cropping up at an earlier and earlier age in teenagers.

The CRUX of the MATTER

Considering that the body works as a complete unit (in physiological terms), it's not difficult to see how malabsorption can lead to certain dreaded illnesses like *heart disease, cancer, osteoporosis, arthritis, auto-immune disease* – in fact this may be the basis for all so-called chronic illnesses that are constantly on the rise despite billions of Dollars being thrown into research and development of more drugs.

Acid Reflux/ GERD

Introduction

Acid Reflux or Gastro-esophageal Reflux Disease (GERD) is a common condition, and one of the most frequent causes of indigestion and heartburn. It happens when acid or bile from your stomach leaks back up through your esophagus (gullet). This irritates and damages the delicate lining of the esophagus.

When stomach acid leaks back up into the esophagus, it is called acid reflux. Normally the sphincter, a muscle at the join between the esophagus and stomach, tightens up to stop acid, bile and food coming back up out of the stomach. Acid reflux happens when the sphincter does not work very well, or when the stomach is very full (for example, after a large meal).

The esophagus can cope with a small amount of stomach acid or bile, and some people are more sensitive to it than others. Most of us experience acid reflux from time to time as heartburn or indigestion.

However, if acid reflux is frequent it can damage the sensitive lining of the esophagus. This is when simple heartburn becomes GERD. If the damage to your esophagus leads to inflammation (soreness and swelling), this is called esophagitis.

You can have GERD with or without having esophagitis, but the longer your acid reflux is left untreated, the more likely you are to have damage to your esophagus and develop esophagitis and then even esophageal cancer.

Symptoms

The main symptom of GERD is heartburn. Heartburn is a form of indigestion and has nothing to do with the heart. It is usually felt as a burning pain behind your breastbone (in the front of your chest, over the heart), and happens when stomach acid damages the inside of your esophagus.

Heartburn is most likely to occur in connection with the following activities:

- After a heavy meal.
- Bending over.
- Lifting.
- Lying down, particularly on the back.

- Smoking
- Overweight
- Pregnant

The main symptoms of GERD can include:

- an acidic, sour taste in your mouth,
- burning pain in your throat,
- bloating and belching,
- stomach pains,
- burning pain in your throat and esophagus when you swallow hot drinks,
- regurgitating food (when food comes out of your stomach and back up your esophagus),
- nausea and vomiting, and
- vomiting blood.

Symptoms tend to get worse after eating, especially after a large fatty meal.

If you are very sensitive to acid, you can develop symptoms without much reflux. However, some people are less affected by acid, and can have a lot of reflux without showing many symptoms.

More Acid Reflux (GERD) Symptoms

According to one study, nearly three-quarters of patients with frequent GERD symptoms experience them at night. Patients with night-time GERD also tend to experience more severe pain than those whose symptoms occur at other times. One study found that patients with night-time pain reported levels of severity that were similar to those reported in angina and congestive heart failure.

The severity of heartburn does not necessarily indicate actual injury in the esophagus. For example, Barrett's esophagus, which causes precancerous changes in the esophagus, may trigger few symptoms, especially in elderly people. On the other hand, people can suffer severe heartburn without the presence of damage to the esophagus.

Dyspepsia

Up to half of GERD patients also have *dyspepsia*, a syndrome consisting of the following:

- Pain and discomfort in the upper abdomen.
- Fullness in the stomach.
- Nausea after eating.

People can have dyspepsia without having GERD.

Regurgitation

Regurgitation is the feeling of acid backing up in the throat. Sometimes acid regurgitates as far as the mouth and be experienced as a "wet burp." Uncommonly, it may come out forcefully as vomit.

Less Common Symptoms

Many patients with GERD do not experience heartburn or regurgitation. Instead symptoms may appear in other locations.

Chest Sensations or Pain

Patients may have the sensation that food is trapped behind the breastbone. Chest pain is a common symptom of GERD. It is very important to differentiate it chest pain is caused by heart conditions, such as angina and heart attack.

Symptoms in the Throat

Less commonly, GERD may produce symptoms that occur in the throat:

- Acid laryngitis. A condition that includes hoarseness, dry cough, the sensation of having a lump in the throat, and the need to repeatedly clear the throat.
- Trouble swallowing (*dysphagia*). In severe cases, patients may even choke or food may become trapped in the esophagus, causing severe chest pain. This may indicate a temporary spasm that narrows the tube, or it could also be an indication of serious esophageal damage or abnormalities.
- Chronic sore throat.
- Persistent hiccups.

Coughing and Respiratory Symptoms

Asthmatic symptoms like coughing and wheezing may occur. In fact, in one study, GERD alone accounted for 41.1% of cases of chronic cough in nonsmoking patients. The incidence was even higher when GERD and asthma were combined.

Chronic Nausea and Vomiting

Nausea that persists for weeks or even months and is not attributable to a common cause of stomach upset may be a symptom of acid reflux. In rare cases, vomiting can occur as often as once a day. All other causes of chronic nausea and vomiting should be ruled out, including ulcers, stomach cancer, obstruction, and pancreas or gallbladder disorders.

Causes

There are **several** causes of GERD.

1. Insufficient Acid to Digest the food you eat

The biggest cause of Acid Reflux is insufficient acid. This will come as a major surprise to most of you reading this, but it is a fact. As we get older we produce less hydrochloric acid that is essential to digest the food we eat. When we have insufficient acid the undigested food begins to ferment, in fact rot whilst still in our stomach. This fermenting soup causes us to feel bloated, full of gas that then causes pain and inflammation thus causing a great deal of discomfort. When excess gas has built up it has to be released and when it does you experience a mini explosion that releases the bile upwards and into your esophagus. This is contrary to the common belief that is expressed in the media and by many Doctors.

2. Poor sphincter control

There is a sphincter (muscle) at the join between your stomach and the esophagus. It relaxes to let food into your stomach but then tightens to stop stomach acid or bile coming out and back up into your esophagus. In some people, the sphincter does as intended, and this causes acid reflux.

Having a **hiatus hernia** can also cause poor sphincter control. In this type of hernia, part of the stomach pokes through your diaphragm, the main breathing muscle under the lungs. The muscles in your diaphragm are then stretched and don't allow the sphincter to close, so acid or bile can escape from your stomach back up into the esophagus.

3. Smoking relaxes the sphincter muscles, so makes acid reflux more likely.

Some people find that **particular foods**, such as fatty foods, chocolate, or oranges, relax the sphincter, while others such as coffee and tomatoes directly irritate the Esophagus.

4. Particular medicines can make GERD worse by relaxing the sphincter, for example, diazepam. Others may directly irritate the esophagus, for example, potassium supplements.

5. Pressure on the stomach

Acid reflux can also happen when there is a lot of pressure on your stomach forcing the stomach contents out and back up into the esophagus.

This might happen after a very large meal, during pregnancy, if you are constipated, or when you wear tight-waisted clothes or bend forward.

In people with simple heartburn, symptoms only happen occasionally after a particularly big, spicy, or fatty meal. In people with GERD, symptoms occur often and after any type of food.

In most people, acid reflux does not cause a problem. The body will naturally drain the acid back into the stomach and the symptoms will be relieved. However, some people have a very sensitive esophagus, so even a very small amount of acid can cause irritation, leading to esophagitis.

Diagnosis

If you have the typical symptoms of GERD and acid reflux, you probably will not need any tests. Your Health Care Professional will make a diagnosis based on your symptoms.

If you have severe or unusual symptoms, or if they do not get better when treatment is started, you may need to have some tests. These may include:

- **endoscopy** - a thin tube with a microscope on the end is passed down your Esophagus towards your stomach. It enables doctors to see whether the inside of your Esophagus is red and inflamed,
- **acidity test** on the inside of the esophagus the test is performed for a 24-hour period and involves a thin wire being passed through your nose and into your Esophagus. The wire measures the pH of your esophagus and displays the results electronically,
- **barium swallow** a substance called barium, which shows up white on an X-ray, is swallowed to enable doctors to identify any abnormalities in your Esophagus, or
- **radiolabelled technetium** in some hospitals radioisotope imaging may be used to demonstrate GERD. The technique uses very small doses of technetium-sulphur colloid to help confirm a diagnosis.

Conventional Drug Treatments

Here are the reasons why conventional prescribed drugs dramatically reduce the amount of hydrochloric acid you have in your stomach, thereby diminishing drastically your ability to digest your food properly. This reduction in the amount of stomach acid also reduces a very important defense mechanism against food-borne infections and increases your likelihood of food poisoning. Not digesting your food properly also increases your risks for nearly every other chronic degenerative disease.

Two studies with laboratory mice, conducted by Howard Hughes Medical Institute scientists at the University of Michigan Medical School, **indicate that reducing the amount of hydrochloric acid you have in your stomach could be exactly the wrong thing to do.**

Recommended Diet for Acid Reflux

Certain foods can aggravate your heartburn symptoms, and it's best to limit or avoid completely those foods and drinks that result in acid reflux. There are some foods that have little or no potential for causing heartburn.

The foods listed in the Table below are the most common foods that are usually pretty safe for heartburn sufferers to eat.

For a listing of foods that you may be able to enjoy occasionally, please check out the table for foods that are Safe for Acid Reflux. For a listing of foods that should be avoided entirely, as they are usually responsible for a higher occurrence of heartburn, please check out the table for Foods To Be Avoided.

This is by no means a complete list, and in your personal situation, you may either find you can eat the foods from the "Avoid" group with no problem or have problems with foods not listed.

It is a good idea to keep a Food Diary. For approximately two weeks, write down what you eat, when you eat and any symptoms you may experience. This will help you and your doctor plan your diet and decide on any change in eating habits you may need.

Safe Foods For The Acid Reflux Diet

Food Group	Foods With Little Potential to Cause Heartburn
Fruit	<ul style="list-style-type: none"> • Apple, fresh • Apple, dried • Apple juice • Banana
Vegetables	<ul style="list-style-type: none"> • Baked potato • Broccoli • Cabbage • Carrots • Green beans • Peas
Meat	<ul style="list-style-type: none"> • Ground beef, extra-lean • Steak, London Broil • Chicken breast, skinless • Egg whites • Egg substitute • Fish, no added fat
Dairy	<ul style="list-style-type: none"> • Cheese, feta or goat • Cream cheese, fat-free • Sour cream, fat-free • Soy cheese, low-fat
Grains	<ul style="list-style-type: none"> • Bread, only whole grain • Cereal, bran or oatmeal • Corn bread • Graham crackers • Pretzels • Rice, brown or white • Rice cakes
Beverages	<ul style="list-style-type: none"> • Mineral water
Fats / Oils	<ul style="list-style-type: none"> • Salad dressing, low-fat
Sweets / Desserts	<ul style="list-style-type: none"> • Red licorice • Potato chips, baked

Foods To Avoid For an Acid Reflux Diet

Food Group	Foods To Avoid
Fruit	<ul style="list-style-type: none">• Orange juice• Lemon• Lemonade• Grapefruit juice• Cranberry juice• Tomato
Vegetables	<ul style="list-style-type: none">• Mashed potatoes• French fries• Onion, raw
Meat	<ul style="list-style-type: none">• Ground beef, chuck• Marbled sirloin• Chicken nuggets• Buffalo wings
Dairy	<ul style="list-style-type: none">• Sour cream• Milk shake• Ice cream• Cottage cheese, regular
Grains	<ul style="list-style-type: none">• Macaroni and cheese• Spaghetti with sauce
Beverages	<ul style="list-style-type: none">• Liquor• Wine• Coffee, decaffeinated or regular• Tea, decaffeinated or regular
Fats / Oils	<ul style="list-style-type: none">• Salad dressing, creamy• Salad dressing, oil & vinegar
Sweets / Desserts	<ul style="list-style-type: none">• Butter cookie, high-fat• Brownie• Chocolate• Doughnut• Corn chips• Potato chips, regular

Dealing with Acid Reflux/ GERD

As with all problems, the first step is to identify the cause. This has been discussed above. Remedial measures that can be taken are as follows: Firstly, eat less and chew more. The mixing of digestive enzymes with your food in the mouth kick starts the digestion process, minimizing the chance for fermentation in the stomach and facilitating the speedy passage of food through the stomach. Choose foods that are in their natural state, or whole foods. Include plenty of vegetables, seasonal fruit and unrefined grains. Avoid refined carbohydrates, sugars, caffeine, chocolates and spicy foods. Avoid big rich meals, especially food fried in oils and fats. Don't eat when angry or upset, nor when rushed and can't sit down. It helps **not to** lie down immediately after eating, this allows gravity to keep the stomach contents below the opening of the lower esophagus. Take a short and gentle stroll after a meal. We recommend taking small sips of water throughout the meal. This does dilute the stomach acid a bit, but also buffers it, reducing the acidity and also any discomfort with reflux. This may not help some people, the best is to try for yourself. Avoid cigarette smoking and too much alcohol.

Matula Herbal Formula™, taken twice daily on an empty stomach, has proven to be highly effective in treating Acid Reflux, so it comes with our highest recommendation. **Matula Herbal Formula™** is a natural anti-bacterial, anti-parasitic and anti-fungal product that also increases stomach motility (stomach content movement), helps to re-synchronize acid secretion and promotes a healthy digestive system.

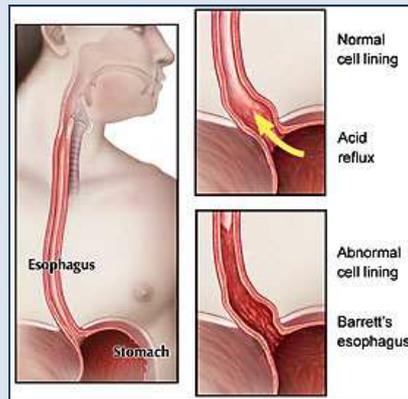
In general, we find having a freshly made vegetable juice before eating helps. Include some cabbage along with apple and carrot. Taking about 15ml of Swedish bitters before or after your meal is very helpful. On a regular basis, take 500mg L-Glutamine daily, away from food. Take DGL (licorice root extract) two to three times a day after food. Both of these will help to repair damaged stomach lining. Slippery elm is particularly helpful to reduce the discomfort of reflux. You can also use herbal teas made from chamomile, lemon balm, fennel, marshmallow root or celandine to alleviate troublesome symptoms.

About Barrett's Esophagus

Barrett's esophagus is an important consequence of long-standing acid reflux disease because patients with Barrett's are at risk for developing cancer of the esophagus. The acid reflux stimulates changes in the lining of the esophagus (the food tube connecting the mouth to the stomach), so that it resembles the lining of the intestines. This alteration (or metaplasia) represents a precancerous condition.

Barrett's is uncommon. About 5 percent of people with GERD develop Barrett's esophagus. But once diagnosed, there is a 30- to 125-fold increased risk of developing esophageal cancer; an estimated 0.5 percent of Barrett's patients develop cancer each year. The cancer can spread to lymph nodes and other organs. Esophageal cancer arising from Barrett's esophagus is the second fastest growing type of cancer in the United States.

Patients with Barrett's esophagus frequently are found to have severe gastro-esophageal reflux disease. This observation has led to the widely accepted belief that Barrett's esophagus develops as a result of long-standing reflux esophagitis. It is not known whether it is gastric acid, gastric or pancreatic proteolytic enzymes, bile or some other caustic substance that is responsible for the changes leading to Barrett's esophagus.



Prevention of Esophageal Cancer

Annually, approximately 14,250 Americans will be diagnosed with esophageal cancer, and 13,300 will die of this malignancy. Of the new cases, 10,860 will occur in men and 3,390 will occur in women. So it is important to recognize the importance of prevention.

Doctors cannot always explain why one person gets cancer and another does not. However, scientists have studied general patterns of cancer in the population to learn what things around us and what things we do in our lives may increase our chance of developing cancer.

Anything that increases a person's chance of developing a disease is called a risk factor; anything that decreases a person's chance of developing a disease is called a protective factor. Some of the risk factors for cancer can be avoided, but many cannot. For example, although you can choose to quit smoking, you cannot choose which genes you have inherited from your parents. Both smoking and inheriting specific genes could be considered risk factors for certain kinds of cancer, but only smoking can be avoided. Prevention means avoiding the risk factors and increasing the protective factors that can be controlled so that the chance of developing cancer decreases.

Although many risk factors can be avoided, it is important to keep in mind that avoiding risk factors does not guarantee that you will not get cancer. Also, most people with a particular risk factor for cancer do not actually get the disease. Some people are more sensitive than others are to factors that can cause cancer. Talk to your Health Care Professional about methods of preventing cancer that might be effective for you.

The following risk factors and preventive factors may affect whether a person develops esophageal cancer:

Tobacco and Alcohol

Cancer of the esophagus is strongly associated with tobacco and alcohol use. Studies have shown that avoiding tobacco and alcohol decreases the risk of developing esophageal cancer.

Diet

A diet with plenty of green and yellow fruits and vegetables and cruciferous vegetables (such as cabbage, broccoli, and cauliflower) may lower the risk of developing cancer of the esophagus.

Nonsteroidal Anti-Inflammatory Drugs

Some studies have shown that the use of nonsteroidal anti-inflammatory drugs or NSAIDs (such as aspirin and other drugs that reduce fever, swelling, pain, and redness) is associated with a reduced risk of developing both cancer of the esophagus and adenocarcinoma (*Cancer that begins in cells that line the inside of organs. These organs make substances like hormones or milk*) of the esophagus. Use of NSAIDs, however, increases the risk of heart attack, heart failure, stroke, bleeding in the stomach and intestines, and kidney damage.

Helicobacter Pylori Infection and Gastric Atrophy

Infection with the *Helicobacter pylori* bacteria causes inflammation and ulcers in the stomach lining, which may lead to a condition called gastric atrophy (cells that line the

stomach are destroyed). This condition may increase the risk of developing cancer of the esophagus.

Acid Reflux and Barrett Esophagus

Gastric reflux (the backing up of stomach contents into the lower section of the esophagus) may irritate the esophagus and, over time, cause Barrett esophagus. Barrett esophagus is a condition in which the cells lining the lower part of the esophagus have changed or been replaced with abnormal cells that could lead to adenocarcinoma (*Cancer that begins in cells that line the inside of organs. These organs make substances like hormones or milk*) of the esophagus. It is not known if surgery or other medical treatment to stop gastric reflux will reduce the risk of developing adenocarcinoma of the esophagus.

For more detailed information please talk to your doctor or health care professional about cancer prevention methods as they will be likely to help you understand more.

Non-Ulcer Dyspepsia

What is Non-Ulcer Dyspepsia?

Non-ulcer dyspepsia (NUD) has been recognized for many years. In fact, soon after barium x-rays of the stomach were first performed, more than one hundred years ago, a condition of 'x-ray negative dyspepsia' was reported. In later years terms such as pseudo-ulcer syndrome, pyloro-duodenal irritability, functional dyspepsia, nervous dyspepsia, and gastritis have all been used to describe this condition.

Perhaps this cluster of names suggests the perceived nature of the problem. The word dyspepsia is not really favoured by physicians as its meaning is so variable, being used to describe nausea, pain, cramps, heartburn, regurgitation, gallbladder colic, and bloating, or combinations of these. However, perhaps the broad range of symptoms is appropriate as it allows a patient to describe symptoms that often change from day to day and are ill defined and difficult to pinpoint.

What are the Symptoms of NUD?

Common symptoms of NUD include upper abdominal pain or heartburn, sour taste in mouth, excessive burping, bloating, feeling full after eating a small amount of food, stomach pain or discomfort, nausea and, at times, vomiting. Characteristically, these complaints are sporadic, poorly localized, and without consistent aggravating or relieving factors.

In times past, many doctors would have diagnosed peptic ulcer disease in a patient complaining of upper abdominal pain and nausea but now with currently available investigations such as detailed barium x-rays or gastroscopy, frequently no ulcer is found. In fact, twice as many will not have an ulcer as will in this grouping of 'dyspeptic' people. In the past, diagnoses such as an 'early ulcer', 'gastritis', or a 'touch of an ulcer' have been given while now we would more likely label it as non-ulcer dyspepsia. In other words, from the initial symptoms one may suspect an ulcer but on searching no ulcer can be found.

Symptoms not associated with NUD, and of which one should be wary and seek medical attention, include ongoing weight loss, blood loss (either red or black stools) or progressive intensifying pain.

What causes NUD?

Speculations have been raised as to what could cause such symptoms. Diminished stomach acid secretion, inflammations of the stomach or duodenum which may result from injury to the mucous lining of the stomach being exposed to stomach acid, food allergies, lifestyle and diet,

psychological factors, medication side effects (from such drugs as non-steroidal anti-inflammatory drugs and aspirin) and **Helicobacter pylori** infection, have all had their proponents.

Non-ulcer dyspepsia is now considered to be a motility problem where the normal downward pumping and squeezing of the esophagus, stomach, and duodenum is disturbed leading to uncoordinated and, at times, ineffectual emptying of the upper gut and subsequently the symptoms of pain, fullness, and bloating. In many respects, non-ulcer dyspepsia becomes the upper gut equivalent of irritable bowel syndrome.

How is NUD Diagnosed?

NUD is not a disease - in that its symptoms cannot be explained by biochemical or structural abnormalities. There is no test available to specifically determine if a patient has non-ulcer dyspepsia or not, therefore, the diagnosis process is to rule out known diseases.

The role of investigations and testing in NUD is often misunderstood. All conventional tests for NUD are normal because dysmotility is difficult to confirm with current technology. Frequently people take a normal x-ray or endoscopy to mean 'nothing is wrong' even though they have clear symptoms and this can lead to anger or frustration. Therefore, the diagnosis is based on the patient's history and prudent negative tests.

Dealing with NUD

The treatment of NUD is variable. First, attention to diet is crucial. Regular eating times with slow and thorough chewing, avoidance of large rich meals and the inclusion of sufficient fibre, are important to normalize upper gut motility. Any food specifically identified as causing symptoms should be avoided, as well as excesses of milk, alcohol, caffeine, sugary foods, fatty or fried foods, tomatoes, citrus fruits, or spice. After meals, it may help to avoid lying down for at least two hours. When you do lie down, it would be best to raise the head of your bed by about six inches.

We find that by using **Matula Herbal Formula™**, taken twice daily is extremely effective at reducing the disabling symptoms of NUD. To date this treatment has had zero side effects.

Certain traditional herbal teas help to ease symptoms, like Chamomile, Lemon Balm or Lemon Verbena, Celandine, Licorice root, Caraway, Angelica and Bitter Candy Tuft. Some Chinese remedies are very helpful as is acupuncture. A Homeopath may treat you constitutionally. Once all normal investigations have cleared you for serious illnesses, you need to seek out the treatment that will suit you the best.



Helicobacter Pylori (H. pylori)

What is Helicobacter Pylori (H. pylori)?

Helicobacter Pylori is a spiral shaped bacterium that lives in the stomach and duodenum (section of intestine just below stomach). It has a unique way of adapting in the harsh environment of the stomach.

The inside of the stomach is bathed in about half a gallon of gastric juice every day. Gastric juice is composed of digestive enzymes and concentrated hydrochloric acid, which can readily tear apart the toughest food or microorganism. Bacteria, viruses, and yesterday's steak dinner are all consumed in this deadly bath of chemicals. It used to be thought that the stomach contained no bacteria and was actually sterile, but H. pylori changed that. The

stomach is protected from its own gastric juice by a thick layer of mucus that covers the stomach lining. H. pylori takes advantage of this protection by living in the mucus lining.

Once H. pylori is safely ensconced in the mucus, it is able to fight the stomach acid that does reach it with an enzyme it possesses called urease. Urease converts urea, of which there is an abundant supply in the stomach (from saliva and gastric juices), into bicarbonate and ammonia, which are strong bases. This creates a cloud of acid neutralizing chemicals around the H. pylori, protecting it from the acid in the stomach. The reaction of urea hydrolysis is important for diagnosis of H. pylori by the breath test.

Another defense H. pylori has is that the body's natural defenses cannot reach the bacterium in the mucus lining of the stomach. The immune system will respond to an H. pylori infection by sending white cells, killer T cells, and other infection fighting agents. However, these potential H. pylori eradicators cannot reach the infection, because they cannot easily get through stomach lining. They do not go away either, though, and the immune response grows and grows.

Polymorphs die, and spill their destructive compounds (superoxide radicals) on stomach lining cells. Extra nutrients are sent to reinforce the white cells, and the H. pylori can feed on this. Within a few days, gastritis and perhaps eventually a peptic ulcer results. It may not be H. pylori itself which causes peptic ulcer, but the inflammation of the stomach lining; i.e. the response to H. pylori.

How H. pylori Survives in Acid

H. pylori is the only bacterial organism in the stomach on earth that cannot be killed by hydrochloric acid.

So how does this incredibly destructive bacterium survive in acid?

- H. pylori is able to survive gastric acids due to its ability to produce an enzyme called urease. Through a chemical process, urease can neutralize stomach acid, making it easy for the bacteria to survive in its own acid free zone.
- Because of their corkscrew shape, the bacteria can easily penetrate the stomach's protective mucous lining.
- The 'antacid' effect of H. pylori fools your stomach into producing more acid, which then makes your stomach cells more susceptible to damage through exposure to acid and pepsin
- Too much acid and pepsin can damage a healthy and unprotected stomach lining and this is basically how ulcers are formed.

You may think that if H. pylori is capable of surviving in acid, then it has to be invincible? Thankfully this is not the case and although it is difficult to treat **it can be done.**

How H. pylori is transmitted and how you can get re-infected?

H. pylori is believed to be transmitted orally. Many researchers think that H. pylori is transmitted orally by means of fecal matter through the ingestion of waste tainted food or water. In addition, it is possible that H. pylori could be transmitted from the stomach to the mouth through gastro-esophageal reflux (in which a small amount of the stomach's contents is involuntarily forced up the esophagus) or belching, common symptoms of gastritis. The bacterium could then be transmitted through oral contact.

Scientific evidence proves that H. pylori can reside in oral cavities. As such oral-oral transmission of H. pylori is possible through kissing on the lips. Another possibility is that similar bacteria to H. pylori, in pets, called Helicobacter Canis (H. canis), can be transferred to humans by cats and dogs that tend to lick you on your hands or face. Oral-oral transmission up until recently has not been regarded as a big threat, but it actually is.

If you or your spouse or children have been tested positive for H. pylori it is important to test your entire family for presence of H. pylori. If you do not do this there is risk of H. pylori re-infection to the treated family member and also an on-going re-infection of all family

members. It is good practice to prevent anyone outside of your immediate family group from kissing your children on the lips. This includes grandparents.

Scientific evidence also proves that *H. pylori* can be transmitted through sexual activity and particularly from oral sex. However, new evidence suggests that *H. pylori* can also be transmitted through normal sexual activity because the vagina can accommodate and sustain *H. pylori*. It is also possible to re-infect partners or spouses with *H. pylori* through sexual activity.

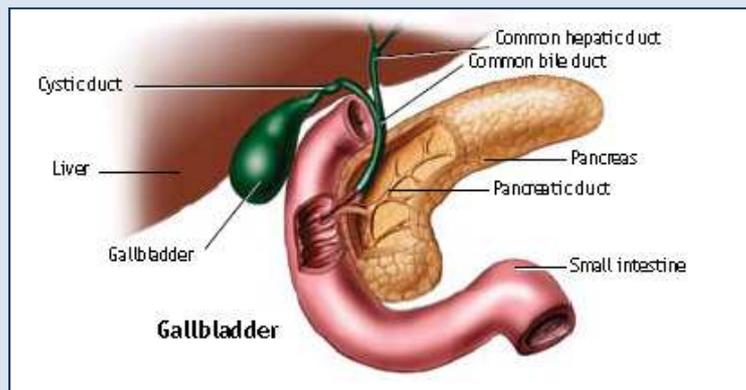
H. pylori transmission is associated with lower socioeconomic status and poor hygienic conditions. Therefore, we should keep in mind the possibility that these bacteria might be transmitted via contaminated water and food. Dairy and Poultry food products are a particularly noteworthy source of *H. pylori*. It is therefore very important to cook eggs for longer than 3 minutes to prevent infection of *H. pylori*.

It should also be noted that *H. pylori* infection is hereditary and that it does run in families. About half of the infections are hereditary and the rest are acquired from the environment during childhood.

Our advice is that if you are diagnosed with *H. pylori* it is important to have your spouse or partner and other family members tested as well. The reason for this is that once you have completed a successful eradication treatment, the last thing you want is to be re-infected by the oral-oral transmission from our spouse or children. Besides that it is important to reduce risk of re-infection by breaking the ongoing cycle of transmission within a family unit.

Where else can *H. pylori* colonize or hide in Your Digestive Tract?

Scientific research has shown that *H. pylori* can and does colonize and hide in other areas of our digestive system. One of these areas is in the Gallbladder or Common Bile duct as illustrated in the image below. There is, however, no clear cut evidence that this applies to everyone who is tested *H. pylori* positive. Having said this though, we have found that patients who have been evaluated using ultrasound, where the result shows presence of gallstones, are more likely to have an *H. pylori* infection present in the Gallbladder or Common Bile duct. When this is the case, we recommended a gall flush to really cleanse the gallbladder and common bile duct of gall stones and any presence of *H. pylori*. The reason for this is that treating *H. pylori* needs to cover all areas where *H. pylori* can colonize otherwise you never get rid of this hardy bacteria.



Tell Tale Symptoms of H. pylori

The following symptoms/syndromes are known to be related to H. pylori but we would like to point and make it quite clear that the many symptoms associated with Gastrointestinal Tract diseases and infections do overlap extensively and can cause patients great confusion.

- acid reflux
- acne
- B-12 & folic acid deficiency
- bad breath
- burping/belching
- calcium deficiency
- cancer
- chronic pain, including in the back and between the shoulder blades
- constipation
- depression
- diarrhea
- fatigue
- fibromyalgia
- gas, morning, painful or fowl smelling
- gastritis
- gallstones/gallbladder disease
- headaches
- heartburn
- indigestion
- intense hunger
- iron deficiency
- low stomach acid
- malabsorption
- migraines
- nausea
- poor sleep
- rosacea
- stomach bloating
- ulcers
- upper abdominal pain

It is quite possible that after the H. pylori bacteria has been successfully eradicated, you may have similar symptoms after treatment as you did before treatment. If this is the case then you will need to ask your Health Care Professional to further diagnose what may be causing these symptoms. So please don't confuse yourself with or rely on symptoms to determine whether you still have H. pylori after or during treatment.

The Latest H. pylori Facts

- 75% of the world's population is infected with the H. pylori bacterium. That means that right now over 4.6 billion people are infected worldwide.
- 816 million people alive right now MAY develop a stomach ulcer caused by an infection of H. pylori.
- Almost 70% of H. pylori strains found in the West are now resistant to the antibiotic metronidazole, and nearly 15 per cent are also resistant to clarithromycin. Yet both of these drugs are still heavily prescribed in the treatment of ulcers.
- Over 50% of gastric cancer patients are infected with H. pylori.
- Up to 90% of all stomach ulcers are caused by an infection of the H. pylori bacterium.
- Most people have never heard of H. pylori. 60% of people surveyed believe that ulcers are caused by stress, and nearly 20% believe that stomach ulcers are caused by spicy foods.

H. pylori does not cause ulcers in every infected person. The reason for this is unknown. It is thought that ulcers could be caused by a combination of factors, such as a stressed out

lifestyle, eating habits and an infection of *H. pylori*. This is difficult to prove because there are so many variants particular to individual cases and to different cultures.

Are you infected with *H. pylori*?

Research shows that *H. pylori* is present in 75% of the world's population. When you consider this you can see there is a good chance you may be infected, especially if you have the symptoms of a stomach ulcer.

Also when you consider that nearly 90% of people with stomach ulcer symptoms are infected with this bacterium, as are 50% of new patients with stomach cancer, then you may need to get a proper diagnosis to be on the safe side.

These facts, listed below, are not to scare you - they are simply to give you an idea of the magnitude and severity of *H. pylori* infections - this is a hardy little bug and difficult to get rid of, especially if you opt for a conventional drug therapy that your doctor will probably prescribe.

The only way to be sure if you are infested with *H. pylori* is to have a Laboratory Test done. If you haven't had a test done yet then we suggest you contact your Health Care Professional to arrange to have a test done. There are a number of tests that are available to test for *H. pylori* infection.

The 3 Big Reasons why Drug Therapies Fail

No. 1 - Side Effects

When you take any of the prescribed drug therapies for *H. pylori* or any other illness for that matter, you will suffer from side-effects - there is no question about that. Side effects can be so bad that many people have to abandon the treatment early.

No.2 - Difficult Treatment Program

The difficulty you will face is strictly sticking to a 10 or 14 day drug treatment is another reason to cause these therapies to fail. Drugs prescribed in these treatments will require that doses be taken up to four times each day – with a total of 20 to 24 pills a day!!

No.3 – *H. pylori* has a high resistance to antibiotics

H. pylori's resistance to antibiotics is increasing steadily. Almost 70% of *H. pylori* strains in the West are now resistant to the antibiotics metronidazole and clarithromycin, both of which are prescribed in Triple and Quadruple Therapies.

Drug Therapies have a 70% Failure Rate

Let's have a look at those different drug therapies now, but also have a quick look at the **complex treatment programs of these therapies** BEFORE you end up paying a fortune for a course of medication that you know you probably won't be able to stick to, and which ALSO has many side effects that you may not be able to cope with.

Dual Therapy

Dual therapy involves the use of an antibiotic and a PPI (Proton Pump Inhibitor) like Prilosec or Nexium. PPI's help reduce stomach acid which in turn helps promote the healing of peptic ulcers or inflammation. **(This in turn causes indigestion and the food you eat to begin rotting and fermenting in your stomach, that then causes a dysfunctional digestive system and other diseases like Acid reflux/ GERD.)**

Vital Statistics

Side Effect Rating – Low to Medium

Claimed Cure Rate – 70% (only if you complete the course)

Actual Cure Rate – 20 to 30% (taking into account all those who started the treatment – figures include those who could not finish the course due to side-effects or who did not follow the treatment regime properly)

Doctors and patients who prefer to handle the use of fewer drugs, may find that they are wasting their time with this therapy as *H. pylori* has become immune to most single doses of antibiotics. Dual therapy has a claimed cure rate of around 70% for peptic ulcers, although we estimate that this is closer to 30% at best after talking to doctors who have had very little success in the past with this. As a result, Dual therapy is hardly prescribed any more.

Triple Therapy

Triple therapy became the preferred drug treatment for peptic ulcers in 1998 and also for patients with *H. pylori* gastritis. This treatment now involves a 10-day or 2-week course of two antibiotics along with a Proton Pump Inhibitor (like Prilosec or Nexium) or an acid blocker.

Vital Statistics

Side Effect Rating – Medium to High

Claimed Cure Rate – 80 to 85% (only if you can complete the course)

Actual Cure Rate – 30 to 40% (taking into account all those who started the treatment - figures include those who could not finish the course due to side-effects or who did not follow the treatment regime properly)

The aim of Triple Therapy is to balance side-effects with effectiveness. This treatment is fairly complicated and it may have you taking up to 20 pills a day. Can you imagine what that is doing to your system? To start with, try nausea, dizziness, vomiting, headaches, diarrhea, dark stools, metallic taste in the mouth, and yeast infections in women. We are talking about **major negative side-effects** here – in fact, the side effects are bad enough to put most people off finishing a 2-week course.

Quadruple Therapy

Even more complicated and more difficult to take, than Triple Therapy. And with even more side-effects. Quadruple Therapy is also a two week drug treatment for stomach ulcers. And yes you guessed right, this is another chemical cocktail of two antibiotics, a proton pump inhibitor, as well as a further cytoprotective agent which offers your stomach lining protection if you really have to take aspirin or other NSAIDs. The risk of side effects with Quadruple Therapy is higher than with Triple Therapy

Vital Statistics

Side Effect Rating – High

Claimed Cure Rate – 85% to 90% (if you can complete the course)

Actual Cure Rate – 25 to 40% (taking into account all those who started the treatment - figures include those who could not finish the course due to side-effects or who did not follow the treatment regime properly)

The difference between Triple and Quadruple Drug Therapy

The most common drug therapy prescribed by doctors for peptic ulcers is Triple Therapy. In cases when it is imperative for you to have to take NSAIDs (anti inflammatory drugs) for another life threatening medical condition, then a further drug is added to your Triple Therapy. This is known as Quadruple Therapy. Dual Therapies have been phased out because they are really ineffective and outdated.

The Ravaging Negative Side Effects of Drug treatments

LISTED SIDE EFFECTS OF DRUGS COMMONLY PRESCRIBED FOR H. pylori				
Category Name	What it does	Drug Brand Names	Generic Names	Negative Side Effects
Antacids	Neutralizes stomach acid	Tagamet, Zantac, Mylanta, Tums, Gaviscon, Gelusil, Maalox and Rennie's	Aluminium Hydroxide	Possible breast enlargement for males, dizziness, diarrhea, fatigue and headaches
Antibiotics	Used to treat and eradicate H. pylori	Achromycin, Tetracycline, Novatetra, Nu Tetra, Flagyl, NeoTric, Novonidazol, Trikacide, Amoxil, ApoAmoxi, Amicillin, Novamoxin, Nu Amoxi, ProAmix	Tetracycline, Amoxicillin, Metronidazole, Clarithromycin	Possible joint pain, diarrhea, dizziness, fever, flu-like symptoms, stomach upset, low blood pressure, kidney damage, increased liver enzymes, mouth ulcers, nausea, light sensitivity, itching, rash, skin discoloration, hives, vomiting, heartburn, shortness of breath, blood disorders and loss of appetite, Candida overgrowth
Proton Pump Inhibitors	Stops production of stomach acid. Used for treatment of Acid Reflux - GERD	Prilosec, Nexium, Prevacid, Losec, Zonton, Inhibitol, Protonix, Somac, Pantoloc, Aciphex, Pariet	Omeprazole, Lansoprazole, Rabeprazole, Esomeprazole, Pantoprazole	Possible stomach pain, constipation, diarrhea, dizziness, upper respiratory tract infection, headache, nausea, rash, vomiting and increased risk of pneumonia
H2 Receptors	Used in Quadruple therapy to protect the stomach lining against NSAIDS. Reduces the amount of acid your stomach makes	Tagamet, Pepcid, Axid, Zantac	Cimetidine, Ranitidine, Famotidine, Nizatidine	Possible breast enlargement in males, diarrhea, dizziness, fatigue, headaches, impotence and constipation

Nexium, Prevacid and Prilosec, and the H2 acid blockers like Tagamet, Pepcid and Zantac are reportedly some of the worst drugs available.

Nexium is probably the most popular Proton Pump Inhibitor prescribed for treating peptic ulcers. Pay attention to the **warning** this drug carries;

WARNING

“Antibiotics prescribed in conjunction with Nexium for the treatment of peptic ulcers have occasionally been known to cause life-threatening allergic reactions as well as severe side effects. If you have been prescribed antibiotics in conjunction with Nexium, please make sure you check on Amoxil and Biaxin for more information.”

Why Acid blockers damage your health

One of the first ulcer medications most people will try is an antacid. Most of us hope that this will cure any suspected ulcer and that an expensive trip to the doctor won't be necessary. We can live in hope, but this course of action is definitely not going to fix any ulcer, let alone **heartburn or acid reflux!** The reason is that you need to treat the cause of ulcers and not just the symptoms. Eradication of H. pylori has to be the first step in the process.

It is normally only when antacids fail, that you decide to visit your doctor who will diagnose through one of the laboratory tests that you have an H. pylori infection. The first course of action will normally be a Triple Therapy for you. Be warned that Triple Therapy has an **extremely difficult treatment program** to stick to, and the failure rates are high because of this.

Acid Blockers - Side Effects they aren't telling you about!

Acid Blockers are used in Quadruple therapy to protect the stomach lining against NSAIDS - they work by reducing the amount of acid your stomach produces. Sounds like good logic, but there are serious consequences when this the acid content in your stomach is reduced artificially !!

Blocking or reducing the production of your stomach acid will actually **worsen your existing condition**. Normal levels of stomach acid are absolutely necessary to digest proteins properly and to allow your body to absorb vitamins and minerals.

***"By blocking or reducing the production of stomach acid.....
.....you are creating a dysfunctional digestive system"***

When there is not enough stomach acid, proteins and vitamins from the food you eat simply cannot be absorbed fully, and this can leave you undernourished. And if you are undernourished your immune system will break down, making you more susceptible to all sorts of diseases. Stomach acid also protects you by killing fungi, bacteria, and viruses found in the food you are eating.

By blocking your stomach acid you are taking your natural defense systems down, leaving yourself wide open to all those harmful fungi, bacteria, and viruses!

So if you're taking any one of these prescribed drugs you could unconsciously be making yourself more susceptible to food poisoning, parasites, and other stomach problems, including more ulcers and Candida Overgrowth.

***"Antacids are one of the most dangerous treatments
for stomach ulcers....bottom line - avoid them! "***

Antacid medications

Many people rely on antacids, assuming that too much stomach acid results in ulcers. Many antacid medications designed for "too much acid" can actually add fuel to the fire.

Do you know the antacid called Alka-Seltzer?

Get this! It contains aspirin which is known to cause ulcers if used over prolonged periods. Because Alka-Seltzer is NEVER going to fix ANY ulcer, and you are enjoying the temporary relief every time you pop one, you may end up taking this antacid for a prolonged period of time. In this way the aspirin found in Alka-Seltzer can actually cause stomach ulcers.

Here's another one – Tums

This source of relief contains another common antacid ingredient, calcium carbonate, which can cause constipation in addition to lowering your stomach acid that causes serious digestive problems.

Conclusion

Considering the above, you can quickly conclude that **drug therapy is not an ideal solution**. The H. pylori bacterium that needs to be eradicated is very resistant to the drugs, the drug treatment is difficult to follow, and the drugs you have to take are going to give you some nasty side effects!

Treating Helicobacter Pylori (H. pylori)

Is Prevention Better than Cure?

If you are tested positive for Helicobacter Pylori (H. pylori) the best advice we can offer is to treat it **as soon as possible**. The old saying "Prevention is Better than Cure" holds true, especially when you accept the fact that you could develop Peptic Ulcers and subject yourself to a great deal of pain and unnecessary suffering. You will also run a risk of developing gastric cancer **if you leave this chronic infection untreated**.

And that is not all - growing evidence has also linked the presence of H. pylori to heart attacks. So please treat this infection as a matter of urgency.

In mainstream medicine, the choice of treatment is currently limited to Triple Therapy, or Quadruple Therapy. These therapies consist of two or three strong antibiotics used in combination at higher than normal dosages, along with either a further drug which will either be a Proton Pump Inhibitor, or a Histamine H₂-receptor, depending on the cause of the ulcer.

Clearly these methods have **many negative side effects**, and doctors are now reporting failure rates as high as 70% with these therapies. Thousands of Doctors are faced with this scenario, and this was a major reason **why so many of their patients simply are not treated effectively with the antibiotic regimens**. As a result of the above, we recognized several years ago that integrative, natural or functional medicine was the best available option for treating infections like H. pylori. As such we are constantly in search of safe and natural medicines that can replace the conventional and potentially toxic pharmaceutical drugs.

The Basis for Successful H. pylori Treatment

In September 2006, we launched a remarkable and completely unique natural alternative that completely eradicates all strains of H. pylori bacteria, and WITHOUT any negative side effects.

After **successfully using** this natural treatment on **thousands of our clients since September 2006**, we can say without reservation that this is **the safest and most effective form of treatment** available. As a result this natural treatment has become **the primary treatment** we recommend you use for treating H. pylori infections.

What is this treatment?

Known as **Matula Herbal Formula™**, this unique 30 day herbal treatment from South Africa is proven in both laboratory studies and clinical trials to be super-effective against H. pylori bacteria. Since we started using **Matula Herbal Formula™** to treat our clients, we have never looked back.

Our Clients really do enjoy the taste of **Matula Herbal Formula™** and also find it is much easier to take than any drug therapies - only 2 cups of Matula Herbal Formula per day for 30 days. What's more is that Matula Herbal Formula is **guaranteed to eradicate all strains of H. pylori bacteria**, without any negative effects. Not only is the bacteria eradicated, but during treatment, healing of the stomach lining and all types of ulcers have also been achieved.

Matula Herbal Formula™ has anti-bacterial, anti-fungal and anti-parasitic properties, and is also proven to be effective in helping patients overcome Candida overgrowth, as well as relieving the symptoms of acid reflux symptoms.

Many of our Doctor Members have now had the privilege of using **Matula Herbal Formula™** to treat hundreds of their own patients with serological proof of this infection. The **results have been no less than remarkable, and have all been completely side-effect free.**

Recovery time after successful eradication of infections has proven to be **far quicker** than with conventional pharmaceutical medicines. In all respects the overall well-being of all our clients has been remarkable, **with improvements in more areas throughout the body** than any conventional medicine can ever hope to offer.

Different treatments for different stages of infection

There are generally 4 different approaches to successful eradication of H. pylori infections, and these depend on when you were infected, whether you also have ulcers, and if you have had any antibiotic treatments in the last 12 months. The primary treatment we recommend for eradicating H.pylori is without question **Matula Herbal Formula™**.

Here is how we differentiate between treatments according to the history of the H. pylori infection;

1. **New Untreated Cases** - these will be recently discovered infections, less than **2 years** old, previously untreated, and **with no history** of ANY antibiotic medications taken in the last 12 months.
2. **New Treated Cases** - these will also be recently discovered infections, less than **2 years** old, previously treated, and **with a history** of ANY antibiotic medications taken in the last 12 months
3. **Old Untreated Cases** - these relate to infections with a history dating back more than **2 years**, previously untreated, **and with no history** of ANY antibiotic medications taken in the last 12 months.
4. **Old Treated Cases** - these also relate to infections with a history dating back more than **2 years**, previously treated, **and with a history** of ANY antibiotic medications taken in the last 12 months

Once you have established which basic category the infection falls into, you can proceed with treatment as follows;

Proven Methods of Treatment

1. New, untreated H. pylori infection (less than 2 years)

- This is simply a 30-day course of **Matula Herbal Formula™** along with your positive attitude.
- A good **Omega-3** oil, can help reduce inflammation in the bowel lining if necessary.
- See below for optional dietary tips to speed up the healing process.

2. New, recently treated H. pylori infection (less than 2 years)

- A 30-day course of **Matula Herbal Formula™** along with your positive attitude.

- **Good Probiotic** supplements are recommended due to exposure to antibiotics - this will re-introduce good flora into your digestive system that the antibiotics will have killed off.
- A good **Omega-3** oil, can help reduce inflammation in the bowel lining if necessary.
- See below for optional dietary tips to speed up the healing process.

3. Older, untreated H. pylori infection (more than 2 years)

- To start with we recommend that you have an ultrasound evaluation done and if your Gallbladder requires a flush then to do a Gall Flush (See below for more details). This is necessary because if the H. pylori bacteria has been in your system long enough to colonize in the areas of your digestive tract where **Matula Herbal Formula™** may not be able to make contact with.
- A 30-day course of **Matula Herbal Formula™** along with your positive attitude and a Gall Flush as recommended.
- To keep on top of your digestive health in general, and to complete your treatment, we recommend a colon cleanse after you have finished your treatment of **Matula Herbal Formula™**, but before you have the HpSA re-test.
- A good **Omega-3**, can help reduce inflammation in the bowel lining if necessary.
- See below for optional dietary tips to speed up the healing process.

4. Older, recently treated H. pylori infection (more than 2 years)

- Again we recommend that you have an ultrasound evaluation done and if your Gallbladder requires a flush then to do a Gall Flush - (See below for more details). This is necessary because if the H. pylori bacteria has been in your system long enough to colonize in the areas of your digestive tract, **Matula Herbal Formula™** may not be able to make contact with it.
- A 30-day course of **Matula Herbal Formula™** along with your positive attitude and a Gall Flush as recommended.
- **Good Probiotic** supplements are recommended due to exposure to antibiotics which may have killed off all the good flora in your digestive system.
- To keep on top of your digestive health in general, and to complete your treatment, we recommend a colon cleanse after you have finished your treatment of **Matula Herbal Formula™**, but before you have the HpSA re-test.
- A good **Omega-3** oil, can help reduce inflammation in the bowel lining if necessary.
- See below for optional dietary tips to speed up the healing process.

Recommended Supplements

The Probiotics like those found in **COMPLETE PROBIOTICS** -

- Replenish microflora in your intestinal tract for optimal balance
- Support optimal digestive and bowel health
- Support optimal cholesterol and blood pressure levels
- Help optimize vitamin and mineral absorption from your healthy diet

The Bacillus Coagulans (also known as Lactobacillus-sporogenes) found in **COMPLETE PROBIOTICS** comprise a preferred strain of probiotic because they:

- Have superior bioavailability for your body.
- **More Effective than other Probiotics because Lactobacillus-sporogenes survive the rigorous acidic stomach environment and reach your intestine safely, where they proliferate.**
- Contain 2 billion live viable lactobacilli that retain their viability during preparation, storage, and shelf life.
- **Are easy to store, heat resistant and stable. No refrigeration needed. Take them to your office or on trips, carry in your purse, or wherever.**
- Have long shelf life, so you can buy a multi-pack and keep them in several places for easy access at mealtimes.

Optional Diet Adjustments

In addition to **Matula Herbal Formula™** we also recommend the following diet changes which can only help with the whole healing process -

- *eat plenty of dark green vegetables, rich in chlorophyll and vitamin K.*
- *Drink fresh cabbage juice daily, immediately after juicing it.*
- *Try a dilute soup made with potatoes, cabbage and carrots.*
- *If you need to eat Grains, they should be very well cooked (twice as long as usual), preferably in double the amount of water usually used for their preparation.*
- *Include Millet, unrefined Rice, Barley and Rolled Oats.*
- *Drink Wheat, Barley or Alfalfa juice if available*

Gall Flush

This flush should be done only after a proper ultra sound evaluation of your Gallbladder!

It is advisable to do this flush over a weekend. This is an economical method that works really well, but it does take a lot of preparation before the actual flush takes place.

Preparation:

For one week drink at least 8 glasses of purified water daily. Have one spoon of Extra Virgin, Cold Pressed Olive oil with a spoon of freshly squeezed lemon juice each morning. Try to drink as much fresh apple juice as possible. Avoid rich and fatty foods, in fact eat a vegetarian diet rich in raw foods and unrefined grains such as brown rice. Take no alcohol or caffeine for the week.

Day of Cleanse:

- Have a light, fresh fruit breakfast.
- For lunch, a simple salad and steamed vegetables.
- After 14h00 eat nothing, drink plenty of water.

Into a jug place four tablespoons of Epsom salts and three cups of water. This will make four doses of a three-quarter cup each.

- You need to have Olive oil and some fresh lemons or grapefruits ready for later.

- At 18h00 drink a three-quarter cup of the Epsom salt mixture, and again at 20h00.
- Just before 22h00, mix a half a cup of Olive Oil and three-quarter cup of freshly squeezed lemon or grapefruit juice in a large jar. Shake the mixture vigorously.
- At 22h00, drink entire mixture within five minutes. Lay down on your back immediately thereafter. You must lie down flat on your back for at least twenty minutes.
- At 06h00 following morning, take another three-quarter cup of the Epsom salt mixture, and again at 08h00.
- At 10h00 you should have a light meal, preferably fresh fruit. You should eat very lightly for the remainder of the day.
- You can expect to get diarrhea. This will be watery and not painful.

NOTE: You may see green “stones” floating in the water. On average these tend to be small, about the size of split peas. You may also see yellow or pale “crystals” or sludge in the water. The diarrhea will continue for a few hours. You may feel tired and headachy, but this will pass very quickly. Once finished, your Gall Flush is complete.

Dealing with H. pylori linked to Ulcers

If you suspect you have an H. pylori infection or that you may have stomach ulcers, we would strongly advise getting a proper diagnosis from your Doctor. And make sure you get a definitive test for H. pylori. If this option is not available, or not desired, we recommend the following course of action...

First cut out ALL *processed foods, caffeine, alcohol, cigarettes and sugar in all its forms*. Identify your major stressors and set to work on minimizing them. Eat smaller meals that are made with simpler foods. Sip warm water through your meals. Discuss the medication you are currently using with your doctor, as many common medications like aspirin and ibuprofen can cause ulcers.

Do a simple acid test at home. This test is an economical way for you to ascertain if you have too much or too little acid in your stomach. Do this test first thing in the morning before eating or drinking anything else.

Method: Mix a quarter teaspoon of fresh Bicarbonate of Soda into a small glass of warm water. Swallow the contents of the glass and relax for a few minutes (Note that this test is effective only if done on an empty stomach first thing in the morning).

Home Test results: If you belch dramatically within one minute of swallowing this mixture, it is likely you have too much acid. If it takes two to three minutes to belch, your levels of acid are probably normal. If it takes longer than five or six minutes to belch, it is very likely that you have lower than normal levels of stomach acid.

Ulcer treatment

As those of you may have learned already, digestive disorders, especially ulcers, are difficult to treat. Most of you have probably been exposed to conventional treatments offered by mainstream medicine. As you may have already discovered, these are only partially effective and temporary.

Often many different drugs are required to treat the various symptoms and aspects of Ulcers: pain, nausea, indigestion, infection all of which require different drugs for their treatment. With the relatively recent discovery of H. pylori (the bacterium that causes nearly 90% of stomach ulcers, and 50% of new stomach cancer cases), the usage of these various drugs has escalated.

The accepted and most commonly prescribed treatments are still fraught with negative side effects, both short-term and long-term.

From our own experience, we now know that **about 65% people who are infected with H. pylori**, and have received any form of antibiotic treatment in the last 12 months, **are also infected with Candida**. We also know that **Candida overgrowth is mostly caused by overuse of antibiotics**. Now you will understand why the modern treatment (of double strength antibiotics) of H. pylori is so potentially harmful - in fact it is almost as bad as adding fuel to a fire!

Matula Herbal Formula™ is Safe & Effective

By contrast, what makes Matula Herbal Formula™ so effective and unique is that it tackles the problem of stomach ulcers from all angles **without any negative effects**, mainly because it displays anti-bacterial, anti-fungal AND anti-parasitic properties.

Matula Herbal Formula™ taken twice a day, will **eradicate all strains and traces of H. pylori bacteria**. This has been proven both in the laboratory, as well as in clinical trials.

Matula Herbal Formula™ also successfully treats Candida overgrowth, so often associated with H. pylori. It will reduce inflammation of the stomach or bowel lining, and normally repairs ulcers within two weeks.

Matula Herbal Formula™ also reduces symptoms of nausea, cramping, bloating and indigestion always found with ulcers.

Make sure you do not have an ulcer BEFORE using any digestive enzyme formulas - this may aggravate your symptoms if you already have too much acid.

Treating a peptic ulcer can take some time, possibly a few weeks. If you have been diagnosed as with ulcers, be patient and stick with your program. Use the time to develop new stress coping skills, new relaxation techniques. As far as possible and within reason, try to avoid using any medical drug treatments for this problem. **The drugs will only address the symptoms**, at further cost to you in terms of side effects.

Good Practice for maintaining good health in the future....

After completing any treatment, it is good practice to do a [DETOX](#) and Colon Cleanse, especially if you haven't had one done in the last 12 months. This has no effect in eradicating the H. pylori bacteria, it simply makes good sense for maintaining your future good health.

VERY IMPORTANT – Avoid getting re-infected !*

- Test and treat your partner and other family members at the same time to avoid re-infection. H. pylori is mainly transmitted between family members.
- H. pylori can be transmitted by kissing on the mouth, sexual intercourse, eating undercooked chicken and even a 3 minute cooked egg yolk.
- Don't let anyone kiss your children on the lips, even Grandma.
- Do you allow a cat or dog in your bedroom?
- Never kiss your cat or dog on the lips.
- *Use sun dried salt* because commercial salt is heated to such high temperatures that we cannot break it down. We need salt to make hydrochloric acid. When HCl is low the door is open for H. pylori to set up house in your stomach.

- Work with your Health Practitioner to determine if it is appropriate to take HCl
- Retest annually

***Dr Bivins DC is a laboratory physician consultant, re-licensing instructor and nationally recognized speaker in the USA on root causes of illness and hormonal imbalance. Dr. Bivins is also the Clinic Director of Comprehensive Health Center in Fullerton, California**

Irritable Bowel Syndrome (IBS)

Irritable bowel syndrome, or IBS, is a common complaint: some 10 to 20 percent of the population experience the diverse symptoms this syndrome causes. IBS is also called spastic colon, spastic bowel, mucous colitis, spastic colitis, colitis, intestinal neurosis, and functional bowel disease.

The symptoms include bloating, flatulence, diarrhea, constipation, abdominal pain and cramps, and even nausea. The pain is often triggered by eating, so people suffering from IBS don't always eat enough, which results in malnutrition.

Most health practitioners agree that there is no set cause of IBS, and that food allergies, medication, stress, hormone changes, low fiber intake, infection, parasites, lactose intolerance, laxatives, and antibiotic abuse could all be involved. In fact, the consensus is that just about anything that disturbs our intestinal bacterial balance—the ratio of good bacteria to bad bacteria—could have a hand in causing IBS. IBS is not serious in that it is not life-threatening; however, it makes for very uncomfortable living.

In IBS, the normal rhythm of the muscular contractions of the digestive tract becomes irregular and uncoordinated—the body's digestive system usually churns along like a good washing machine, but in IBS, the "wash cycle" is irregular, and this interferes with movement of food and water. This means that the food, instead of "rinsing out" of the body efficiently, accumulates in the digestive tract, which, in turn, leads to the accumulation of mucus and toxins in the intestines. The result of this is that gas and stool do not flow freely, and, this is when the above-mentioned symptoms begin to appear.

Because many of the IBS symptoms are the same as those found in more serious digestive problems (such as Crohn's disease and ulcerative colitis), the first thing to do is to eliminate the possibility that the symptoms are related to one of these. This is achieved with special investigations such as colonoscopy or barium studies. After you and your health practitioner are sure that your problem is IBS, action can be taken.

Dealing with IBS

Many health practitioners feel that food allergies are the main cause of IBS and recommend being tested for allergic reactions to foods. Common foods that trigger allergies include cheese, milk, chocolate, butter, coffee, corn, wheat and gluten, eggs, and nuts. *Controlling food allergies often stabilizes IBS.*

Dietary changes can assist in the relief of these symptoms. Avoid animal fat, butter, carbonated drinks, chocolate and candy, dairy products, fried foods, sugar, food additives, alcohol, and smoking. Most health practitioners recommend a high-fiber diet and supplementing with a bulking fiber like psyllium. Diet should include well cooked unrefined whole grains, plenty of fruit and vegetables rich in antioxidants. Drinking plenty of purified quality water is also important. Combining some of the following herbs as a tea can help alleviate the discomfort of IBS: Chamomile, Lemon Balm, Marshmallow root, Licorice Root, Bitter Candy Tuft, Lemon Verbena and Peppermint.

Inflammatory Bowel Disease (IBD): Crohn's Disease and Ulcerative Colitis

Inflammatory bowel disease (IBD) encompasses two serious problems: **Crohn's disease** and **Ulcerative Colitis**. These two diseases are similar but have different characteristics. They also share many of the symptoms of IBS.

Diet plays an important role in IBD. Epidemiological studies have shown that populations that consume plenty of fiber and a minimum of sugar rarely experience IBD. There is also a positive correlation between cigarette smoking, fast food and IBD.

IBD is considered by some as an autoimmune disease—that is, the body's immune system attacks itself. There is no set cause of IBD. Theories centre around chronic infection and dysbiosis, or imbalance of good and bad bacteria within the gut, inflammation of blood vessels that results in less blood getting to tissue (ischemia), food sensitivities and toxic metal overload, such as lead or mercury. These causes may be interconnected. Either way, these are chronic inflammatory disorders that require intensive treatment until remission, and thereafter a vigilant and preventative approach.

Crohn's Disease

Crohn's disease also results in inflammation, but it can occur anywhere from the mouth to the rectum. It usually occurs in the later third of the small intestine and in the first part of the colon, commonly near the ileocecal valve, which separates the contents of the small intestine and colon. The inflammation in Crohn's disease goes much deeper than that in ulcerative colitis, and it can result in abscesses and fistulas (a narrow passage formed by disease or injury, as one leading from an abscess to a free surface). As these areas of inflammation heal, they may leave scarring in the intestinal wall, causing it to narrow. This may cause difficulty in the passage of food passed these narrowings, further aggravating the symptoms of this condition.

Symptoms of Crohn's disease include chronic diarrhea, pain in the abdomen, fever, headaches, malabsorption of nutrients, and loss of energy, appetite, and weight. "Nondigestive" symptoms include canker sores in the mouth and clubbed fingernails.

Crohn's disease strikes when its victims are at a young age: between the ages of 14 and 30, and it is becoming increasingly prevalent in children. Attacks occur every few months to every few years, and, if attacks continue, long-term bowel function may deteriorate and the risk for colon cancer increases some 20 times.

Crohn's disease is regarded as an auto-immune disease. Many different theories exist with regards to its etiology, or cause. Despite this, no new treatments have been developed. The mainstay of medical treatment still remains the use of immunosuppressants such as cortisone. Surgery is sometimes required for troublesome and obstructive lesions as well as abscesses and fistulae.

Dealing with Crohn's Disease

Dr John Hunter, from Addenbrooke's Hospital in Cambridge, has had remarkable success in treating his patients with elimination diets. His success rates have risen to 80% recovery and still 80% remission at two years follow-up. This supports the food allergy connection to the etiology of Crohn's in many people. (Even though this theory is not widely accepted in most medical circles). Due to the fact that many Crohn's sufferers have critical nutritional deficiencies, an elimination diet shouldn't be undertaken without experienced supervision.

Holistic treatment is therefore focused on looking throughout the body and its systems for any abnormality that may undermine the immune system, including hidden parasites (including Candida), chronic bacterial infection, heavy metal toxicity and

psychological factors. Once identified, treatment can be focused accordingly. In general, however, treatment is focused on reduction of inflammation, assisting with digestion, correcting nutritional deficiencies and modulating the immune system.

According to Francisco Contreras, M.D., non-complicated Crohn's disease responds to garlic, vitamin A, and beta carotene, and diets that avoid the consumption of well-known allergenic substances found in wheat, milk, corn, and chocolate.

Dietary recommendations are as for Ulcerative Colitis (below) and include eating non acidic fresh or cooked vegetables. These include broccoli, Brussels sprouts, cabbage, carrots, spinach, and garlic. As always, plenty of liquids should be consumed and the "usual" foods avoided: refined carbohydrates, alcohol, caffeine, carbonated beverages, and red meat. Supplementation is also similar to that for Ulcerative Colitis. Extra supplements that may be helpful are aimed at reducing food allergy reactions, like using Bromelain and Quercetin. Digestive aids like Pancreatin may also be helpful.

Ulcerative Colitis

Ulcerative colitis is a chronic inflammatory bowel disease. It can cause frequent bouts of diarrhoea that may contain blood and mucus. It can also cause severe abdominal pain.

Ulcerative colitis tends to have flare-ups and then settle down again for variable amounts of time, although it is possible to have a single attack of the condition.

What is it?

Ulcerative colitis affects the rectum and variable amounts of the rest of the colon (the large bowel or intestine). The other main inflammatory bowel disease, Crohn's disease, can affect any part of the digestive tract from the mouth to the anus. In around 10% of cases, it is not possible for doctors to distinguish between ulcerative colitis and Crohn's disease

Approximately 1 in 100 people are affected by ulcerative colitis. The disease affects men and women equally and can develop at any age, but most commonly affects adults aged 20-40. It is not an infectious illness.

What causes ulcerative colitis?

The cause of ulcerative colitis is not fully understood. Inflammatory bowel disease tends to run in families and 10 to 20% of people with either ulcerative colitis or Crohn's disease are likely to have at least one other person in their family affected. Researchers are also looking at the links between environmental factors such as nutrition and exposure to various infections and potentially toxic metals like lead or mercury.

Symptoms

The main symptom of ulcerative colitis is frequent, watery diarrhea, which may be accompanied by cramping abdominal pain and the passage of blood and/or mucus. When the disease affects only the rectum - the final portion of the bowel, it is known as proctitis. When ulcerative colitis affects more of the colon than the rectum alone, symptoms are more severe. The symptoms vary according to the degree of inflammation in the bowel and whether or not the lining of the bowel has become ulcerated. In addition to the symptoms already mentioned, there may also be:

- pain on opening the bowels
- urgent and frequent need to open the bowels
- the sensation of incomplete emptying of the bowels
- diarrhea, even during the night
- nausea

- loss of appetite
- weight loss
- extreme tiredness
- general symptoms of infection, like fever or sweats

A number of other problems may be associated with ulcerative colitis. These are more likely when the disease is active and include skin rashes, mouth ulcers, joint pains and anaemia. Ulcerative colitis is defined as mild, moderate or severe, according to the frequency of diarrhea, the presence of blood and how generally unwell the person is.

Complications

During a severe attack, around 1 in 20 people develop an inflamed and enlarged colon (megacolon), causing abdominal pain and tenderness. This requires urgent medical treatment to avoid the bowel perforating (a hole forming in the bowel wall). Half of people with megacolon improve with drug treatment but the other half need surgery. In some instances, one can develop abscesses within the colon wall, this usually requires antibiotic treatment and often surgery.

Ulcerative colitis can cause changes in the liver (called sclerosing cholangitis), which may be picked up on blood tests to test the liver function.

Having ulcerative colitis increases the risk of developing bowel cancer, particularly for people who have had frequently recurring symptoms for more than 10 years. For this reason, people with ulcerative colitis are encouraged to do all they can to keep the condition under control. They are also offered bowel screening at regular intervals, to look for pre-cancerous changes.

Diagnosing ulcerative colitis

The pattern of symptoms, and a physical examination will indicate to your doctor whether ulcerative colitis is a possible diagnosis. A stool sample will usually be sent to the laboratory to rule out an infection, the most common cause of diarrhea. When ulcerative colitis is suspected, blood tests are also done to help assess the severity of the illness.

You may be able to perform a limited examination of the rectum or lower bowel. However, for a more thorough examination, your practitioner may need to refer you to hospital.

There, a gastroenterologist, a doctor specializing in the digestive system, will assess the amount of bowel inflammation and take biopsies (samples of the lining of the bowel) for laboratory testing.

To do this, gastroenterologists use endoscopes - flexible telescopic instruments with a light and lens at the tip, which send pictures of the lining of the bowel to a video monitor. The usual procedure for suspected ulcerative colitis is called a flexible sigmoidoscopy, which can be done even during a severe attack.

A colonoscopy uses a similar, but longer, instrument. The whole of the large bowel can be viewed, but it is not usually performed during a severe attack as it can increase the risk of complications.

The biopsy results can show whether ulcerative colitis is present. The results may also help doctors to distinguish ulcerative colitis from Crohn's disease.

Dealing with Ulcerative Colitis

Having ulcerative colitis can be physically and emotionally stressful. Having frequent bouts of diarrhea can easily interfere with work and normal social activities. Support, explanation and reassurance is available from your Health Care Professional, specialist nurses, patient groups and the hospital specialists involved.

A natural approach includes the following: The use of a bulk forming stool-softener like psyllium taken with plenty of fluids. Take L-Glutamine with an amino-acid complex to facilitate healing of damaged bowel tissue. Obviously, a good Probiotic is

essential to maintain balance of gut flora. Using a good anti-oxidant like Vitamin A and Carotenoids, or Pro-anthocyanidins, helps to minimize damage to the mucous membrane and helps healing, while preventing cancer. Use a good multi-vitamin and mineral complex as most of the time, colitis sufferers have nutrient depletions.

We recommend using **Matula Herbal Formula™** because of its proven antibacterial and anti fungal properties. We find it extremely useful in both acute flare ups as well as maintaining bacterial balance in remission. To date this treatment has had zero side effects.

Eat a lot of alfalfa, either as a capsule or liquid, to supply Vitamin K and Chlorophyll for healing. Aloe Vera is also helpful for this purpose. Consuming herbal teas like Boswellia, Bromelain, Buchu and Turmeric reduce inflammation.

During attacks, eat only soft foods, try eating baby foods for a week or two as they are designed to digest with the least amount of stress. Take plenty of fluids and add rice or oats bran to add bulk needed for cleansing the colon.

For most people with ulcerative colitis, remission from disease can be maintained for very long periods of time allowing a normal family and working life.

Diverticular Disease

Diverticular disease is common among the senior generation. Estimates are that 30 to 40 percent of Western countries populations over the age of 60 have this problem.

Diverticulae are pea-shaped pouches that form in the colon wall. The underlying cause of diverticulae is constipation: Chronic constipation leaves long-standing fecal impactions coating the colon wall, at these sites chronic inflammation weakens the colon wall, causing these pouches to form. It is thought by some, that the strain of defecation in this situation may also aggravate the formation of these pouches.

Diverticulosis is the condition of having diverticulae present. This condition is usually symptom-free, and most people do not realize they even have it. However, for a few people, diverticulosis results in spasms and pain.

If the pouches become inflamed or infected, the condition is called diverticulitis. This generally occurs when waste matter is trapped in a pouch, encouraging bacterial overgrowth. Diverticulitis can result in pain and fever. It often requires antibiotics and may require surgery.

Dealing with Diverticulitis

A natural and preventative approach for **diverticulitis**, is to use a herbal type antibiotic and a soft-fiber diet initially, with a switch to a high-fiber diet as progress is made. Various traditional antibiotic herbs are available, such as Artemisia sap, Olive Leaf extract, Grapefruit Seed extract, Goldenseal.

We strongly recommend **Matula Herbal Formula™** that is an amazingly powerful safe and effective herbal blend with proven effectiveness against all the most common bacteria implicated in Diverticulitis.

In an acute attack, you can give yourself a cleansing lukewarm water (2 quarts) and lemon (juice of one lemon) enema to help rid the colon of build-up of fecal matter. You should also use charcoal tablets to absorb excess gas. Both of these measures help to relieve discomfort and speed healing.

The key to preventing diverticulosis and repeated incidences of diverticulitis is diet. The latest approach for treating diverticulosis today, is a high-fiber diet—at least 30

grams of fiber a day. Especially good is a bulk and stool-softening fiber such as psyllium. Drinking plenty of purified water each day is essential.

Refrain from eating nuts, grains, and seeds, but well-cooked brown rice is helpful. Eliminate dairy products, red meat, sugar, fried foods, and spices from the diet. Having your Health Practitioner test you for food intolerances is highly beneficial. Get plenty of leafy greens, and do not overuse laxatives as they can irritate the colon wall. A **GOOD PROBIOTIC** -"friendly" bacteria is essential to maintain a healthy balance. Aloe Vera is also highly recommended to ease inflammation. It is also important to take a good omega 3 supplement to keep inflammation in check.

Candidiasis (Candida Albicans) Overgrowth

Do you have Candida Albicans overgrowth?

Candidiasis or Candida Albicans, as it is more commonly referred to, is not fully acknowledged in mainstream medicine as a significant disease or infection. But, don't be fooled because it really is a nasty yeast infection who's sole purpose is to dominate and control your gastrointestinal tract. If you have had even one treatment of antibiotics in the last 12 months there is a strong chance that you have Candida Albicans overgrowth.

What is it?

We all live in a virtual sea of microorganisms, (bacteria, viruses, fungi, etc.). These microbes can reside in the throat, mouth, nose, intestinal tract, almost anywhere; they are as much a part of our bodies as the food we eat. Usually, these microorganisms do not cause illness, unless our resistance becomes lowered.

Candida Albicans is a yeast that lives in the mouth, throat, intestines and genitourinary tract of most of us and is usually considered to be a normal part of the bowel flora (the organisms that coexist with us in our lower digestive tract). It is actually a member of a broader classification of organisms known as fungi.

How do you get it?

Candida Albicans enters us as infants during or shortly after we are born. Usually, *the growth of the yeast is kept in check by our immune system* and thus produces no overt symptoms. But, should the immune response weaken, the condition known as *oral thrush* can occur as a result. By six months of age, 90% of all babies test positive for Candida. And by adulthood, virtually all of us play host to Candida Albicans and are thus engaged in a life-long relationship.

Candida coexists in our bodies with many species of bacteria in a competitive balance. Other bacteria act in part to keep Candida growth in check in our body ecology . . . unless that balance is upset.

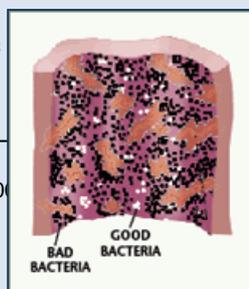
When health is present, the immune system keeps Candida proliferation under control; but when immune response is weakened, Candida growth can proceed unhindered.

It is an "opportunistic organism," one which, when given the opportunity, will attempt to colonize all our bodily tissues. The uncontrolled growth of Candida is known as Candida overgrowth.

When you have too many bad bacteria your Intestine looks like this.

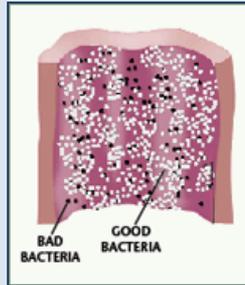
It is common to have too many beneficial ones, resulting in amount of gas, and all kinds of

"bad" organisms and not enough digestive problems, an unreasonable discomfort.



After treatment with our proven treatment regimen...

Once you inhibit excess Candida and replace the bad organisms with good, beneficial flora, you'll promote better digestion of your food, minimize excess gas, help your body absorb nutrients, and keep your digestive tract in good shape. The ideal balance of bacteria is 85% good and 15% bad.



Unfortunately, there are many factors in our modern society that can upset the ecological balance of our body, weaken our immune system and thus allow the yeast to overgrow. Of these, the major risk factors which may predispose one to the proliferation of Candida are:

Antibiotics and Sulfa Drugs

Probably the chief culprit of all is, **antibiotics** that **kill all bacteria**. They do not distinguish good bacteria from bad. Antibiotics kill our "good" flora which normally keeps the Candida under control. This allows for the unchecked growth of Candida in our intestinal tract. *It is normally difficult to recover a yeast culture from bodily surfaces.* The prevalence today of Candida may be most directly related to the widespread societal exposure to antibiotics -- from prescriptions for colds, infections, acne, and from additional consumption of antibiotic-treated foods such as meats, dairy, poultry and eggs. Notably, antibiotics do not kill viruses; they only destroy bacteria. Yet, they are universally prescribed for all colds, flus and other viral problems. Such indiscriminate and extensive use of antibiotics is not only considered a primary cause of Candida overgrowth, but is recently being found to be responsible for the unbridled development of "killer" bacteria such as MRSA.

Steroid Hormones, Immunosuppressant Drugs

Drugs like cortisone which treat severe allergic problems by paralyzing our immune system's ability to react

Pregnancy, multiple pregnancies or birth control pills

These upset our body's hormonal balance

Diets high in carbohydrate and sugar intake, yeast and yeast products, as well as molds and fermented foods

Prolonged exposure to environmental molds

“The rapid and direct proliferation (growth) of the yeast following antibiotic use, strongly suggests that the problem of Candida is one which stems from an inner state of imbalance, rather than from an outside attack by a microbe or disease.”

This is a very important point to understand if you wish to get rid of an overgrowth problem, suggesting that Candida is not so much a problem as is the body's own failure to control it!

A serious problem

Once begun, if not recognized and treated appropriately, Candida overgrowth can result in a self-perpetuating, negative cycle. Large numbers of yeast germs can weaken the immune system, which normally protects the body from harmful invaders. Even though Candida is part of the ecological balance in the body since birth, it is still recognized by the immune system as a foreign body that needs to be controlled. So, when overgrowth occurs, a chronic stimulation to the immune system results -- every second, every minute, every hour, every day, every month, every year -- in an attempt by the immune system to regain control. In time, it is believed that this can exhaust the immune system, predisposing one to more serious degenerative processes. Many believe chronic drains on the immune system such as Candida and parasites can play a direct role in the development of cancer and AIDS. Seen in this light, **Candida overgrowth should not be taken lightly.**

The immune system may concurrently be also adversely affected by poor nutrition, heavy exposure to molds in the air, as well as an increasing number of chemicals in our food, water and air, including petrochemicals, formaldehyde, perfumes, cleaning fluids, insecticides, tobacco and other indoor and outdoor pollutants. Over 10,000 chemicals have been added to our food supply alone that were not there just 100 years ago! We do not have the genetic recognition of these substances as foods or as useful additions to our bodies.

Resulting lowered resistance may not only cause an overall sense of ill health, but also may allow for the development of respiratory, digestive and other systemic symptoms. One may also become predisposed to developing sensitivities to foods and chemicals in the environment. Such "allergies" may in turn cause the membranes of the nose, throat, ear, bladder and intestinal tract to swell and develop infection.

Such conditions may lead your physician to prescribe a "broad spectrum" antibiotic . . . which may then further promote the overgrowth of Candida and strengthen the existing negative chain of events, leading to further stress on the immune system and increased Candida - related problems.

What are the signs of Candida infection?

The result of heightened Candida overgrowth is a list of adverse symptoms of considerable length. Basically, the characteristics of Candida overgrowth fall under three categories, those affecting:

1. The gastrointestinal and genitourinary tracts
2. Allergic responses, and
3. Mental/emotional manifestations.

Initially the signs will show near the sights of the original yeast colonies. Most often the first signs are seen in conditions such as:

nasal congestion and discharge, nasal itching, blisters in the mouth, sore or dry throat, abdominal pain, belching, bloating, heartburn, constipation, diarrhea, rectal burning or itching, vaginal discharge, vaginal itching or burning, increasingly worsening symptoms of PMS, prostatitis, impotence, frequent urination, burning on urination, bladder infections.

But, if the immune system remains weak long enough, **Candida can spread to all parts of the body** causing additional problems such as:

fatigue, drowsiness, lack of coordination, lack of concentration, mood swings, dizziness, headaches, bad breath, coughing, wheezing, joint swelling, arthritis, failing vision, spots in front of the eyes, ear pain, deafness, burning or tearing eyes, muscle aches, depression, irritability, sweet cravings, increasing food and chemical sensitivities, numbness and tingling,

cold hands and feet, asthma, hay fever, multiple allergies, hives and rashes, eczema, psoriasis, chronic fungal infections like athlete's foot, ringworm and fingernail/ toenail infections.

In addition, **79 different toxic products are known to be released by Candida**, which in itself places a considerable burden on the immune system. These get into the bloodstream and travel to all parts of the body where they may give rise to a host of adverse symptoms.

In Candida overgrowth, **the yeast colonies can dig deep into intestinal walls, damaging the bowel wall in their colonization.**

Candida can also attack the immune system, causing suppressor cell disease, in which the immune system produces antibodies to everything at the slightest provocation, resulting in extreme sensitivities.

Finally, **Candida overgrowth can be dangerous if it is not controlled.** The persistent, constant challenge to the immune system by an ever-increasing, **long-term overgrowth of Candida can eventually serve to wear down the immune system and cause a seriously weakened capacity for resistance to disease.**

Women are more likely to get Candida overgrowth than are men. This is related to the female sex hormone progesterone which is elevated in the last half of the menstrual cycle. Progesterone increases the amount of glycogen (animal starch, easily converted to sugar) in the vaginal tissues which provides an ideal growth medium for Candida. Progesterone levels also elevate during pregnancy. Men are affected less frequently but are by no means invulnerable.

Our Recommended Test for Candida overgrowth?

We highly recommend the Metametrix, Microbial Profile DNA Stool Analysis test (2105 - highlighted in yellow in the text box below) for accurately determining the status or presence of Candida Albicans plus bacteria and parasites that cause GI Tract illnesses and infections.

GI Effects – Stool Analysis

Test name:	2100* - Complete GI Effects Profile – Includes 2105, 2110, 2115, 2120 2105* - Microbial Profile – Bacteria, fungi/yeast, parasites 2110* - Mycology Profile – Fungi/yeast only 2115* - Parasitology Profile – Parasites only 2120* - Chemistry Profile – Digestive, inflammation, absorption *Not available in New York
Description:	GI Effects Stool Analysis Profiles go beyond "old stool technology" to bring you the most comprehensive stool analysis to date. GI Effects Profiles use DNA analysis to identify microbiota with 100% accuracy — including anaerobes, a previously immeasurable area of the gut environment. In addition to much more comprehensive bacteriology, mycology, and parasitology, GI Effects Profiles report drug resistance genes, antibiotic and botanical sensitivities, gliadin-specific sIgA, Elastase1, plus other inflammation, digestion, and absorption markers clinicians requested — with no hidden costs.
Method:	GC/MS, PCR ELISA, Automated Chemistry, Colorimetric, HPLC
Turnaround time:	10 - 14 days

Candida is considered to be an opportunistic organism. While often harmlessly present in the gut in small numbers, Candida is quick to exploit any tissue where physiological values have

exceeded homeostatic limits. Overgrowth quickly occurs, and an intact immune system will produce characteristic antibodies in response.

How do you get rid of Candida overgrowth?

To effectively treat Candida overgrowth there are four objectives:

1. To fully understand the concept of Candida as a chronic infection and to appreciate that its treatment is a lifestyle change and may take some time to treat, unlike the commonly understood treatment of bacterial infections with antibiotics. One must **commit to treating Candida fully** to really benefit.
2. To eradicate the Candida through the use of anti-Candida products as well as deprive the yeast of the food on which it flourishes (namely, sweets, sugars, refined grains, fermented foods, yeast product),
3. Thirdly to re-introduce good flora by taking a good probiotic, and
4. Finally, to restore biochemical balance to the body and strength to the immune system, which will allow the body once again to regain and maintain control over Candida growth.

Recommended course of action

To inhibit, Candida, to "even the odds," so to speak, the primary treatment required is two consecutive months of **Matula Herbal Formula™**. **Matula Herbal Formula™** is a proven natural herbal blend with potent anti-bacterial and anti-fungal properties that systematically kill off Candida.

Matula Herbal Formula™ needs to be supplemented with good quality Probiotics that should be taken for 3 consecutive months. This is required to re-introduce good flora so that the ratio of good vs bad bacteria is able to sustain a stable balance of flora in a ration of 85:15 for optimum health.

When **Matula Herbal Formula™** is supplemented with good quality Probiotics you are sure to experience a great result.

The Herxheimer Reaction

Matula Herbal Formula™ is deadly to Candida. Depending on the severity of Candida overgrowth and the dosage taken, the Candida can be killed off in vast numbers in a very short period of time. As they are killed, they release substances which are toxic to the body. If this process occurs more quickly than the toxins can be cleared from the bloodstream and eliminated by the body, a temporary toxic or allergic-type reaction can occur in the form of headaches. The technical name for this experience is a **Herxheimer reaction**; it is more commonly referred to as "*die off*."

Usually die off lasts only a few hours, though it can last several days. It can usually be controlled almost entirely by reducing the dosage of **Matula Herbal Formula™** or the rate or frequency it is taken for a few days if necessary. Signs of Herxheimer reaction can be many and varied but generally involve such discomfort as *aching, bloating, dizziness, nausea, and overall "goopy sick" feeling, or a worsening of original symptoms*. Fortunately, die off is generally short in duration, and although uncomfortable, is at least a confirmation of the presence of Candida and that something "good" is happening.

Exercise as well as ensuring proper, daily bowel evacuation has been reported as being helpful in countering the adversities of die off. Maintaining a high daily intake of purified water is also important to keep the channels of elimination open.

It is useful to have a general detox whilst you are treating Candida overgrowth and we recommend a number of products that will help you to do very effectively. These products are discussed in more detail under the heading "Dealing with Candida Overgrowth" further down in this report.

Balancing Body Chemistry

We would like to advise you to seek the advice of a Nutritionist who will be able to determine your Metabolic Type as this is very important step in your recovery process. It is also important to maintain this diet after treatment so that you can sustain good health in the future.

Acid and Alkaline Balance

Candida overgrowth manifests as hyperacidity in the body. An acid environment is ideal to foster increased growth of yeast and fungus.

Changes may also be made by selecting foods that are more alkaline than acid forming. See Acid & Alkaline forming Food List on **page 69**.

It is a commonly recognized and accepted fact that immune system efficiency is highly dependent on the proper biochemical balance in the body. This of course, is dependent on proper and adequate nutrition to supply the body with all the required biochemical constituents (vitamins, minerals, enzymes, intrinsic factors, etc.).

Usually such diets require the considerable restriction of carbohydrates (beans, fruits, breads, grains, cereals, peas, sweet potatoes and some squashes) sometimes altogether.

Although for some metabolic types this may be helpful, for others it may be responsible for worsening an already malnutritive condition.

Starving the yeast is one thing, but starving yourself or imbalancing the biochemistry at the same time can only be weakening to the immune system and therefore counter-productive.

In addition to the metabolic type diet, it is also recommended that you avoid foods as much as possible, which are known to stimulate Candida growth until the Candida are brought under control. The foods upon which Candida are known to thrive and flourish include the following:

- **Sugar, Honey, Molasses, Syrup & High Quantities of Fruit or Juices**
- **Molds and Fermented Foods** Vinegar, cheese, soy sauce, sour cream, buttermilk, cider, tofu, ketchup, mustard, relish
- **Yeast Products** Brewer's yeast, yeast-based vitamins, buttermilk, dried fruits, melons and frozen or canned juices. This is especially important if you are yeast sensitive or yeast allergic. However, it should be understood that eating yeast products doesn't actually further the Candida, but it can prove irritating to anyone with an existing yeast sensitivity. Yeast products are not themselves, Candida yeast, and also they are not live yeast. Many people with Candida overgrowth can handle them just fine.

Dealing with Candida Albicans Overgrowth

This is **not** something that can be dealt with quickly. Because of the tenacity of this yeast and the relative difficulty of the dietary regime, a Candida syndrome can last for quite some time. Doctors often have to treat patients for over a year before their tests come back clear. However, don't lose hope, because the whole way along the treatment path, you will feel better and better.

The first step is to identify the possible cause, or aggravating factor. After the cause is identified and eliminated, the treatment can begin. Treatment of Candida overgrowth

includes adjusting your diet. The intention is to starve the Candida, bring in more beneficial bacteria and correct inflammation and nutritional imbalances. The strength of your general immune system should be addressed with as much intention as the Candida itself. To speed up your recovery process we suggest that you consult with a doctor of natural medicine to help with this last point.

Here are some general dietary guidelines and specific remedies for Candida overgrowth.

Diet

As far as diet is concerned, you need to eliminate all 'foods' that feed Candida. Think 'mould'.

Cut out all refined carbohydrates: *bread, flours, jams, sugars, pizza, cakes, pastries, cookies, chocolates, ice-cream, jellies, golden syrup, pastas.* Get the idea? Replace these with *brown rice, millet, buckwheat, quinoa, carob, rice cakes, corn cakes, rice flour, potato flour or other grain flours, polenta.* Some people need to cut even these alternatives out, and resort to a pure fat and protein diet.

Cut out dairy products especially *sweetened yogurts, cheese spreads, 'smelly' cheeses, yellow cheese and blue veined cheese.*

Cut out all vinegars, vinaigrettes, fermented alcohol (wine, beer, cider), dried fruits, peanuts, pistachios and peanut butter. Avoid *pickles and vinegar containing foods like mayonnaise, barbecue sauce, mustard sauce.* Eliminate processed *luncheon meats, commercial fruit juice, soya sauce, oxo, bovril and marmite.*

Limit your daily *fruit intake and avoid moldy or bruised fruits as well as fruits with high sugar content like melons and grapes.*

There is no limit on the amount of vegetables, especially green leafy vegetables. Very limited amounts of white cheese like cottage cheese or goats milk cheeses like feta are permitted.

Our Recommended Treatment program

An essential component for treating Candida effectively is at least two consecutive months treatment of [Matula Herbal Formula™](#). It has been scientifically proven to inhibit **93%** of Candida, without any side effects. In addition to [Matula Herbal Formula™](#) also take the best quality [PROBIOTICS](#) for a period of at least 3 months and [CHLORELLA](#) for 3 months if female and 1 month for males. Additionally we highly recommend a single 21 day treatment of [Matula ULTRA](#) to boost your immune system. Additional treatment options include OIL of OREGANO, CAPRYLIC ACID for 1 month and to complete the treatment protocol we recommend a [GENERAL DETOX](#) that ideally contains a mixed fibre supplement and Psyllium Husk.

[Please click on the above links for information on the recommended products.](#)

Remember to please find a Nutritionist who will determine your Metabolic Type so that you are able to identify the most suitable range of foods to include in your diet.

There are thousands of probiotic supplements available on the market. Researching all of them is difficult. Go for a product that has at least 2 billion colony that can effectively pass through the acidic environment in your stomach without being destroyed. This way you are ensured of ingesting high numbers of active flora.

PROBIOTICS

- Replenish microflora in your intestinal tract for optimal balance
- Support optimal digestive and bowel health
- Support optimal cholesterol and blood pressure levels
- Help optimize vitamin and mineral absorption from your healthy diet

CHLORELLA

- Provides optimal support for your immune system
- Promotes natural detoxification in your body
- Supports your digestive system health, including regular and normal elimination
- Assists in supporting your ability to focus and concentrate
- Helps maintain a healthy pH balance

OREGANO OIL

Oil of Oregano has been shown to be strongly anti-fungal. It also has some anti-viral properties. It is a strong antioxidant. It thus not only kills off excess fungus in the bowel, but also eases the strain on the immune system.

CAPRYLIC ACID

This is the active anti-fungal component of coconut oil. It is supportive of normal immune function and is strongly anti-fungal.

As we mentioned earlier, **treatment can be long and intense, but the rewards are reaped all along the way...so don't give up!**

Important Note

Truly yeast-free diets, or people, are both impossible to come by. They can only be totally avoided in the diet by eating solely fresh dairy, meat, fish and peeled fresh fruits and vegetables. From a practical standpoint, this is neither feasible nor necessary. Total elimination of yeast from the body is also neither feasible nor desirable, considering that yeast are very likely beneficial to the body when a proper balance exists.

Treatment of Candida overgrowth does not seek the eradication of Candida from the diet or the person, but rather a restoration of the proper and balanced ecological relationship between man and yeast.

Candida Albicans, if left uncontrolled, may indeed pose a serious threat to health and well-being. Another perspective, however, may view Candida as a kind of "early warning system!" Candida in a well-balanced body chemistry is merely a part of a greater environmental whole which very likely provides some benefit to the host with whom it coexists.

Dysbiosis

Introduction to Dysbiosis

"Dys-symbiosis, or Dysbiosis," is a state of living with intestinal flora where the delicate balance of good and harmful bacteria and yeasts has been disturbed, usually causing an overgrowth of harmful flora, (including viruses and parasites). These harmful bacteria and yeast can have harmful effects. Toxic amines produced by bacterial putrefaction of food are the cause of degenerative diseases, and by ingesting fermented foods containing Lactobacilli we could prolong life by decreasing gut putrefaction. The consideration of dysbiosis with digestive flora as an influence in the development of inflammatory diseases and cancer has received considerable experimental support over the past two decades.

Symptoms of Dysbiosis

Dysbiosis does more than interfere with digestion, it makes you tired. It may also alter your immune system and upsets your hormonal balance. Dysbiosis can even make it difficult for you to think clearly and is known to cause anxiety, depression or mood swings. In fact, dysbiosis can affect almost every aspect of health. If you have dysbiosis, then you are likely

to suffer from fatigue, headaches, intestinal upsets, and many of the symptoms normally attributed to Candida.

What causes Dysbiosis?

By now you have probably guessed that modern medical drugs have a large roll to play...right. Antibiotics, anti-inflammatory drugs, cortisones, hormonal medicines including contraception are just some of the more common culprits. Acute or chronic worm or parasite infestations will also give rise to dysbiosis. Major intestinal trauma or surgery may also have an important role in some individuals.

Altered ratios of the gut flora may produce disease. Bacterial enzymes can alter the intestinal environment in numerous ways, some of which can be easily measured in a properly collected sample of stool and evaluated by a Laboratory. Bacterial antigens may cause dysfunctional immune responses that contribute to autoimmune diseases of the bowel and of connective tissue. The pathology surrounding dysbiosis is very similar to that of candidiasis.

Effective treatment of dysbiosis is, as always, best achieved by identifying and treating the underlying cause. Broadly speaking, one needs to eliminate allergic foodstuffs as well as food chemicals such as preservatives, colourants and flavourants. One needs to eliminate common "drugs" such as alcohol, caffeine and sugar. A program of parasite elimination must be undertaken, preferably with known anti-parasite herbs like Taheebo, Artemisias, Grapefruit seed extract, Black Walnut and Clove. Occasionally it may be necessary to use one of the stronger medicines to help eliminate more potent bugs like Giardia, or worms. One can then start to re-inoculate the bowel using a good quality probiotic supplement. For more difficult cases, this is best done using the help of a specialist stool analysis laboratory. When this approach is not helpful, a more specialized diagnosis is required:

Based on available research and clinical data, there are four general causes of intestinal dysbiosis: *putrefaction, fermentation, deficiency and sensitization.*

Putrefaction

Putrefaction dysbiosis results from diets high in fat and animal flesh and low in insoluble fiber.

Putrefaction dysbiosis is corrected by decreasing dietary fat and flesh, increasing fiber consumption and feeding Bifidobacteria and Lactobacillus preparations.

As there is a decrease in friendly bacteria, the production of short-chain fatty acids and other beneficial nutrients is decreased.

There is also an increase in ammonia which can have negative effects on many bodily functions. Research suggests that this type of dysbiosis is contributing towards colon cancer and breast cancer.

Fermentation (Small Bowel Bacterial Overgrowth)

This is a condition of overgrowth of bacteria in the stomach, small intestine and beginning of the large intestine and causes carbohydrate intolerance.

This may be the only symptom of bacterial overgrowth, making it indistinguishable from intestinal candidiasis.

Gastric bacterial overgrowth increases the risk of systemic infection.

British physicians working with the gut-fermentation syndrome have tentatively concluded, based on treatment results, that the majority of cases are due to yeast overgrowth and about 20% are bacterial in origin. The symptoms include abdominal distension, carbohydrate intolerance, fatigue and impaired mental function.

Bacterial overgrowth here is encouraged by

The Complete Digestive Health Guide

- hypochlorhydria,
- sluggishness due to abnormal bowel motility,
- immune deficiency or
- by malnutrition.

Gastric bacterial overgrowth increases the risk of systemic infection and can lead to intolerance to carbohydrate.

Any carbohydrate ingested is fermented by bacteria and results in production of toxic waste products.

Dietary sugars can be fermented to produce ethanol.

Chronic exposure of the small bowel to ethanol may impair intestinal permeability.

Deficiency

Exposure to antibiotics or a diet low in soluble fiber may create a deficiency of normal friendly flora, including *Bifidobacteria*, *Lactobacillus* and *E. Coli*.

This condition has been described in patients with Irritable Bowel Syndrome (IBS) and food intolerance.

Deficiency and putrefaction dysbiosis are complementary conditions which often occur at the same time and call for the same treatment regimen.

Sensitization

Aggravation of abnormal immune responses to components of the normal intestinal flora may contribute to the development of Inflammatory Bowel Disease (Crohn's Disease and Ulcerative Colitis), spinal arthritis, other connective tissue disease and skin disorders such as psoriasis or acne.

Dealing with Dysbiosis

Here, the trick is in getting the balance right. In the same way you would have the timing set in the engine of your car in order to make the ride smoother and more efficient, so too do we need to get the balance of fauna and flora right within the bowel. The guidelines laid out for managing Candida and other chronic gut infections apply here. Essentially, eliminate all foods from the diet that may lead to overgrowth of yeasts and fungi. That is essentially all refined starches, sugars, dairy, vinegars, acidic foods like tomatoes, caffeine and fermented alcohols like wine, beer and cider. Eat a diet rich in whole foods like seasonal fruits and vegetables, free range meats, fish and poultry. Avoid the unnecessary use of any medications, especially antibiotics. Make use of a doctor of natural medicines, like a homeopath, chiropractor or naturopath to help you get through infections as well as any other illness. Keep the powerful drugs of modern medicine for emergencies. These drugs all impact negatively on the delicate balance of bacteria and yeast in the bowel.

An essential component for treating Dysbiosis effectively is at least two consecutive months treatment of Matula Herbal Formula™. It has been scientifically proven to inhibit **93%** of Candida, without any side effects. In addition to Matula Herbal Formula™ also take the best quality PROBIOTICS for a period of at least 3 months and CHLORELLA for 3 months if female and 1 month for males. Additionally we highly recommend a single 21 day treatment of Matula ULTRA to boost your immune system. Either take a basic multivitamin and mineral supplement, or have your vitamin and mineral levels tested and use appropriate supplements.

To complete the treatment protocol we recommend a [GENERAL DETOX](#) that ideally contains a mixed fibre supplement and Psyllium Husk.

[Please click on the above links for information on the recommended products.](#)

Leaky Gut Syndrome

Leaky gut syndrome, or gut hyperpermeability, is the name given for the condition that allows larger food particles (macromolecules) to pass through the gut wall. The cells that make up the lining of the gut, are linked together by a chemical bond called a tight junction. This junction maintains the integrity of the gut wall. Ordinarily, only properly digested food (micromolecules) permeates through the intestinal wall. When this wall is damaged, larger particles, such as partially digested food, pathogens such as parasites or yeasts and toxins, pass through. The body does not recognize them and activates the immune system to search and destroy. The result is inflammation.

Leaky gut syndrome is linked to autoimmune diseases such as arthritis, lupus, fibromyalgia, chronic fatigue syndrome, and IBD. Many health practitioners see leaky gut syndrome as the underlying cause of many food allergies and food sensitivities because the body begins to recognize many types of food as foreign. When food slips through the intestinal wall, the body automatically goes into attack mode. Eventually, the body habitually recognizes these foods as the "enemy," and every time you eat them, the body reacts—you have a food sensitivity.

There is no single cause of leaky gut syndrome. Antibiotics, caffeine and alcohol, severe trauma like burns or prolonged surgery, chronic constipation, chemicals and other environmental pollutants, stress, poor diet, parasites, yeast, and bacteria could all contribute to a leaky gut.

Dealing with Leaky Gut Syndrome

Many health practitioners recommend a hypoallergenic diet. Sugar, white flour products, wheat, oats, dairy products, high-fat foods, alcohol, and foods often linked to sensitivities and allergies **must be eliminated for periods of time to see if problems resolve**. If so, they should be eliminated from your diet. How you eat is also important. Chew food more thoroughly and attempt to eat frequent small meals instead of a few large meals.

An essential component for treating Leaky Gut Syndrome effectively is at least two consecutive months treatment of [Matula Herbal Formula™](#). In addition to [Matula Herbal Formula™](#) also take the best quality [PROBIOTICS](#) for a period of at least 3 months and [CHLORELLA](#) for 3 months if female and 1 month for males. Additionally we highly recommend a single 21 day treatment of [Matula ULTRA](#) to boost your immune system. Either take a basic multivitamin and mineral supplement, or have your vitamin and mineral levels tested and use appropriate supplements.

To complete the treatment protocol we recommend a [GENERAL DETOX](#) that ideally contains a mixed fibre supplement and Psyllium Husk.

Also look for products that also offer a "prebiotic" as well. The prebiotic facilitates the growth and multiplication of the probiotic. Use a good [omega-3](#) supplement, like [ARCTIC KRILL](#) OIL to reduce inflammation in the gut lining.

Colon irrigation may well be indicated to relieve old fecal impactions along the colon, thereby reducing ongoing inflammation.

Peptic and Gastric Ulcers

Most Common Types of Ulcers

- **Peptic Ulcer**
An ulcer in the lining of your stomach or duodenum is called a peptic ulcer. It derives its name from Pepsin which is present along with hydrochloric acid in the stomach lining. In general, ulcers in the stomach and duodenum that are exposed to pepsin are referred to as peptic ulcers. There are many symptoms of peptic ulcers that are worth checking out.
- **Gastric Ulcer**
When a peptic ulcer is in your stomach, it is called a gastric ulcer. The symptoms of gastric ulcers are more specific than peptic ulcer symptoms.
- **Duodenal Ulcer**
When a peptic ulcer is in your duodenum, it is called a duodenal ulcer. This type of peptic ulcer develops in the first part of the small intestine. Some of the symptoms of a duodenal ulcer are interestingly quite opposite to those of gastric ulcers.

Less Common Types of Ulcers

- **Esophageal Ulcer**
This type of ulcer occurs in the lower end of your esophagus. Esophageal ulcers are often associated with a bad case of acid reflux, or GERD as it is commonly called (short for Gastro Esophageal Reflux Disease).
- **Bleeding Ulcer** Internal bleeding is caused by a peptic ulcer which has been left untreated. When this happens, it is now referred to as a bleeding ulcer - this is the most dangerous type of ulcer. See your doctor immediately if you are showing symptoms.
- **Refractory Ulcer**
Refractory ulcers are simply peptic ulcers that have not healed after at least 3 months of treatment.
- **Stress Ulcer**
Stress ulcers are a group of lesions (or lacerations) found in the esophagus, stomach or duodenum. These are normally only found in critically ill or severely stressed patients

Making sure the problem is an Ulcer.

First up, are you really sure you have an ulcer? You may think you have an ulcer, but you can make sure once you check out the most common symptoms of a stomach ulcer listed below. Also find out more about possible complications that could cause misery later.

Once you have established that you have an ulcer, take some time to explore some natural alternatives BEFORE you decide on taking the drugs that doctors prescribe, or you may subject yourself to a host of side effects.

Identifying the symptoms of a stomach ulcer is the first step you need to take to make sure you have an ulcer.

Lucky for us all types of stomach ulcers have their own telltale signs and symptoms. Also those that have suffered before have left us a good trail of reliable and common warning signs for us to watch out for.

The 3 most common symptoms of a stomach ulcer

Keep a look out for these symptoms - they are common to all types of stomach ulcers....

1. **Abdominal pain**
2. **Heartburn** (also called acid reflux, or GERD)
3. **Abdominal Discomfort** (2 - 4 hours before or after meals)

If you have any of the above symptoms, the bad news is that you will most probably have a stomach ulcer. The good news is that 90% of all ulcers are easily curable!

THERE ARE EXCEPTIONS - BE CAREFUL!

If you have a bleeding ulcer you may not feel any pain at all. In fact you may only realize you have a problem when you start vomiting blood or passing blood in your stools. Bleeding ulcers must not to be left unattended as they can prove fatal.

Complications to be aware of !!

If any complications have already set in, then these are the warning symptoms you really need to be looking out for;

- black and smelly stools
- nausea or vomiting of blood
- chest and back pain
- fainting and dizzy episodes

IMPORTANT: If you are still not sure if you have the symptoms of a stomach ulcer then it is best to get a proper diagnosis from your physician.

Common Myths about Treating Peptic Ulcers

When you feel the onset of any of the above 3 most common symptoms, you may remember an old housewives tale and take a glass of milk, a comforting snack, or maybe you would even take a more modern approach and take an antacid (avoid these at all costs!).

All these can bring partial relief to the symptoms of a stomach ulcer, but that's where it stops. **NONE OF THESE WILL CURE YOUR ULCER!** Take any of these and you can put money on the fact that your ulcer pain will bounce back before you know it!

Choosing a proper treatment for your peptic ulcer can be quite challenging. For your own good health, now is the time to consider a natural approach.

The BIG difference between natural remedies and drug therapies is that natural remedies are easier to take and have fewer or no side effects.

Different Ulcers Types have different symptoms

There are 7 different types of stomach ulcers and the symptoms are different for each different type of ulcer. For example, duodenal and gastric ulcers have symptoms which are quite opposite.

Any symptoms of a stomach ulcer should be regarded as a warning signal.

If you notice any one particular symptom, then best you keep a lookout for any other symptoms that may follow. Never hesitate to see your doctor for a proper diagnosis. Stomach ulcer symptoms should be taken seriously. Get the right treatment and you won't have to live with the pain and discomfort of you ulcers anymore.

Dealing with Ulcers

If you have identified with the above symptoms, we would strongly advise getting a proper diagnosis from your Doctor. Get a definitive test for **H Pylori**. If this option is not available, or not desired, we recommend the following course of action...

First cut out ALL processed foods, caffeine, alcohol, cigarettes and sugar in all its forms. Identify your major stressors and set to work on minimizing them. Eat smaller meals that are made with simpler foods. Sip warm water through your meals. Discuss

the medication you are currently using with your doctor, as many common medications like aspirin and ibuprofen can cause ulcers.

Do a simple acid test. This very simple acid test can help you see if you have too much or too little acid in your stomach. Mix a quarter teaspoon of fresh bicarbonate of soda into a small glass of warm water. Swallow this on an empty stomach first thing in the morning. If you belch dramatically and within one minute of swallowing this mixture, it is likely you have too much acid. If it takes two to three minutes to belch, your levels of acid are probably normal. If it takes longer than five or six minutes to belch, it is very likely that you have lower than normal levels of stomach acid. Following the advice below will help to correct this.

As those of you who are likely to be reading this Book have learned, digestive disorders, especially ulcers, are difficult to treat. Most of you have probably been exposed to the more conventional treatments offered by mainstream medicine. As you have discovered, these are only partially effective and temporary. Often many different drugs are required to treat the various symptoms and aspects of Ulcers: pain, nausea, indigestion, infection all of which require different drugs for their treatment. With the relatively recent discovery of *H. pylori*, the bacterium that causes the majority of stomach ulcers (90%), and an alarmingly high percentage of stomach cancer (50%), the usage of these various drugs has escalated. But yet, the accepted treatments are still fraught with side effects, both short-term and long-term. We now know that most people who are infected with *H. pylori* are also infected with *Candida*. We also know that *Candida* infections are mostly caused by antibiotic usage. Can you now understand why the modern treatment (of two to three double strength antibiotics) of *H. pylori* is so potentially harmful!

Matula Herbal Formula™ is a profoundly healing herbal blend. This amazing herbal blend tackles the problem of Ulcers from all angles without side effects. It is organic, indigenous and unique, known for its abundance of healing plants. **Matula Herbal Formula™**, taken twice a day, will help to eradicate *H. pylori*, this has been proven both in the laboratory, as well as in clinical trials. It will also treat *Candida*, so often associated with *H. pylori*. It will reduce inflammation of the stomach or bowel lining, and repair ulcers normally within two weeks. **Matula Herbal Formula™** also reduces nausea, cramping, bloating and indigestion always found with ulcers.

We also recommend various supplements, like vitamin B complex and zinc, and herbs, like liquorice root, aloe vera, mallow and taheebo, for the management of this difficult problem. Since Doctors have learnt about **Matula Herbal Formula™**, none of them have ever looked back. They use are now using Matula as a single remedy along with a good quality probiotic, like **COMPLETE PROBIOTICS** and have one success story after another with patients recovering from *H. pylori* and their ulcers. A good omega-3 oil, **ANTARTIC KRILL OIL** can help reduce inflammation in the bowel lining.

Be careful of using any digestive enzyme formulas if you are not certain your problem is an ulcer or not, this may aggravate your symptoms if you already have too much acid.

In addition to **Matula Herbal Formula™** we also recommend that you eat plenty of dark green vegetables, rich in chlorophyll and vitamin K. Drink fresh cabbage juice daily, immediately after juicing it. we find a dilute soup made with potatoes, cabbage and carrots particularly helpful. Grains should be very well cooked, preferably in double the amount of water usually used for their preparation, and cooked for almost double as long. Include Millet, unrefined Rice, Barley and Rolled Oats. Drink Wheat, Barley or Alfalfa juice.

Treating a peptic ulcer can take some time, possibly a few weeks. If you feel this is your problem, or you have been diagnosed as such, be patient and stick with your program. Use the time to develop new stress coping skills, new relaxation techniques, like some of those outlined in this eBook. As far as possible and within reason, try to avoid using any medical drug treatments for this problem. The drugs will only address the symptoms, at further cost to you in terms of side effects.

Belching, Bloating and Flatulence

What are the Gas Related Symptoms?

Belching, or burping, refers to the noisy release of air or gas from your stomach through your mouth. Unpleasant abdominal fullness or distention is called bloating. Flatulence is the passage of excessive amounts of intestinal gas, or flatus, through your anus.

How Common are Gas Symptoms?

As much as 7% of people complain of excessive belching, and 11% report frequent bloating. Normal people pass gas, on average, ten times each day. Passage of gas up to twenty times daily is still considered normal.

What are the Causes of Gas Symptoms?

There are several important factors that influence gas related symptoms. These include the amount of air that you swallow; the efficiency with which your gastrointestinal tract moves and expels the air or gas; and the amount of gas that is produced by the bacteria living in your colon that act on incompletely digested food. There are also individual differences in sensitivity or tolerance to normal amounts of retained gas or the passage of a normal amount of flatus.

Can a Person Swallow Too Much Air?

It is clear that some people swallow too much air into the stomach. If you eat quickly, gulp food or beverages, or drink through a straw, chew gum, suck on hard candy or wear loose fitting dentures may contribute to excessive air swallowing. People also swallow more frequently, and as such swallow more air, when they are nervous. Air can also be swallowed and released voluntarily as many people are able to belch at will. In some people, excessive belching has become a learned behavior, or habit, that initially may have been associated with some relief of indigestion symptoms, but now continues almost unconsciously.

The air that you swallow and which is not removed by belching will pass through the digestive tract and eventually pass as flatus from your rectum. In normal people, about 50% of the gas passed from the rectum comes from swallowed air, and this amount can increase significantly in those individuals who swallow air excessively. Surprisingly, most people who experience excessive bloating and flatulence do not swallow or produce excessive gas. In these individuals, it seems that the movement of swallowed air, from the stomach toward the rectum, is much slower than normal. Additionally, the gas may sometimes move the wrong way, returning to the stomach. So, in spite of the fact that the amount of gas may be normal, people can experience bloating and "gas" because the gas is not moved efficiently, and it may accumulate, causing discomfort from the increased stretching of the bowel walls.

How Do Some Foods Lead to Excess Gas?

Some people have difficulty digesting certain foods completely. This can lead to partially digested food passing from the small intestines to the colon. There are a large number of bacteria in the colon that will readily "digest" the food further and produce gases in the process. Foods that contain certain sugars that are very difficult for most people to digest include the well-known gas-forming foods such as baked beans, lima beans and lentils. Most people also have difficulty properly digesting commonly added sweeteners such as fructose and sorbitol. Some people (particularly adults of Asian, African and Southern European descent) have difficulty digesting lactose (milk sugar) because they do not make enough of the enzyme, lactase, which is needed to breakdown lactose. If there is a large amount of

lactose in their diet, then the incompletely digested lactose will pass to the colon where bacteria break it down and produce gas.

It is also thought that there are differences between individuals in their sensitivity to intestinal stretching from gas, and their tolerance for gas related symptoms. The sensitivity of the gastrointestinal tract and the severity of symptoms tend to increase as the amount of stress increases.

Can Certain Medications Cause Excess Gas?

There are some prescription medications that purposefully inhibit digestive enzymes (e.g. acarbose) and others that contain indigestible sugars (lactulose and sorbitol) to accomplish their intended effect. These medications will often cause gas-related symptoms.

Can Excess Gas Mean There is a Serious Problem?

Rarely, patients can have a serious underlying disease of the digestive tract, such as celiac disease (gluten intolerance), dumping syndrome or pancreatic insufficiency that is the cause of their gas symptoms. These conditions may lead to improper digestion of food and result in excessive diarrhea, flatulence and finally, malnutrition and weight loss.

When Should You See a Doctor about Belching, Bloating or Flatulence?

By themselves, gas-symptoms are not worrisome or indicative of any underlying serious condition. A visit to the doctor may be helpful if the symptoms are very bothersome and there are other associated symptoms that may benefit from further testing and or treatment. Symptoms that should be further evaluated by a doctor include abdominal pain, vomiting, diarrhea, constipation, weight loss, bleeding from the gastrointestinal tract and sometimes heartburn.

Currently, there are few clinical tests (other than the history obtained from the patient and a physical examination) that are used to further assess gas symptoms. In some cases, endoscopy (the insertion of a small lighted flexible tube through the mouth into the esophagus and stomach) may be helpful if ulcer disease or reflux disease is suspected, or sigmoidoscopy or colonoscopy (insertion of a similar tube into the rectum and colon) if there are associated changes in the bowel patterns. An x-ray of the abdomen may be performed if blockage of the intestines needs to be excluded. Sometimes lactose intolerance should be assessed with a trial of a lactose free diet for two weeks, or with a special blood or breath test. There are also simple blood tests available to screen for celiac disease (gluten sensitivity) if there are other features to suggest this disorder.

Dealing with Gas-Related Symptoms?

Sometimes excessive belching is associated with gastroesophageal reflux disease (GERD), and treatment of this condition may alleviate bothersome burping. Anti-gas medications, such as simethicone, **are generally useless for excessive belching**. Lifestyle modification such as avoidance of rapid eating, chewing gum, carbonated beverages and stopping smoking are often recommended but the response is variable. When simple reassurance and lifestyle modifications are not satisfactory, then psychological treatments such as relaxation therapy or behavioral therapy are currently the most useful approaches.

Bloating and flatulence are sometimes related to constipation, and treating the underlying condition may be helpful. After other conditions, such as lactose intolerance, have been excluded, a low gas-forming diet should be recommended. The diet excludes poorly digested foods such as the Brassica vegetables (brussel sprouts, turnip, rape, mustard, cabbage, broccoli, cauliflower) as well as beans and lentils. Foods (including any drink, candy, gum or breath freshener) that contain sorbitol and added fructose **should also be avoided**. Fiber supplements and a high fiber diet can aggravate bloating symptoms, and should be discontinued if there is no benefit. A diet containing rice flour is fully absorbed in the small intestines and so produces the least amount of

gas. There are several over-the-counter medications to treat gas-related symptoms including simethicone, activated charcoal and beano. *Unfortunately, none of these products are very effective.*

By far the most effective approach to excess bowel gas, is to keep a food and symptom diary. If such a simple diary is kept for a period of two to three weeks, you will soon see which foods are implicated. Avoid them. Taking a good digestive enzyme that contains Pancreatin and Lipase will each meal will help to digest your food better, lowering the likelihood that undigested food residues find their way into the colon.

We recommend using **Matula Herbal Formula™**, twice daily for treating excess bowel gas effectively. This herbal blend has proven anti-bacterial (natural antibiotic) and anti-fungal properties. **Matula Herbal Formula™** also increases movement of bowel contents through what is called peristalsis and this helps the effect and proper digestion of the food you eat.

Supplement **Matula Herbal Formula™** with a good quality, high strength Probiotic, like **COMPLETE PROBIOTICS** will help to reduce the likelihood of dysbiosis which further contributes to the problem. Having a stool analysis done at a specialist Microbiological laboratory will help to identify any parasite or yeast overgrowth, as well as evaluate your 'good' bacterial balance. We have had numerous clients that are deficient in certain bowel bacteria. They have done very well after reintroducing these bacteria into the bowel. Remember, it is good to let off a bit of steam now and again!

Testing for the presence of *H. pylori* and *Candida Albicans* Chapter 3

Helicobacter Pylori tests are used to detect a *Helicobacter Pylori* (*H. pylori*) infection in the stomach and upper part of the small intestine (duodenum). *H. pylori* can cause peptic ulcers; however, most people with *H. pylori* in their digestive systems do not develop ulcers.

Four tests are used to detect *H. pylori*:

- **Blood antibody test.** A blood test checks to see whether your body has made antibodies to *H. pylori* bacteria. If you have antibodies to *H. pylori* in your blood, it means you either are currently infected or have been infected in the past.

NOTE: A blood test does not provide a definitive result on the status of *H. pylori*. This is because antibodies remain in the blood for between 12 to 18 months post any successful treatment. What it is used for is to test the antibody level at least **3 and 6 months after the infection** to show that at each time point antibodies are lower than at the original baseline (before treatment) level.

- **Urea breath test.** A urea breath test checks to see if you have *H. pylori* bacteria in your stomach. The breath test is not always available and is **the least accurate of tests available.**
- **Stool antigen test.** A stool antigen test checks to see if substances that trigger the immune system to fight an *H. pylori* infection (*H. pylori* antigens) are present in your feces (stool). Stool antigen testing may be done to help support a diagnosis of *H. pylori* infection or to determine whether treatment for an *H. pylori* infection has been successful. **WE ONLY RECOMMEND THIS TEST.**
- **Stomach biopsy.** A small sample (biopsy) is taken from the lining of your stomach and small intestine during an endoscopy. Several different tests may be done on the biopsy sample. For more information, see the medical test Upper Gastrointestinal Endoscopy.

Why It Is Done

A *Helicobacter Pylori* (*H. pylori*) test is done to:

- Determine whether an infection with *H. pylori* bacteria may be causing an ulcer or irritation of the stomach lining (gastritis).
- Determine whether treatment for an *H. pylori* infection has been successful.

How to Prepare

Blood antibody test or stool antigen test

You do not need to do anything before you have a blood antibody test or stool antigen test.

Stomach biopsy or urea breath test

Do not eat or drink for at least 6 hours before a breath test or a stomach biopsy.

Many medicines may change the results of this test. Be sure to tell your doctor about all the prescription and nonprescription medicines you take. Your doctor may recommend that you stop taking some of your medicines for up to 1 week before having this test.

- Do not take antibiotics, proton pump inhibitors (such as Prilosec or Nexium), or medicines containing bismuth (such as Pepto-Bismol) for 1 to 2 weeks before the test.

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- Do not take H₂ blockers, such as Pepcid AC, Zantac, Axid, or Tagamet for 24 hours before the test.

Talk to your health professional about any concerns you have regarding the need for the test, its risks, how it will be done, or what the results may mean.

Results

Helicobacter Pylori tests are used to detect a H. pylori infection in the stomach and upper part of the small intestine (duodenum).

Results from the urea breath test or a stool antigen test are generally available within a few hours. Results from a blood antibody test are usually available within 24 hours. Results from biopsy samples obtained by endoscopy usually available within 48 hours. Results from a biopsy sample that is cultured can take up to 10 days.

Candida Albicans Test

We highly recommend the Metametrix, Microbial Profile DNA Stool Analysis test (2105 - highlighted in yellow in the text box below) for accurately determining the status or presence of Candida Albicans plus bacteria and parasites that cause GI Tract illnesses and infections.

GI Effects – Stool Analysis

Test name:	2100* - Complete GI Effects Profile – Includes 2105, 2110, 2115, 2120 2105* - Microbial Profile – Bacteria, fungi/yeast, parasites 2110* - Mycology Profile – Fungi/yeast only 2115* - Parasitology Profile – Parasites only 2120* - Chemistry Profile – Digestive, inflammation, absorption *Not available in New York
Description:	GI Effects Stool Analysis Profiles go beyond "old stool technology" to bring you the most comprehensive stool analysis to date. GI Effects Profiles use DNA analysis to identify microbiota with 100% accuracy — including anaerobes, a previously immeasurable area of the gut environment. In addition to much more comprehensive bacteriology, mycology, and parasitology, GI Effects Profiles report drug resistance genes, antibiotic and botanical sensitivities, gliadin-specific sIgA, Elastase1, plus other inflammation, digestion, and absorption markers clinicians requested — with no hidden costs.
Method:	GC/MS, PCR ELISA, Automated Chemistry, Colorimetric, HPLC
Turnaround time:	10 - 14 days

Pharmaceutical Drugs vs Natural Alternative Treatments? Chapter 4

You may probably already know the answers to this from your personal experience but let me provide you with a very quick comparative summary between the two.

The first thing to consider is that Pharmaceutical Drugs are made up entirely from a blend and mixture of complex man made chemicals. On the other hand, Natural Herbal treatments are made up entirely of what nature has provided us with, without use of pesticides or for that matter any other chemicals.

The big question to ask yourself is this. If you were ill and needed a treatment:-

- would you choose a drug that only treats the *symptoms* where you are likely to get some side effects, that will then require further treatments?, OR
- would you choose a Natural Herbal treatment that can fix the *cause* of the illness and that has **no** side effects?

Do you know that as simple as this may sound, most of us would still take a pharmaceutical drug? Can you figure that out? It really doesn't make any sense what so ever.

We feel compelled to share some information that is not commonly known by those who take the drugs listed in the table below. This is really shocking, particularly as these drugs are specifically for treating illnesses associated with the very core of your health – your Digestive System. This is the reality and some of or all of the side effects listed in the table are associated with the respective drugs.

Please refer to the Table on **page 29** that shows the negative side effects of the drugs that are prescribed for treating H. pylori or ulcers.

If you could wave a magic wand, wouldn't you wish for a treatment that could heal you quickly, completely and without any further worries or side effects. I bet you would!!!

Let us give you a background to the most effective treatments...

Holistic Therapy

This complete Therapeutic approach towards treating and overcoming illnesses and diseases is becoming extremely popular worldwide, because so many people have found it to be incredibly effective. It is called **Holistic Therapy** and is defined as follows:-

“An approach to therapy which focuses on the use of natural substances, and in which all the physical, mental, and social aspects of the patient's life are taken into account in understanding and curing their illness as opposed to merely treating their symptoms.”

Let's take a closer look at the “*use of natural substances*” part first. Natural substances are mainly derived directly from organic herbs or plants unlike drugs that are essentially made up of chemicals. These natural substances form an essential and integral part of the treatment and recovery process. The best natural substances available have outstanding medicinal properties and values that have been proven to be vastly superior to conventional medicines. In some cases three or more natural substances are used simultaneously to effectively remove the cause of an illness or disease and speed up the recovery process. For example, the treatment may include a combination of an Herbal Blend, Probiotics, Immune Booster and Glyconutrients and even a parasite cleanse. All five of these add specific value to the overall

treatment. This therapeutic approach results in a highly effective and **complete** treatment and recovery without any side effects.

As we have alluded to in earlier discussions on treatments, it is important to evaluate all possible causes of illness. When considering the physical approach, one wants to uncover any hindrance to the proper and robust functioning of your immune system. Good Doctors will look for food allergies or intolerances, for heavy metal toxicities, for improper stool microbiology or flora balance, for micro- and macro-nutrient deficiencies, for hormonal imbalances especially that of the Adrenal gland, as well as digestive enzyme deficiencies. One must very obviously include honest assessment of your mental, emotional and physical status and its relation to your health. Treatment in these areas is focused on restoring balance using various mental and spiritual techniques.

These aspects cover relaxation techniques, meditation, biofeedback techniques, developing positive thoughts, overcoming stress and anxiety, promoting happiness and getting enough sleep each night.

Collectively, these all promote a very positive and more profound influence on recovery from even the most severe of illnesses. That is why so many people are now seeking Holistic Therapy compared with traditional treatment methods.



Mental and Social Aspects within Holistic Therapy

This is a fundamental part of Holistic Therapy for treating any illness or disease, even the most severe and life threatening of illnesses, that you may be suffering from. There is also merit in making this an integral part of your life after you have recovered fully from an illness.

Always remember, “We become what we think about”. This is a great truth and most people don’t really understand the importance of this truth.

Relaxation Techniques

What are relaxation techniques?

Our fast-paced society often causes people to push their minds and bodies to the limit, often at the expense of physical and mental well-being. According to the Mind/Body Medical Institute at Harvard University, between 60 and 90 percent of all medical office visits in the United States are for stress-related disorders. Relaxation techniques are helpful tools for coping with stress and promoting long-term health by slowing down the body and quieting the mind. Such techniques generally entail: refocusing attention (by, for example, noticing areas of tension); increasing body awareness; and exercises (such as meditation) to connect the body and mind together. Used daily, these practices can over time lead to a healthier perspective on stressful circumstances.

What are the types of relaxation techniques?

There are three major types of relaxation techniques:

- **Autogenic training.** This technique uses both visual imagery and body awareness to move a person into a deep state of relaxation. The person imagines a peaceful place

and then focuses on different physical sensations, moving from the feet to the head. For example, one might focus on warmth and heaviness in the limbs, easy, natural breathing, or a calm heartbeat.

- **Progressive muscle relaxation.** This technique involves slowly tensing and then releasing each muscle group individually, starting with the muscles in the toes and finishing with those in the head.
- **Meditation.** The two most popular forms of meditation in the U.S. include Transcendental Meditation (students repeat a *mantra* [a single word or phrase],) and mindfulness meditation (students focus their attention on their moment-by-moment thoughts and sensations).

How do relaxation techniques work?

When we become stressed, our bodies engage in something called the "fight or flight response." The fight or flight response refers to changes that occur in the body when it prepares to either fight or run. These changes include increased heart rate, blood pressure, and rate of breathing, and a 300 to 400 percent increase in the amount of blood being pumped to the muscles. Over time, these reactions raise cholesterol levels, disturb intestinal activities, and depress the immune system. In general, they leave us feeling "stressed out."

However, we also possess the opposite of the fight or flight response—the "relaxation response." This term, first coined in the mid-1970s by a Harvard cardiologist named Herbert Benson, refers to changes that occur in the body when it is in a deep state of relaxation. These changes include decreased blood pressure, heart rate, muscle tension, and rate of breathing, as well as feelings of being calm and in control. Learning the relaxation response helps to counter the ill effects of the fight or flight response and, over time, allow the development of a greater state of alertness. The relaxation response can be developed through a number of techniques, including meditation and progressive muscle relaxation. It is now a recommended treatment for many stress-related disorders.

What are relaxation techniques good for?

Research suggests that meditation can help improve a person's quality of life and reduce stress hormone levels.

Studies also show that relaxation techniques reduce the perception of pain. One study found that among patients undergoing colorectal surgery, those who listened to guided-imagery tapes before, during, and after the operation had less pain and needed fewer pain medications than those who did not.

Meditation has also been used as part of the treatment for post-traumatic stress disorder in Vietnam veterans and to break substance abuse patterns in drug and alcohol abusers. Relaxation techniques can also enhance coping skills in migraine sufferers and reduce stress as well as improve mood in those with cancer.

In general, studies show that with consistent practice, relaxation techniques can potentially reduce symptoms or improve outcomes in the following conditions:

- premenstrual syndrome
- pain
- irritable bowel syndrome

- anxiety
- infertility
- high blood pressure
- high cholesterol
- diabetes
- panic disorders
- chronic tension headaches
- fibromyalgia
- insomnia
- psoriasis
- arthritis
- hyperactivity in children, as in attention deficit hyperactivity disorder (ADHD)

It is extremely important that usual medical care and advice be followed for these conditions as well. Relaxation techniques are meant to complement usual medical care.

Progressive Relaxation

This technique is often most useful when you tape the instructions beforehand. You can tape these instructions, reading them slowly and leaving a short pause after each one.

- Lie on your back, close your eyes.
- Feel your feet. Sense their weight. Consciously relax them and sink into the bed. Start with your toes and progress to your ankles.
- Feel your knees. Sense their weight. Consciously relax them and feel them sink into the bed.
- Feel your upper legs and thighs. Feel their weight. Consciously relax them and feel them sink into the bed.
- Feel your abdomen and chest. Sense your breathing. Consciously will them to relax. Deepen your breathing slightly and feel your abdomen and chest sink into the bed.
- Feel your buttocks. Sense their weight. Consciously relax them and feel them sink into the bed.
- Feel your hands. Sense their weight. Consciously relax them and feel them sink into the bed.
- Feel your upper arms. Sense their weight. Consciously relax them and feel them sink into the bed.
- Feel your shoulders. Sense their weight. Consciously relax them and feel them sink into the bed.
- Feel your neck. Sense its weight. Consciously relax it and feel it sink into the bed.
- Feel your head and skull. Sense its weight. Consciously relax it and feel it sink into the bed.
- Feel your mouth and jaw. Consciously relax them. Pay particular attention to your jaw muscles and unclench them if you need to. Feel your mouth and jaw relax and sink into the bed.
- Feel your eyes. Sense if there is tension in your eyes. Sense if you are forcibly closing your eyelids. Consciously relax your eyelids and feel the tension slide off the eyes.
- Feel your face and cheeks. Consciously relax them and feel the tension slide off into the bed.
- Mentally scan your body. If you find any place that is still tense, then consciously relax that place and let it sink into the bed.

Toe Tensing

This one may seem like a bit of a contradiction to the previous one, but by alternately tensing and relaxing your toes, you actually draw tension from the rest of the body. Try it!

1. Lie on your back, close your eyes.
2. Sense your toes.

3. Now pull all 10 toes back toward your face. Count to 10 slowly.
4. Now relax your toes.
5. Count to 10 slowly.
6. Now repeat the above cycle 10 times.

Deep Breathing

By concentrating on our breathing, deep breathing allows the rest of our body to relax itself. Deep breathing is a great way to relax the body and get everything into synchrony. Relaxation breathing is an important part of yoga and martial arts for this reason.

1. Lie on your back.
2. Slowly relax your body. You can use the progressive relaxation technique we described above.
3. Begin to inhale slowly through your nose if possible. Fill the lower part of your chest first, then the middle and top part of your chest and lungs. Be sure to do this slowly, over 8–10 seconds.
4. Hold your breath for a second or two.
5. Then quietly and easily relax and let the air out.
6. Wait a few seconds and repeat this cycle.
7. If you find yourself getting dizzy, then you are overdoing it. Slow down.
8. You can also imagine yourself in a peaceful situation such as on a warm, gentle ocean. Imagine that you rise on the gentle swells of the water as you inhale and sink down into the waves as you exhale.
9. You can continue this breathing technique for as long as you like until you fall asleep.

Guided Imagery

In this technique, the goal is to visualize yourself in a peaceful setting.

1. Lie on your back with your eyes closed.
2. Imagine yourself in a favorite, peaceful place. The place may be on a sunny beach with the ocean breezes caressing you, swinging in a hammock in the mountains or in your own backyard. Any place that you find peaceful and relaxing is OK.
3. Imagine you are there. See and feel your surroundings, hear the peaceful sounds, smell the flowers or the barbecue, feel the warmth of the sun and any other sensations that you find. Relax and enjoy it.
4. You can return to this place any night you need to. As you use this place more and more you will find it easier to fall asleep as this imagery becomes a sleep conditioner.
5. Some patients find it useful to visualize something boring. This may be a particularly boring teacher or lecturer, co-worker or friend.

Quiet Ears

1. Lie on your back with your eyes closed.
2. Place your hands behind your head. Make sure they are relaxed.
3. Place your thumbs in your ears so that you close the ear canal.
4. You will hear a high-pitched rushing sound. This is normal.
5. Listen to this sound for 10–15 minutes.
6. Then put your arms at your sides, actively relax them and go to sleep.



Other Areas of Importance in Holistic Therapy

Other areas of importance within Holistic Therapy include maintaining a stable and functional Immune System and a Balanced pH.

The Immune System

The immune system has become a crucial issue in our culture in recent years. We are faced with the limitations of modern medical science as it struggles to respond to the diseases of weakened immunity. A potential part of the solution is offered by the most ancient of medical approaches, herbalism!

To see the possibilities offered by herbs it is important to have a grasp of the biological basis of immunity, but at least as importantly is a comprehension of the role it plays in human life. The new, though still incomplete, understanding that immunology grants us illuminates its profound complexity, but there is much more involved.

Biologically human immunity includes everything involved in recognizing foreign substances and to neutralize them. It is a wonderfully complex and integrated set of processes that have only recently begun to be understood by medical science. There are two types of immunity, innate and acquired. Innate immunity is present from before birth, consisting of blood based components from the mother, physical barriers such as the skin and chemical barriers within the body.

Acquired Immunity

Acquired immunity, on the other hand, results from encountering a new substance that is recognized as foreign. This induces an immune response which is specific to that substance, be it a bacteria, virus, fungi, parasite or material. There is also the development of a rapid, and long-lasting immune response after the initial exposure to a pathogen, or initial development of cancerous tissue.

Acquired immunity produces antibodies, stimulates the cells which destroy the organisms and neutralize their toxic products. The acquired immune response has “attackers” and “controllers”, on and off switches as it were. If this becomes too active, however, the result may be undesirable, such as allergic reactions. On the other hand, when the immune response is deficient we become susceptible to repeated infections. Another activity is the removal of damaged or dying cells and the elimination of any cancer cells that arise within the body. When the “attackers” are not “controlled” or the off switch is not activated, the immune response can run away with itself. Unfortunately this may result in an immune response against the body’s own tissues, producing autoimmune disease.

Acquired immunity involves white blood cells which are constantly circulating in the blood stream. There are a variety of these cells but of especial are the lymphocytes. There are two groups, B and T lymphocytes. B lymphocytes (B-cells) manufacture antibodies, are produced in bone marrow and distributed to tissue around the body such as the lymph nodes. When B-cells come into contact with some foreign material, or antigen, they transform into cells which

produce vast amounts of the specific antibody. Other B-cells transform into memory cells which circulate throughout the body preparing it for any future encounter with this antigen.

The T-Cells

T lymphocytes (T-cells) originate in the thymus and are active against pathogens, cancerous or wounded cells, transplanted tissue. Their activity requires some direct physical contact with antigens, called cell-mediated immunity. A range of T-cells have been identified including 'Killer T-cells' that attack antigens directly; 'Helper T-cells' that enable the other T and B cells to perform their functions; and 'Suppressor T-cells' which monitor and adjust the level of antibodies and counteract the action of Helper T-cells.

The Herbal Possibilities

Herbal support of immune activity is an example of where traditional knowledge is being confirmed by modern research, with many remedies showing immunological effects in both laboratory and clinic.

These herbs are described as 'immuno-modulators' because they support natural responses to be more flexible in the face of disease. They provide a potential alternative to conventional chemotherapy of infections, especially with people having an impaired immune response. As they support the body's own immune mechanisms there is also the possibility of preventing opportunistic infections. The treatment of cancer may also benefit from their use as it is well known that tumor growth can be inhibited by stimulating components of the immune system, such T-killer cells.

Research by Chinese and Japanese scientists on their traditional remedies is revealing much of importance to immunology. Similar studies are rarely done on traditional western herbs and too often lack of research is taken to mean that the herb in question has no value. Lack of research is because of a lack of grants, not because of the plants lack of value.

Important herbs being introduced into western herbalism that are **effective immune boosters including African Potato, Astragalus, Chinese Privet, Shiitake mushrooms, Schizandra, Rheishi mushroom, Codonopsis, Ginseng and Siberian Ginseng**. There are many equally useful herbs from the west including Burdock, Blue Flag, Cleavers, Chaparral, Mistletoe, Nettles, Red Clover, Yellow Dock, Echinacea and Olive leaf extract. What a lot of these plants have in common is high levels of Glyconutrients. Glyco-biology is a very exciting new field of medical science. These 'sugars', or glyconutrients, seem to have amazing immune-modulating effects by enhancing cell-to-cell communication throughout the body. Aloe Vera is the best known source of glyconutrients. Another very exciting plant is the Mangosteen. This has been used by many traditional healers as a powerful medicine for a very wide range of illnesses. It contains very high levels of a very powerful antioxidants called Xanthones. By reducing active inflammation caused by free radicals in the body, the Xanthones restore proper immune function.

Infections

We live in constant contact with vast numbers of bacteria, viruses and fungi and the immune system ensures that this interaction is only occasionally a problem. In fact our well-being is dependent on healthy relationships with a range of organisms that live within and on us. The bacterial flora of the intestines and the micro-organisms on the skin are examples of this.

There are a range of ways herbal treatment help immunity cope with infection. Most important is boosting the immune response with immuno-modulators to help the body rid itself of the pathogen. **Another way is using herbs that directly kill the offending organism**. This involves some plant constituent reaching the site of infection which is not always easy, but anti-microbial plants will often do the job.

Both traditional herbalism and pharmacological journals abound in reports of plants having anti-microbial effects. **Examples include Berberry, Echinacea, Eucalyptus, Garlic, Golden Seal, Myrrh, Rosemary, St. John's Wort, Sage, Thyme, and Wild Indigo**. How they work is not always clear, but in the case of Echinacea research has provided some insights. Its actions relate to immunity by preventing and curing various pathogenic infections by activating the t cells that destroy pathogens, also raising levels of circulating white blood cells such as the neutrophils, monocytes, eosinophils, and B lymphocytes.

Cancer

Herbal remedies have a long and honorable history in the treatment of cancer, an immunological disease, and are still at the core of modern medicine's response to this intransigent disease. Cancer is a number of diseases which may affect different parts of the body, characterized by an uncontrolled formation of abnormal cells which may form a tumor, or proliferate throughout the body.

As a component of a treatment program constructed to address the individual with cancer in a holistic way, herbs demonstrate their relevance and efficacy by boosting the immune system response to the presence of cancer cells rather than trying to use herbs to kill the cells directly. **Research is revealing a sound pharmacological basis for the role of herbs in cancer therapy.** Effects on phagocytosis, interferon levels and others factors have been found.

As brief examples of properties identified by modern research consider these herbs. Amongst other actions Reishi *Codonopsis* counteracts the reduction in white blood cells induced by chemotherapy or radiotherapy. American Ginseng promotes lymphocyte transformation and restores blood cell development function of bone marrow following chemotherapy. Similarly Siberian Ginseng can counteract x-ray radiation damage, and inhibits metastasis. Reishi is an example of a plant shown to inhibit the growth of tumor cells.

Another exciting possibility is using herbs to influence the bodies production of interferon. Interferon's are proteins generated by cells when infected by viruses, and they appear to be part of the bodies 'broad-spectrum' anti-viral responses. They can also stimulate natural killer cell activity and other anti-tumor activity. Medical applications are limited by the toxicity associated with their use as drugs. Another approach is to promote or stimulate the natural cellular sources and some herbs do this. Plants that stimulate interferon production in laboratory tests include ***Astragalus, Burdock, Echinacea, Ginger, Nettles and some of the traditional oriental mushrooms like Shitake and Reishi.***

Holistic medicine shows us that the best way to treat an illness is to prevent it developing, and an essential component of prevention is to ensure that our diet and lifestyle are healthy. A holistic approach to boosting immunity must take into account many things and not just what herbs we might use. Herbs offer most benefit if used in a context that looks at the body, heart, mind and soul.

An immune boosting program would address bodily health & wholeness, ensuring that the body gets the correct nutrition and appropriate healing support for any ills it may be experiencing; emotional well being, nurturing our feeling of life, through both the joy and the pain of human life; mental vision & perspective, helping create a mind set within which one can find their place, and make choices from our center, not from the stance of the victim; and of course spiritual openness & vitality in what ever form that takes for the person involved.

Some exciting insights emerge when immunology is placed in an ecological perspective and not simply a biochemical one, as human immunity is a vital component of the interface between the individual and their world. Human activity is not simply that of resisting a dangerous environment; it is a complex, beautiful dance flowing to and fro within the world. So from a holistic perspective immunity is about harmony and not simply resistance, a dynamic dance with the environment and not merely a series of barriers to it.

Balanced pH Diet

Essentially, the alkaline diet is not aligned with the high protein, high fat, low carb diets that are currently in vogue. Most people have never heard of alkaline-acid balance, but many holistic doctors and nutritionists consider a properly balanced diet to be important to optimal health and preventing diseases such as cancer.

The theory behind an alkaline diet is that because our body's pH level is slightly alkaline, with a normal range of 7.36 to 7.44, our diet should reflect this and also be slightly alkaline. An imbalanced diet high in acidic foods such as animal protein, sugar, caffeine, and processed foods tends to disrupt this balance. It can deplete the body of alkaline minerals such as

sodium, potassium, magnesium, and calcium, making people prone to chronic and degenerative disease.

Who is this diet for?

This diet is for people who feel unwell on a high fat, low carb diet. It is also for people that lead stressful lives and who consume large amounts of acidifying foods such as protein, sugar, processed food, cereals, starches, and caffeine, with little alkalizing vegetables.

What are the symptoms of excess acidity?

- Low energy, chronic fatigue
- Excess mucous production
- Nasal congestion
- Frequent colds, flu, and infections
- Nervous, stressed, irritable, anxious, agitated
- Weak nails, dry hair, dry skin
- Formation of cysts, such as ovarian cysts, polycystic ovaries, benign breast cysts (fibrocystic breasts)
- Headaches
- Joint pain or arthritis
- Neuritis
- Muscle pain
- Feel better after a detox diet
- Hives
- Leg cramps and spasms
- Gastritis, acid indigestion

Medical doctors try to test the acidity or alkalinity of the body tissues and cells by analyzing the blood. Pioneers Carey Reams, Harold Hawkins, or Emanuel Revici developed methods to measure urine pH and other factors such as saliva pH. Modern proponents of the alkaline diet look at the pH of blood, saliva, and urine, in addition to health symptoms and other factors.

What are the guidelines of this diet?

An alkaline diet is composed of approximately 75-80% alkaline foods and 20-25% acid foods.

Alkaline Foods

Higher alkaline are better

Vegetables -- High alkaline: wheat grass, barley grass, alfalfa sprouts, broccoli sprouts, other types of sprouts, cucumber, kale, parsley, sea vegetables. Moderate alkaline: avocado, arugula, beets, bell peppers, broccoli, cabbage, celery, collard, endive, garlic, ginger, green beans, lettuce, mustard greens, okra, onion, spinach, tomato. Slightly alkaline: artichoke, asparagus, brussels sprouts, carrot, cauliflower, kohlrabi, leeks, peas, rhubarb, rutabaga, turnip, watercress, zucchini

Fruit -- Slightly alkaline: coconut, grapefruit, lemon, lime

Beans and legumes -- Moderate alkaline: lima beans, soy beans, white beans. Slightly alkaline: Lentils, tofu.

Nuts, seeds, oils -- High alkaline: pumpkin seeds. Slightly alkaline: almond, borage oil, coconut oil, cod liver oil, evening primrose oil, fish oil, flaxseed oil, olive oil, sesame seeds.

Grains -- buckwheat, quinoa, spelt

Condiments -- Moderate alkaline: cayenne, red chili pepper, sea salt, stevia. Most herbs and spices are somewhat alkaline.

Dairy -- Slightly alkaline: goat milk

Acidifying Foods

Lower acid are better. Most acidic are worst

Dairy and Dairy Substitutes -- Slightly acid: cow's milk, rice milk, soymilk. Most acid: cheese (including cottage cheese, hard cheese, aged cheese, and goat cheese), ice cream, soy cheese, whey protein powder.

Animal meat -- Moderate acid: wild fish. Most acid: beef, chicken, duck, eggs, farmed fish, gelatin, lobster, organ meat, pheasant, pork, poultry, seafood, squid, turkey, veal, venison.

Grains -- Slightly acid: amaranth, millet. Moderate acid: oats, rice (brown rice, white rice), rye, wheat. Most acid: barley, corn, rye.

Beans and legumes -- Slightly acid: black beans, chickpeas, kidney beans.

Vegetables -- Most acidic: mushrooms, potatoes. Fruit -- Slightly acid: cantaloupe, dates (not dried), nectarines. Moderate acid: apple, apricot, banana, all berries, figs (fresh), grape, honeydew, mango, orange, papaya, peach, persimmon, pineapple, tangerine, watermelon. Most acid: dried fruit.

Nuts, Seeds, and Oils -- Slightly acid: brazil nuts, flaxseeds, hazelnuts, pecans, sunflower seeds, sunflower oil, grapeseed oil. Moderate acid: butter, ghee, corn oil, margarine, walnuts. Most acid: cashews, peanuts, pistachios.

Condiments -- Moderate acid: ketchup, mayonnaise, table salt. Most acid: jam, mustard, soy sauce, vinegar, white sugar, aspartame, molasses, sugar cane, barley malt syrup, honey, maple syrup, brown rice syrup, yeast.



Himalayan Crystal Salt assists in promoting a Healthy pH Balance

Salt is **essential for life**, yet almost all commercial table and cooking salts have been "chemically cleaned" and reduced to sodium chloride -- an unnatural chemical. To help your body function properly, you need salt complete with all-natural elements. I've found the purest salt available on earth that's uncontaminated with any toxins or pollutants -- Himalayan Crystal Salt!

This salt from the Himalayas is known as "white gold." Together with pure spring water, Himalayan Crystal Salt offers all 84 elements exactly identical to the elements in your body, and is vital for:

- Regulating the water content throughout your body.
- Promoting a healthy pH balance in your cells, particularly your brain cells.
- Promoting blood sugar health and helping to reduce the signs of aging.
- Assisting in the generation of hydroelectric energy in cells in your body.
- Absorption of food particles through your intestinal tract.
- Supporting respiratory health.
- Promoting sinus health.

The Complete Digestive Health Guide

- Prevention of muscle cramps.
- Promoting bone strength.
- Regulating your sleep -- it naturally promotes sleep.
- Supporting your libido.
- Promoting vascular health.
- In conjunction with water it is actually essential for the regulation of your blood pressure.

Herbal Medicine

Chapter 5

Introduction

One of the most underestimated natural resources we have on our precious planet is flora or plant life. Chinese Herbal Medicine has been practiced successfully for centuries and this is still the case in Chinese culture today. The Natural and Herbal remedies market is also currently the fastest growing industry globally with new discoveries taking place more frequently now than that at any other time in world history.

Southern Africa - Rich in Medicinal Herbs and Plants!

On the southern tip of Africa there is a wealth of fauna and flora with well over 21,000 plant species listed. Most of these plants are indigenous to this country and in many cases endemic to certain areas. Here's the interesting bit - it has been established that over 3,000 of these plant species possess exceptional medicinal and healing properties!

The indigenous people such as the San and Khoi tribes who have populated this part of the continent for hundreds of years, had to find and develop their own resources and cures for diseases and illnesses. There were no doctors just around the corner in those days. These people lived off the land and by trial and error they managed to develop an impressive number of treatments and cures.

A few of these people became traditional healers and utilized their knowledge by treating their neighbors and others in nearby settlements. Over the ages, the recipes for these remedies were handed down from father to son, improving with each generation. When the European settlers moved in to the country, they adopted many of these remedies.

These traditional remedies are derived from plant material such as bark, leaves, stems, flowers or roots. The plant material is normally chopped into smaller pieces and then dried in the sun till completely dry. In most cases, the mixture of herbs is then ground to a powder and often mixed with other plant materials, before being dispensed to the patient.

The final preparation, often carried out by the patient, is either to add the powder to cold water, leaving it to draw for 24 or 48 hours, then to strain it and take as instructed. This is known as an infusion.

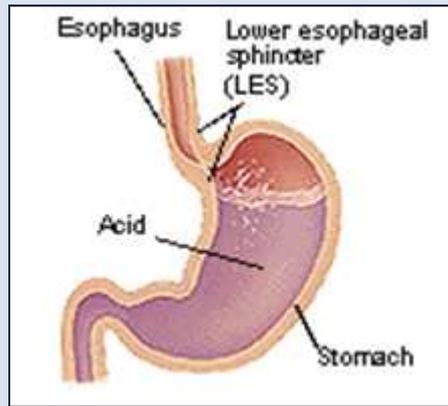
Alternatively a decoction can be made by adding the powder to boiling water, similar to the way we make a normal cup of tea.

Why a Liquid and not tablets?

A liquid is one of the finest forms of treatment simply because it is fluid. Liquids have superior absorption (up to 80%) of the active ingredients into the body and this optimizes the healing process.

It is even more important to have a liquid treatment when the purpose of the treatment is to eradicate bacteria like *H. pylori* or *Candida Albicans* in the stomach. The reason for this is that a liquid covers a greater surface area of the stomach lining and saturates the bacteria in the liquid allowing enough time for it to be killed off.

If you can imagine a tablet or capsule sitting in one small area of your stomach lining slowly dissolving, it becomes quite obvious that it cannot be as effective. This explains why tea has been used as a medium for effective treatment in China for many centuries already.



Setting a New Standard in the Natural Health Industry

www.perfectly-natural-health.com we have taken the initiative to set a new standard within the Natural Health Industry.

WARNING!!!

In an industry that is growing so rapidly, there are bound to be some unscrupulous Merchants who will concoct some simple herbal blend and then go out there and claim that it miraculously cures a specific illness or disease. So it is very important to be diligent when you are searching the internet before you rush and buy any Herbal Remedy. If in doubt ask the suppliers to provide physical evidence that their Herbal Remedy does what they claim it does and also that it does so safely too.

We believe that we are the very first website ever to actually publicize Scientific results on a website that proves both efficacy and safety of our product. Our objective is to shift the onus of proof onto manufacturers who market or sell any products on the internet. **Making false claims in this industry is simply no longer acceptable.**

This initiative is particularly focused on **providing complete confidence** to potential consumers, like you, before you make the decision to buy any product.

So our view is simple – if any website selling Herbal products can't back up their claims by providing authentic scientific proof of their product safety and efficacy by publicizing this proof directly on their websites – well then simply dump them and look for one that can.

Other Recommended Treatment Regimens to Follow Chapter 6

Colon and Parasite Cleansing

Body Pollution

We are all exposed to thousands of toxins and chemicals on a daily basis at work, in the home, through the air we breathe, our food and water supply, and through the use of pharmaceutical drugs. In addition, we are eating more sugar and processed foods than ever before in human history and regularly abuse our bodies with various stimulants and sedatives.

If you never wondered or cared much about the pollution around us, it's time to change your views and start paying attention to this problem. For decades, scientists have been studying the pollutants in our air, water, food, and soil. U.S. industries manufacture over 6 trillion pounds of 9,000 different chemicals a year. They dump billions of pounds of industrial chemicals into our air and water year after year. So now scientists have started to examine pollution levels in humans and their findings are deeply disturbing. Research clearly proves that our bodies are not capable of eliminating all the different toxins and chemicals we inhale and ingest every day. They simply accumulate in our cells (especially fat cells), tissues, blood, organs (such as the colon, liver and brain) and remain stored for an indefinite length of time causing all kinds of health problems.

Parasites

All the toxins and 'dead' processed foods lead to poor digestion causing a toxic build-up in the body, including the colon. This toxic waste material in the colon then frequently turns into a sinister world of monstrous creatures that feed on living flesh - parasites.

Every living thing has at least one parasite that lives inside or on it, and many, including humans, have far more. Scientists are only just beginning to discover exactly how powerful these hidden inhabitants can be, but their research is pointing to a remarkable possibility: Parasites may rule the world. The notion that tiny creatures we've largely taken for granted are such a dominant force is immensely disturbing. We are collections of cells that work together, kept harmonized by chemical signals. If an organism can control those signals - an organism like a parasite - then it can control us. And therein lies the peculiar and precise horror of parasites.

The combination of environmental toxins, an unhealthy diet and parasites poses a grave danger to humans. "In fact, parasites have killed more humans than all the wars in history", reported *National Geographic* in its award-winning documentary, *The Body Snatchers*.

When Do You Need a Colon and Parasite Cleanse?

If this is the first time you've been exposed to this life-changing information, you've probably never considered this simple question: Are you clean inside? Of course you take care of the outside: You shower, brush your teeth and wash your hair on a regular basis, but do you clean yourself inside? In this modern, toxic world it's becoming a simple fact of life that our colon (the 'sewer system' of the body), liver and other organs also require regular cleaning. Just like a car requires an oil change periodically.

How do you know when it's time to free your body of accumulated toxins, parasites and other waste materials? NOW is the time. We recommend you do a proper detox twice a year. If that seems too much to you, then if you experience one or more of the following, it's definitely time to detoxify:

- Frequent fatigue and low energy
- Flatulence, gas & bloating
- Excess weight
- Food allergies

Impaired digestion
Irritability, mood swings
Bad breath & foul-smelling stools
Parasites in stool
Frequent colds
Recurring headaches
Chronic constipation
Irritable Bowel Syndrome (IBS)
Protruding belly
Powerful food cravings
Skin problems, rashes, etc.
Metallic taste in mouth
Hemorrhoids
Candida infection

So How Do You Detoxify Your Body Properly?

When you have identified that you need to cleanse and detoxify our body, it is important to do it properly. If it is your first attempt at this wonderful “body-spring-clean”, we recommend you do so with the help of an experienced health-practitioner. This is a quick summary of the process...

1. First you will need to REMOVE obvious toxins like junk foods, common drugs like caffeine, nicotine, alcohol, sugar and processed foods with preservative, colourants and flavourants. You need to identify food allergens and remove them from your diet. You need to remove parasites using healthy, well studied herbal preparations containing such herbs as Black Walnut, Artemisia, Grapefruit seed extract, Taheebo and Clove. Using a high fibre supplement, like psyllium, at the same time, you can also facilitate the removal of old fecal waste in the colon.
2. Next, you need to REPLACE the bad foods in your diet as outlined above, with more functional foods. These, I call “whole foods”. That is, foods that are still in their natural state. Best eaten fresh, seasonal and organically grown. You need to break old eating habits, like eating too quickly, not relaxing for mealtimes but eating in a state of anger or frustration, eating too late at night, eating over-sized meals.
3. As part of this process, you will need to REPAIR inflamed and damaged intestinal tissue through the use of essential fatty acids, especially omega 3. You may need to use amino acids like Glutamine, or foods like Licorice Root. Cabbage, Broccoli and Cauliflower, as well as the onion family, have a powerful healing substance called MSM in them. If you find they cause too much gas, try juicing them.
4. Finally, you need to REINOCULATE your small and large intestine with beneficial bacteria. There are some really excellent, high quality and probiotic supplements on the market today, like COMPLETE PROBIOTICS. Some people may need certain strains, like E Coli, cultured for them by a specialist laboratory.
5. Now that the bowel is clean and functioning in a more normal way, one needs to focus on specific detoxes for the liver and kidneys. We recommend **GENTLE CLEANSE** for this. The Adrenal glands need to be balanced to facilitate better energy and blood sugar control. This all makes way for better emotional cleansing and growth. These last phases are best done with the help of an experienced health practitioner.

We have outlined the standard approach good Doctors take in their own practice, but you can purchase a number of Colon cleansing and detoxification programs that are available through reputable health stores or internet sites. Many of what these cleansing products offer will provide you with an all-natural detoxification program and include:-

Cleansing the colon of accumulated toxic build-up and prevent the formation of new build-up through the use of herbal dietary fiber,

Eliminate harmful parasites, including intestinal worms and their eggs from the colon and other parts of the body,

Help restore normal bowel function and promote regularity,

Remove heavy metals, including lead and mercury, as well as other toxins,

Detoxify the liver, kidneys and other organs,

Replenish friendly bacteria, and

Recharge the immune system through powerful antioxidant support.

The Linked Syndromes of Achlorhydria and Atrophic Gastritis

Introduction

It is commonly assumed that the decline in gastric acid production observed through later adult life (approximately 30% of the population over 65 years are hypochlorhydric) is a "normal" and very common consequence of the ageing process. Recent evidence, however, shows that these assumptions are incorrect and that the frequently observed reduction or loss of gastric acid production is generally the result of often-undiagnosed asymptomatic atrophic gastritis. The atrophic gastritis often has underlying infections as its root cause.

This mini review describes the prevalence and causes of atrophic gastritis and its linkage with achlorhydria (absence of stomach acid), and then outlines protocols for how the disease can be resolved and prevented from recurring. As the most common observed symptom of atrophic gastritis is probably hypochlorhydria (low stomach acid), it is important to review the basic physiology of gastric acid production.

Role of Gastric Acid

The physiological role of gastric (hydrochloric) acid may be summarized as:

- 1) Initiation of protein breakdown through activation of pepsinogen
- 2) Augmentation of nutrient absorption, notably dietary calcium and iron
- 3) Provides a barrier effect of entry of microorganisms to the GI tract.

Approximately 2 liters of gastric juice are produced per day, stimulated by a combination of vagus nerve excitation and production of gastrin, acting to stimulate the release of histamine. This in turn causes parietal or oxyntic cells to produce hydrochloric acid. Parietal cells are located in the fundus and body sections of the stomach.

Gastric Acid Release in Response to Food

HCl is secreted at approximately 10% of maximal rate into the resting stomach and, with nothing to neutralize the acid, maintains the pH in the range of 1.8 - 2.8. In the empty stomach the hydrogen ion concentration provides a feedback loop that stops production of acid once a pH of 1.8 - 2.0 is reached, so preventing over-acidification.

The sensory stimuli, which are activated just prior to eating, provoke strong release of gastric juice depending on the quantity and type of food eaten. However, this is balanced upon ingestion, because the food itself has a buffering or neutralizing effect on the pH value. This typically results in the pH of the full stomach being between 3.5 - 4.5. Following a meal the pH decreases once more back to empty stomach level of 1.8 - 2.8.

Symptoms and Causes of Atrophic Gastritis

The progression of atrophic gastritis can occur over a period of years and can be co-presented with erosive gastritis especially if there is regular use of non-steroidal, anti-inflammatory drugs (NSAIDs). Often the disease is largely asymptomatic but nonetheless, sufferers will often complain of intermittent dyspepsia, abdominal pain, distention or bloating, and nausea or vomiting. In addition, there are related sequelae resulting from the atrophy of the functional components of the stomach. Thus, loss of parietal cells causes reduction in acid production and intrinsic factor, the latter making vitamin B12 deficiency common.

The most common cause of atrophic gastritis and hence of lowered stomach acidity is chronic infection by *Helicobacter pylori*. This organism is the most common chronic bacterial pathogen in humans and is also a common focus of chronic inflammation, which is increasingly implicated in progressive, often intractable, diseases such as atherosclerosis and age related mental disorders such as Alzheimer's disease, depression and bipolar disorder. In addition, the symptoms synonymous with the chronic elevation of the pro-inflammatory cytokines TNF, IL-1 and IL-6 resulting from prolonged *H. pylori* infection are precisely the same symptom manifestations as seen with chronic fatigue and chronic pain syndromes such as chronic fatigue syndrome and fibromyalgia. Hence, chronic infections such as *H. pylori* may cause, or be a strong contributor, to these diseases.

In general, the prevalence of *H. pylori* infection increases 1% for every year of life, and so 50% of 50 year olds are typically infected. This picture is similar for most industrialized countries, with populations of developing countries showing even greater frequency (Figure 3) resulting from high infection rates in children and young adults.

Interestingly, as well as *H. pylori* being responsible for reduction in gastric acidity via atrophic gastritis, it is also now recognized that the initial infection with the bacterium probably takes place only when the acidity level in the stomach is decreased, albeit even on a temporary basis. Thus in two human inoculation experiments, infection could not be established unless the pH of the stomach was raised by use of histamine antagonists (Marshall et al., 1985; Morris & Nicholson, 1987). Indeed, it is now known that *H. pylori*, like most microorganisms, is sensitive to gastric acid, but avoids the strongly acidic environment of the lumen by infecting when acid output is temporarily lowered (a common occurrence) and then migrating below the mucous layer in contact with the epithelium. In this way, it protects itself from acid output once it becomes normalized.

The increasing incidence of *H. pylori* infection with age indicates that once infection is established, it is persistent, perhaps lifelong in many cases, **and that it clearly survives normal antibiotic therapy**. The clinical outcomes of chronic infection with *H. pylori* are diverse but it is now estimated that in individuals with unresolved chronic infection...

- 80% will demonstrate atrophic gastritis
- 20% will develop duodenal ulcers
- 10% will develop gastric ulcers
- 1% will develop gastric/duodenal cancer

Moreover, of all cases of duodenal and gastric ulcers, an estimated 90% and 65% respectively are caused by *H. pylori* (Parsonnet, 1998). Interestingly, the majority of the other gastric ulcers are caused by long-term use of NSAIDs. The reason for the development of disease in some individuals and not others is unclear but smoking and excessive alcohol consumption are known risk factors.

Hypochlorhydria and Achlorhydria

A significant consequence of atrophic gastritis is hypochlorhydria and achlorhydria, which in turn may have the following effects on physiology (Howden & Hunt, 1987; Modlin et al., 1994):

- 1) Increased microbial enteric infections and small intestinal bacterial overgrowth
- 2) Increase in intestinal permeability resulting from malabsorption and/or bacterial overgrowth or alteration of gastric mucosa architecture as a result of low acidity levels
- 3) Nutrient malabsorption.

Intestinal Infection

It is well recognized that reduction in stomach acidity increases risk of infection by *Salmonella*, *Shigella*, *E. coli*, *Vibrio cholerae* and the protozoan *Giardia* (Howden & Hunt, 1987). In developed nations where hygiene standards and microbial water quality is high, this may be a relatively insignificant problem. However, in developing nations, this is often not the case and increasing levels of achlorhydria is seen as being a major contributor to the levels of enteric infection and diarrhea (Howden & Hunt, 1987).

Similarly, it is known from animal experiments that low acid production increases susceptibility to nematode and helminthes infections. This is unlikely to be different for humans and may be one of the contributing factors to the enormous prevalence of parasitic infections in both developed and developing countries.

Small Intestine Bacterial Overgrowth

Overgrowth of bacteria in the stomach, duodenum and jejunum is commonly associated with hypochlorhydria, especially if chronically associated with atrophic gastritis. The overgrowth organisms are typically Staphylococci, Streptococci, Enterococci, and Candida and they probably originate from oral source rather than "growback" from the ileum and large intestine. The normal fragile flora of Lactobacilli typically found in the healthy small intestine appears to be overwhelmed (Husebye et al., 1992). Because these organisms are considered commensals, acute adverse effects from their overgrowth are rare. However, the overgrowth of potentially antibiotic resistant Staphylococci and Enterococci is never desirable, and may have marked adverse effects in the immunocompromised or those intending to have intestinal surgery.

Nutrient Malabsorption

Macronutrients

Possibly as a result of the overall over-consumption of food by the population, the lack of gastric acidity seems to have little effect on absorption of fat and carbohydrates (Saltzman et al., 1994).

However, the reduction in acid production has a direct effect on reducing the production of pepsin, which is converted from the precursor pepsinogen by hydrochloric acid (Modlin et al., 1996). Although gastric pepsin is responsible for between 20-25% of protein digestion, it is likely that in most but not all circumstances, the production of proteases by the pancreas in younger adults compensates for the gastric pepsin deficiency (Smith & Morton, 2001). However, the age-related decrease in production of pancreatic enzyme output together with the lack of gastric pepsin is certain to be a major contributory factor in the increasing levels of protein and amino acid inadequacy seen in people as they age past 50 years (Greenwald & Brandt, 2003).

Achlorhydria is known to have profound effects on the absorption of some micronutrients, the most important of which are described below.

Vitamin B12 and Folic Acid

Perhaps the most obvious nutritional consequence of achlorhydria associated with atrophic gastritis is the resultant malabsorption of vitamin B12. The major mechanism of this effect is that the acid-producing parietal cells also produce intrinsic factor and once atrophied, this capacity is lost (Glass, 1963). In addition, however, lack of acid may inhibit the liberation of B12 from other nutrient components in food and bacterial overgrowth microorganisms may compete for the B12 that is available (Schade & Shilling, 1967; Simon & Gorbach, 1984). The metabolism of vitamin B12 and folic acid is related, in that vitamin B12 is necessary for the incorporation of folic acid into human tissue. This level is reflected in red blood cell level of folate, and not serum levels, which simply indicates the recent dietary intake of folic acid. This relationship between these two nutrients means that vitamin B12 deficiency is a very strong predictor of simultaneous deficiency in folic acid. While the extreme deficiency associated with pernicious anemia is relatively rare, the common epidemiological finding of sub-clinical deficiency of folic acid vitamin-B12 in 15-40% of the population, especially in the elderly, is undoubtedly due to the under-recognized and under-diagnosed level of atrophic gastritis (National Diet & Nutrition Survey, 1994/5).

Other Nutrients

Insufficient acid production leads to an increase in small intestinal pH (Krasinski et al., 1986) and this has been shown to cause reduction in absorption of calcium, inorganic iron, and vitamins A and E (Recker, 1985; Mackenzie & Russell, 1976; Hollander, 1980; Muralidhara & Hollander, 1977).

Alteration of Intestinal Permeability

It would be expected that atrophy of the gastric mucosa and consequent bacterial overgrowth in the small intestine would have a combination effect on intestinal permeability. This is indeed the case, with both transcellular and paracellular permeability, as measured by mannitol and lactulose uptake respectively, being substantially increased in atrophic gastritis sufferers compared to control patients (Salzman et al., 1994).

In addition, the clearance test for the acute phase protein alpha-antitrypsin was also numerically higher in the atrophic gastritis group indicating the presence of systemic reaction to inflammation. By implication, this means that the mucosal barrier has been breached in these people with the probability of significant translocation of microorganisms and dietary antigens into the systemic environment.

Atrophic Gastritis — Prevention and Treatment

Fortunately the prognosis of both prevention and treatment for atrophic gastritis is very good, which is comforting given the frequency of the disease. All treatment programs both for clinical and sub-clinical cases require the same basic approach:

- 1) Eradicate the underlying cause of the atrophic gastritis
- 2) Manage the symptoms resulting from the gastritis while the long term healing process takes place.

Eradicating the Cause of Atrophic Gastritis — *Helicobacter pylori*

The two most common causes of atrophic gastritis are infection with *Helicobacter pylori* — approximately 65%, and chronic use of NSAID's — approximately 30% (Parsonnet, 1998). *Helicobacter pylori* infection is not successfully resolved with normal antibiotic therapy.

Management of Residual Gastritis

In most cases, the residual cellular atrophy and gastritis affecting the stomach mucosa, repairs itself following eradication of *H. pylori*, but this process can take many months or even years. Thus, it is important to manage the deficiencies in intestinal function during this period of repair, and this can be achieved best by targeted supplementation.

Supplementing HCl and Pepsin

Probably the most common consequence of atrophic gastritis, even if it is slowly resolving, is the state of hypochlorhydria. The repercussions of the hypochlorhydric state are outlined above, and if you add the likelihood of re-infection by *H. pylori* onto this list, then the need for re-acidification of the stomach by supplemental means is very persuasive.

How Much HCl and Pepsin Should be Provided?

HCl is usually supplied by providing betaine hydrochloride, which dissociates in water to release betaine and free HCl. A 0.5% or 500mg/100mls aqueous solution of betaine hydrochloride has a pH of 2.0. This means that to acidify 400mls of gastric juice to a level of pH 2.0 prior to eating, 2,000mg of betaine hydrochloride is required.

Pepsin is also supplied alongside the HCl to ensure that sufficient proteolytic activity is present in the stomach. The level of pepsin contained in a combined product should be matched so as to provide sufficient activity to break down approximately 3 grams of protein per 600mg of added betaine hydrochloride.

In all cases, it is prudent to begin supplementation to an individual in steadily increasing levels. So, if a capsule of a product contains say 600mg of betaine HCl, then an individual should start with one per meal and then build up to 3 capsules per meal, which will be the level required in the typical chronically hypochlorhydric patient.

Combined HCl and pepsin supplements should be given prior to a meal to provide both acid and pepsin augmentation. However, it is important to maintain basal acidity in the empty stomach to provide the bacteriostatic barrier. In this case, it is better to take the supplement without pepsin, as excessive pepsin in the empty stomach can cause irritation of the mucosa.

Nutritional Consequences

The lack of intrinsic factor production resulting from atrophic gastritis will substantially reduce the level of vitamin B12 absorption. The route of absorption via intrinsic factor begins with the release of vitamin B12 from food protein complexes by pepsin. The B12 then binds to glycoproteins called R-proteins, which transport the B12 into the duodenum. Here, the complex is degraded by pancreatic protease, releasing free B12 once more, which this time binds to intrinsic factor produced in the stomach. In this conjugated form, the B12 travels to the terminal ileum where it is absorbed by active transport.

However, approximately 1-2% of vitamin B12 is passively absorbed in the intestine without the need for intrinsic factor (Smith & Morton, 2001) and as such, if doses of 1mg or more per day are delivered, then between 10-20mcg will be absorbed.

Hence a good quality multivitamin, providing 1mg or more of B12 per dose, should be sourced and will be sufficient in most cases. If severe B12 deficiency is suspected, then initial intravenous or intramuscular dosing to build up tissue levels could be considered.

Products containing these antimicrobials should be taken with a high potency probiotic for a minimum of 60 days alongside the administration of HCl.

Finally, glutamine and arginine should be taken to help recondition the mucosal architecture and underlying immune system.

Conclusion and Summary

- Atrophic gastritis affects 20-30% of the adult population
- Incidence increases with age
- Atrophic gastritis is highly associated with *Helicobacter pylori* infection
- Hypochlorhydria is probably the most common symptom of atrophic gastritis
- Gastric acid secretion does not decrease with increasing age in healthy (non atrophic gastritis) individuals
- Hypochlorhydria can result in increased risk of enteric infections, nutrient malabsorption, bacterial overgrowth and dysbiosis, and increased permeability of the intestine
- Atrophic gastritis is a strong risk factor for gastric and duodenal ulcers and gastric cancer
- Effects of atrophied gastric mucosa remain for months or years after eradication of *H. pylori*
- Resolution of atrophic gastritis and symptoms depends upon:
 - a. elimination of *H. pylori*
 - b. treatment of residual atrophic gastritis.

The Importance of Healthy Living

Chapter 7

Healthy living



Your Weight



Nutrition



Fitness

Introduction

Every day we are bombarded with nutrition and health messages and a seemingly endless array of concerns about lifestyle and diet. Healthy eating and a healthful way of life are important to how we look, feel and how much we enjoy life. The right lifestyle decisions, with a routine of good food and regular exercise, can help you make the most of what life has to offer. Making smart food choices early in life and through adulthood can also help reduce the risk of certain conditions such as obesity, heart disease, hypertension, diabetes, certain cancers and osteoporosis.

Key factors of a healthy diet

Enjoy the wide variety of foods

This concept is the most consistent health message in dietary recommendations around the world. We need more than 40 different nutrients for good health and no single food can supply them all. That's why consumption of a wide variety of foods (including fruits, vegetables, cereals and grains, meats, fish and poultry, dairy products and fats and oils), is necessary for good health and any food can be enjoyed as part of a healthy diet. Some studies have linked dietary variety with longevity. In any event, choosing a variety of foods adds to the enjoyment of meals and snacks.

Eat regularly

Eating is one of the life's great pleasures and its important to take time to stop, relax and enjoy mealtimes and snacks. Scheduling eating times also ensures that meals are not missed, resulting in missed nutrients that are often not compensated for by subsequent meals. This is especially important for school children, adolescents and the elderly.

Breakfast is particularly important as it helps kick-start the body by supplying energy after the all-night fast. Breakfast also appears to help control weight. All mealtimes offer the opportunity for social and family interaction. So whether it is three square meals or six mini-meals or snacks, the aim is to make healthy choices you can enjoy.

Balance and moderation

Balancing your food intake means getting enough, but not too much, of each type of nutrient. If portion sizes are kept reasonable, there is no need to eliminate favorite foods. There are no "good" or "bad" foods, only good or bad diets. Any food can fit into a healthy lifestyle by remembering moderation and balance.

Moderate amounts of all foods can help ensure that energy (calories) intake is controlled and that excessive amounts of any one food or food component are not eaten. If you choose a high fat snack, choose a lower fat option at the next meal. Examples of reasonable serving sizes are 75 -100 grams (the size of a palm) of meat, one medium piece of fruit, ½ cup raw pasta or one scoop of ice cream (50g). Ready-prepared meals offer a handy means of portion control and they often have the energy (calorie) value listed on the pack.

Maintain a healthy body weight and feel good

A healthy weight varies between individuals and depends on many factors including gender, height, age and hereditary.

Excess body fat results when more calories are eaten than are needed. Those extra calories can come from any source - protein, fat, carbohydrate or alcohol - but fat is the most concentrated source of calories.

Physical activity is a good way of increasing the energy (calories) expended and it can also lead to feelings of well-being. The message is simple: if you are gaining weight eat less and be more active.

Don't forget your fruits and vegetables

Many of us do not meet the recommendations for at least five servings of fruits and vegetables daily. Numerous studies have shown an association between the intake of these foods and a decreased risk of cardiovascular disease and certain cancers. An increased intake of fruits and vegetables has also been associated with decreased blood pressure. People can fill up on fresh fruit and vegetables because they are good sources of nutrients and the majority are naturally low in fat and calories.

Nutritionists are paying much more attention to fruits and vegetables as "packages" of nutrients and other constituents that are healthful for humans. The "antioxidant hypothesis" has drawn attention to the role of micronutrients found in fruits and vegetables like vitamins C and E, as well as a number of other natural protective substances. The carotenes (beta-carotene, lutein and lycopene), the flavonoids (phenolic compounds that are widespread in commonly consumed fruits and vegetables such as apples and onions and beverages derived from plants like tea, cocoa and red wine) and the phytoestrogens (principally isoflavones and lignans), are being demonstrated to have beneficial roles in human health.

Base your diet on foods rich in carbohydrates

Most dietary guidelines recommend a daily diet in which at least 55 of the total calories come from carbohydrates. This means making more than half of your daily food intake should consist of carbohydrate-containing foods such as grains, pulses, beans, fruits, vegetables and sugars. Choosing wholegrain bread, pasta and other cereals will help you to boost fibre intake.

Although your body treats all carbohydrates in the same way regardless of their source, carbohydrates are often split into "complex" and "simple" carbohydrates. Complex carbohydrates that come from plants are called starch and fibers, and these are found for example in cereal grains, vegetables, breads, seeds, legumes and beans. These carbohydrates consist of long strands of many simple carbohydrates linked together. Simple carbohydrates (sometimes called simple sugars) are found for example in table sugar, fruits, sweets, jams, soft drinks, fruit juices, honey, jellies and syrups. Both complex and simple carbohydrates provide the same amount of energy (4 calories per gram) and both can contribute to tooth decay, especially when oral hygiene is poor.

Drink plenty of fluids

You need to drink at least 1.5 litres of fluid daily, even more if it's hot or you are physically active. Plain water is a good source of liquid but variety can be both pleasant and healthy. Choose alternative fluids from juices, soft drinks, tea, coffee and milk.

Fats in moderation

Fat is a nutrient in food that is essential for good health. Fats provide a ready source of energy and enable the body to absorb, circulate and store the fat-soluble vitamins A, D, E and K. Fat-containing foods are needed to supply "essential fatty acids" that your body cannot make. For example, oil-rich fish and fish oil supplements are rich sources of the omega-3 polyunsaturated fatty acids (n-3 PUFAs) alpha linolenic acid (ALA), eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA). These, along with omega-6 polyunsaturated fatty acids (n-6 PUFAs) such as linoleic acid (LA) and arachidonic acid (AA), must be consumed in the diet.

Too much fat however, especially saturated fats, can lead to adverse health effects such as overweight and high cholesterol and increase the risk of heart disease and some cancers.

Limiting the amount of fat, especially saturated fat in the diet -but not cutting it out entirely- is the best advice for a healthy diet. Most dietary recommendations are that less than 30% of the day's total calories should come from fat and less than 10% of the day's total calories should come from saturated fat.

Balance the salt intake

Salt is made up of sodium and chloride. Sodium is a nutrient and is present naturally in many foods. Sodium and chloride are important in helping your body to maintain fluid balance and to regulate blood pressure.

For most people, any excess sodium passes straight through the body however in some people it can increase blood pressure. Reducing the amount of salt in the diet of those who are sensitive to salt may reduce the risk of high blood pressure. The relationship between salt intake and blood pressure is still unclear and individuals should consult their doctor for advice.

Start now - and make changes gradually

Making changes gradually, such as eating one more fruits/portion of vegetables each day, cutting back on portion sizes, or taking the stairs instead of the lift, means that the changes are easier to maintain.

Why is physical activity so important?

The advice for increased physical activity is strongly linked to overall healthy lifestyle recommendations because it affects energy balance and the risk of lifestyle-related diseases. Over the past few years, many position papers have set out the importance of moderate physical activity for good health. These reports indicate that being physically active for at least 30 minutes daily reduces the risk of developing obesity, heart disease, diabetes, hypertension and colon cancer, all of which are major contributors to morbidity and mortality in Europe. In addition, in both children and adults, physical activity is related to improvements in body flexibility, aerobic endurance, agility and coordination, strengthening of bones and muscles, lower body fat levels, blood fats, blood pressure and reduced risk of hip fractures in women. Physical activity makes you feel better physically and encourages a more positive mental outlook.

Increases in physical activity levels are needed in every age group and recommendations are that adults be physically active for at least 30 minutes on most days of the week.

Supplementing your diet

In our fast paced lifestyle we often take short cuts when it comes to meals. If you miss meals regularly or in between rushing to make appointments on time you indulge on fast foods you can be sure that you aren't getting enough nutrition. Over a period of time this will affect your immune system that will begin to make you feel lacking in energy. Once you begin to lack energy is normally a warning sign that all is not well within your body.

Well, there is a great way, for those of you feeling like we have described, to continue with your tight schedule and always make your appointments on time, without worrying about a lack on nutrition.

We have found a range of health products that have exceptional nutritional value. They are very convenient as you can drink or eat them anywhere and what's more you'll save a fortune on the Fast Foods you are used to and feel so much healthier too.

For more information on these energy packed products simply click on the following links [Whey Healthier Drink](#) or [Cocoa Cassava Bars](#).

If you are currently overweight or your conscience is telling you that you need to lose a few pounds in weight, this is a sure sign that the message is coming from your body. Our bodies actually do communicate with us. Imagine how they sometimes beg us to take note when we are carrying an unnecessary load around. Well we have found a superior natural product to help you to be kinder on your body and at the same time help you to shed some of the excess load you are carrying.

Suggested Supplementary Products Guide Chapter 8

This part of the eBook is really to provide an element of **convenience to you** and above all **save you a great deal of time and money** searching for products that work. Our team have spent a great deal of time searching for exceptional natural or alternative treatments that really do what they are supposed to do. For convenience just click on the links in TABLE 2 that are associated with the Supplements required for each Disease or Infection in TABLE 1.

TABLE 1: Matula Herbal Formula - Recommended Dosages and Supplements

Disease or Infection	Matula HF Dosage	Supplemented with
H. pylori	Twice Daily for 30 days	Good Probiotic
Candida Albicans	Twice Daily for 60 days	Good Probiotic, Chlorella, Matula ULTRA
Acid Reflux	Twice Daily for 30 days	L-Glutamine, Good Probiotic, Slippery elm
Non-Ulcerative Dyspepsia	Twice Daily for 30 days	Good Probiotic, Chamomile
Ulcerative Colitis	Twice Daily for 30 days	L-Glutamine Good Probiotic and anti-oxidant
Diverticulitis	Twice Daily for 30 days	Good Probiotic, Aloe Vera Omega 3
Dysbiosis	Twice Daily for 60 days	Good Probiotic, Chlorella, Matula ULTRA L-Glutamine, Aloe Vera and Omega 3
Leaky Gut Syndrome	Twice Daily for 60 days	Good Probiotic, Matula ULTRA Chlorella, Omega 3, L-Glutamine
Peptic/ Gastric/ Duodenal Ulcers	Twice Daily for 30 days	Good Probiotic and Omega 3
Bloating, Belching Flatulence	Twice Daily for 30 days	Good Probiotic and Digestive Enzyme that contains Pancreatin and Lipase
General Nutritional Foods	N/A	Whey Healthier, Cocoa Cassava Bars
Liver Cleanse	N/A	New Start
Weight Loss Program	N/A	bioTHIN

TABLE 2: Recommended Supplements and their Source

Please Click on the Supplement/Treatment below to learn more
<u>Good Probiotic</u>
<u>Chlorella</u>
<u>Himalayan Crystal Salt</u>
<u>Omega 3</u>
<u>New Start</u>
<u>Pro-Optimal-Whey</u>
<u>Cocoa Cassava Bars</u>
<u>bioTHIN</u>

Recommended Health Books and Health Sites to visit *Chapter 9*

Health Books:

The Complete Encyclopedia of Natural Healing – Gary Null, Ph.D.

The Hundred Year LIE – Randall Fitzgerald

Wake up to health in the 21st Century – Steven Ransom

Uncommon Cures for everyday ailments – from the Editors of Bottom Line Health

Health Sites



HIGHLY RECOMMENDED

<http://www.h-pylori-symptoms.com> – David Hompes is a highly successful Functional Medicine Practitioner who specializes in treating H. pylori and associated infections and diseases. We fully endorse his practices and highly recommend that you contact him for a consultation. If you would like to contact Dave about his exclusive Nutrition & Lifestyle consultancy packages, please email info@davehompes.com.



HIGHLY RECOMMENDED

<http://www.matula.ulcer-cure.com/h-pylori-infections.php> - to view this highly informative video that presents the link and association between H. pylori and various GI tract ulcers.

<http://www.mercola.com/forms/subscribe.htm?aid=CD20> – Subscribe to Dr. Joseph Mercola's FREE newsletter, that currently has over 1,000,000 subscribers worldwide, and you receive a wealth of excellent Health related information that will also enable you to take control of your own health. To subscribe please click on link above. Excellent – Highly recommended.

<http://www.newstarget.com/> - Mike Adams presents Health news you simply don't get anywhere else. Learn the Truth about what is going on. We suggest you also subscribe to Mike's newsletters too - Highly recommended.

<http://www.garynull.com/> - Gary Null Ph.D. shares the truth and his life experiences in the form of books and documentaries - Highly recommended.

<http://www.credence.org/> - Steven Ransom and Phillip Day present a "Campaign for the Truth in Medicine"

Final Word and Conclusion by the Natural Health Team Chapter 10

If you have read through this Book, or even parts of it that are appropriate to your specific complaint, you will have picked up the common thread that runs through it: **BALANCE**. In as much as the sun rises and sets, the seasons constantly rotate and the tides swing rhythmically, so too is your body in flux. It always moves around a central point of balance or ease. When this balance is upset further than what can be managed by our in-built healing mechanisms, we call this state Dis-Ease.

You have seen how each function in the digestive tract is orchestrated to work as part of a fine symphony. If you don't chew thoroughly there is insufficient pre-digestion of food before entering the stomach, this means food may ferment instead of digest. This in turn causes inflammation, bacterial imbalance, yeast overgrowth and ultimately problems in other seemingly unrelated parts of the body! *Did you ever think that heart disease could be linked to the presence of a bacteria in the stomach?!*

Always keep the analogy of a well serviced car in mind. Those of us who value our vehicles, and appreciate the enormous expense of them, keep them well serviced, topped up with the right fuel, drive them moderately and safely, clean them regularly...because we know that fixing them when trouble has set in, is an expensive business. This is likened to the analogy of our gardens: well watered, cleaned regularly, properly and organically fertilized, planted seasonally and always on the lookout for the earliest signs of imbalance like blight, weeds or vermin. In this light, one could call good digestive health, 'Bowel Gardening'.

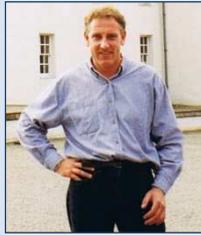
The bottom line is simple: eat whole, unrefined and organic foods; avoid unnecessary medicines, avoid any dietary or social excesses, use sensible supplementation and treat your digestive system with respect. Seek the help of a Natural Health Professional to work with you in your quest for good health and use only good quality, proven medicinal herbs. Add clean, filtered water, eat in an unhurried and calm frame of mind, be grateful for abundance and have as many good belly-laughs you can.

This is the path to perfect health!!!.

Yours sincerely,

The Natural Health Team

ANNEXURE A



Peter le Roux
Editor

Peter is a Founding Member of Perfectly-Natural-Health.com, is also CEO of a Business Management Consultancy.

He has had a keen interest in alternative natural medicines for 28 years now and during the past five years has gained extensive knowledge in Digestive Health. Peter actively endorses Functional Medicine and Holistic Medical Therapy as practiced by Functional Medicine Practitioners, Naturopaths, Chiropractors, Acupuncturists, Nutritionists, Homeopaths and other Health Care Practitioners. He believes that these approaches are essential for achieving a sustainably healthy body and mind.

Peter's primary passion is his uncompromised commitment to help and inspire his fellow man, particularly when in need.

Peter dedicates this book entirely to all of you who seek a long, joyful, healthy, prosperous and abundant life.