

Food Sensitivity: The Mystery Ailment

Millions of Americans get sick when they eat certain foods. Some have known allergies, but the majority of cases remain unexplained.

Jane E. Brody

Seven-year-old Joseph's entire face swells if he merely has a peanut in his mouth. Should he accidentally eat one, he could die; the result, his mother says, of having "lived" on peanut butter sandwiches when she was nursing him.

Jane's problem is walnuts. The program director and fund-raiser breaks out in hives and gets an itchy mouth if she eats them.

One young mother of three who was crippled by rheumatoid arthritis gradually regained her mobility when she stopped consuming dairy products.

Cynthia, a horsewoman who is allergic to mold, has flare-ups of sinus congestion and vaginitis when she eats fermented foods.

Tony, a second grader, sometimes gets severe asthma attacks when he has more than a taste of anything which contains soybeans.

Susan, a physician specializing in occupational health, was devastated by frequent migraine headaches until she stumbled on their cause: corn in any form, a common ingredient in many prepared foods.

And yours truly suffered periodic attacks of abdominal pain and swelling that would last for days

until dietary sleuthing revealed that foods made with soybeans or dried peas were the likely cause.

The seven of us are among the estimated 30 million Americans [a more accurate estimate would be 180 million] who experience adverse reactions to foods [and chemicals] which most non-medical people call food allergies. But although Joseph and Jane are certainly allergic and the young mother probably is, the problems experienced by Cynthia, Tom, and I are not classical allergies because they do not involve the [acute-reacting or IgE] part of the immune system.

To describe the miscellaneous ill effects that can result from eating particular foods, physicians use such words as [delayed food allergies], sensitivities, toxicities, intolerances, false food allergies, pharmacological reactions and metabolic reactions.

From the sufferers' perspective, this is a case of medical hair-splitting. What's crucial to them is only that certain foods can make them sick.

The field of food allergy has, in fact, become rife with controversy. In researching this article, I initially believed that most of the claims attacking this food or that as the cause of everything from hair loss to athlete's foot were elaborate hokum.

But after looking at the medical research and learning about various peoples' experiences, I now wonder

whether the rigid thinking of some doctors is not ill-advised. Indeed, in dismissing symptoms which don't involve the [IgE part of the] immune system, these doctors might be doing a disservice to the health and well-being of millions of Americans.

Perhaps a food doesn't have to affect the [IgE part of the] immune system in order to ignite a yeast infection, cause the sinuses to fill,

"Certain foods might make some people feel tired or mentally foggy and send some children into an orbit of hyperactivity."

aggravate arthritis, or bring on irritable bowel syndrome.

Certain foods might make some people feel tired or mentally foggy or send some children into an orbit of hyperactivity. Maybe some adverse reactions are intensified because people become "addicted" to the very foods that make them ill, a theory, known as opponent-process learning, that is well-known to psychologists but rarely considered by medical researchers or physicians. Even among classically trained allergists, there is no agreement on how to categorize the various adverse reactions to foods or how to diagnose them. So it is easy to understand why many frustrated patients, after years of fruitless

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visits to conventional allergists, end up turning to the medical fringe to identify the cause of their chronic or recurrent symptoms.

Among the leading causes of [delayed] food allergies are peanuts, soybeans, peas and other members of the legume family; nuts that grow on trees, such as walnuts; fish; shellfish; eggs and dairy products.

When an allergic reaction takes place, the immune system mistakes an innocent substance, such as cows' milk or shrimp, for the harmful ones it is designed to attack, such as bacteria, viruses, or cancer cells. This mistaken identification sets off a chain reaction that begins with the production of antibodies called immunoglobulin E, or IgE, whose job it is to seize threatening substances, and ends with the release of histamines and other chemicals which produce allergy symptoms.

In a highly allergic person [who has acute reactions], even the tiniest exposure to the particular substance, called an [IgE] allergen, can trigger a life-threatening response known as anaphylactic shock. Blood pressure drops precipitously and breathing passages shut within minutes. People who know they are at risk of anaphylaxis should carry a loaded syringe of adrenaline with them at all times.

Such emergency treatment might have saved the life of a Brown University student with an allergy to peanuts who died in 1986 after eating chili in a restaurant that, unbeknown to her, had used peanut butter as a thickener. But this is an extreme situation.

More common symptoms of [delayed] food allergies include gastrointestinal reactions, such as nausea, vomiting, abdominal pain and diarrhea; and dermatological

reactions, such as hives, rashes and swelling of the face, hands, feet or genitalia.

The typical [delayed] allergic reaction to a food occurs within four hours after it has been eaten [but may be days later]. The picture is further confused by the unpredictability of food allergies. A food does not necessarily cause the same symptoms in everyone

“Even the tiniest exposure to the wrong allergen can trigger a serious response.”

who is allergic to it: some people might experience mild itching and others cardiovascular collapse. In addition, a person might not react to each exposure, depending on the amount of the food consumed, how often it is eaten, and coincidental exposure to other allergy triggers, such as pollen. Even vigorous exercise, when done soon after eating a particular food, can intensify an allergic reaction, perhaps by speeding the absorption of the food.

The [old] way to diagnose food allergies starts with a series of tests in which tiny amounts of the suspect foods are scratched into the skin, usually on the back. A patient may develop redness and swelling around the test scratches for several different foods, but this does not mean that he or she is allergic. Only about one in five [or 20 percent of the] positive skin tests indicates that an allergic reaction would occur after the food was eaten. Some physicians prefer to use a blood test, called the RAST test, to diagnose food allergies. However, the RAST test costs significantly more than skin tests [and is not accurate for delayed food or chemical allergies]. The results of either test must be confirmed with other tests that involve actually eating the suspect foods.

Two other diagnostic approaches, cytotoxic tests and sublingual provocative tests, are popular among [non-traditional] allergists, but they have been the subject of much controversy.

With a cytotoxic test, a sample of the patient's white blood cells is mixed with possible food allergens and examined under a microscope to observe how the cells react.

A sublingual test involves placing extracts of foods under the patient's tongue and then seeing whether symptoms develop within 20 minutes.

Symptoms of food intolerances [delayed food allergies] can start up to a day after the trigger food is eaten.

Other reactions, [also] known as [delayed] food allergies [or sensitivities], occur when food seems to trigger the release of histamine and other symptom-provoking chemicals directly, without involving antibodies.

Another mystery is that some of the very foods which cause classical allergies in some people manage to skirt the antibodies and produce [delayed] food allergies in others. The most frequent causes of [delayed] food allergies are milk, peanuts, and wheat, according to Dr. Jonathan Brostoff and Linda Gamlin, authors of *The Complete Guide to Food Allergy and Intolerance*.

Other causes include such diverse foods and additives as sulfites, strawberries and tomatoes, and foods high in histamines themselves, such as sauerkraut, red wine, yeast and tuna fish.

The most controversial aspect of food intolerances is the claim by some physicians and many lay people that they are often the underlying cause of chronic fatigue, hyperactivity, irritable bowel syndrome, recurrent headaches, muscle aches, anxiety, vaginitis, sinus problems, canker sores, food

cravings, and even obesity – in effect, whatever might ail you. Most [traditional] allergists say that such claims are little more than medical hearsay, but future scientific studies

“Some doctors believe food intolerances can cause anxiety, food cravings and obesity.”

might eventually bear out many of them. In one of the few well-designed studies of food intolerances, conducted in England among 88 children with migraines and other ailments, 78 recovered completely when placed on diets free of possible trigger foods. When 40 of the children were retested in double-blind fashion, 35 became ill after eating the foods.

Other than avoidance, there are no known cures for food allergies or most adverse food reactions. Many people, however, eventually overcome [many of] their allergies, particularly if they avoid the foods responsible for about a year.

This somehow causes the body

to decrease the amount of antibodies it produces in response to the trigger food. Some practitioners claim that certain food intolerances can be similarly overcome.

A review of the research on food allergies – and the many unanswered questions about similar conditions – leads to a conclusion that demands to be heard: possible adverse reactions to food deserve much more attention from the medical establishment than they have received. In which cases are foods really making people sick? In which cases are people turning to food to explain psychosomatic symptoms? To prevent spending untold amounts of money on useless tests and remedies, and to provide relief for untold numbers of people who experience painful symptoms that might be caused by food, unbiased researchers should take a closer look.

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Summary by Mark Lovendale

Some traditional allergists have stopped using the inaccurate, painful and often health-damaging skin test.

Many aware doctors now use white-blood-cell testing for delayed food and chemical allergies.

The cytotoxic test was the original white-blood-cell test for revealing delayed food and chemical allergies. The test now used to obtain the most accurate results is the Prime Test.® If you would like additional information, contact Preventive Care Center, Inc., 34146 Selva Road, Suite 200, Monarch Beach, California 92629. Phone 949-661-4001; Fax 949-661-1666

“Let your food be your medicine and your medicine be your food.”

Hippocrates

Greek health researcher, physician, father of medicine, author, the first allergist ... 460 – 377 BCE

“I am sick of diseases, I want to know origins and processes ... If we are to prevent disease it is to the beginning of the chain of accumulating stresses that we must look.”

Clifford Allbutt

Medical historian, author ... 1836 – 1925

“Every new theory encounters opposition and rejection at first. The adherents to the old, accepted doctrine object to the new theory, refuse it recognition and declare it to be mistaken. Years, even decades, must pass before it succeeds in supplanting the old one. A new generation must grow up before its victory is decisive.”

Ludwig von Mises

Philosopher, economist ... 1881 – 1973



Shared Experiences

My family has used the Quality Longevity Program for more than five years. My son is a world-class athlete, and the white-blood-cell test and the resulting nutritional program have been beneficial.

The regime is very good, and many people have been helped by the program.

Jack Knorpp, *entrepreneur, developer of the Good Earth restaurants, Newport Beach, CA, 1985*

I wish to express my deep appreciation for the marvelous benefits I have received through your program and the white-blood-cell test. I have followed the program for more than two months, and am becoming healthier each day. So many of my health problems have vanished it's hard to believe they were caused by delayed food allergies, but I have the proof.

I have suffered for two years from chronic bladder problems and have never been totally free of infection in spite of taking antibiotics. Now, I feel I am cured: I have been free of antibiotics and free of infection for more than six weeks. My weight is normal now, the swelling and severe fluid retention have disappeared. The stricture, heaviness and pain have gone from my legs. There were days when it was almost too painful to walk. Now I feel normal. I am 72 years old, but have a youthful appearance and renewed ambition. I am surprising my family and friends by my appearance, my renewed ambition and vigor. One of my friends remarked the other day, "You must have found a new youth pill." This statement is not so far-fetched: we really have found a most beneficial program – a medical breakthrough.

Iola I. Berg, *Lynnwood, WA, 1984*

Perhaps the most significant and most healthful change that occurred for me is the alteration of my eating habits and the elimination of harmful foods which are everyday dieting choices for many people. The program taught me a different and more nourishing way of taking care of myself. I feel great.

Louise M. Atty, *registered nurse, Brea, CA, 1986*

Since childhood I have been troubled with hay fever, asthma, itchy eyes and severe sinus headaches. I was labeled by my family and

friends as always being lazy.

I had to take antihistamines to relieve my symptoms. They did help temporarily, but the side effects were terrible. I was always tired and irritable.

Before I heard about the Quality Longevity Program, I had given up hope of finding a solution to my health problems. In just one week of being on the program, I felt like a new person. My sinus headaches disappeared, the congestion in my lungs cleared up as did the itchy eyes, and my energy level increased. Last but not least was the weight loss I wasn't expecting.

An additional benefit is that I can now be around cats and dogs which I never could do before without getting so ill that I would have to spend the next day in bed.

I am so excited now because I never knew one could feel so good!

Nancy Ross Berg, *Pasadena, CA, 1986*

I was teaching aerobics, running four miles at lunch time, and worked out at the gym at night. I was very fit, but not healthy. No amount of exercise was working. I was bloated, carrying extra weight and had numerous symptoms.

I had been suffering for years with mood swings, irritability, fatigue, stuffy nose and many more. At times, I was so irritable that my best friends didn't want to be with me – I was so depressed.

Your seminar gave me hope that these health problems could be relieved by finding out which foods I should eat. I became more aware of how I felt after meals and could see that some foods made me sleepy or irritable. Sometimes it was difficult for me to concentrate on my job.

The blood test enabled me to clear up some of my symptoms within the first week, including the fatigue and swelling. By monitoring my reactions, I began to see a change. As the months passed, my symptoms lessened; some completely disappeared.

Now that I have used the program for years, I clearly feel better, work better and relate better when eating my compatible foods. When I don't, my symptoms come back. The program has also helped me to give birth to and nurse a healthy girl.

I am writing to you in appreciation and I hope other women and mothers will gain this awareness and stop suffering.

Valerie Watkins, *mother, Temecula, CA, 1990*