Practitioner Information

THE ELIMINATION DIET
Diagnosis and Management of Food Allergies and Sensitivities

The elimination diet with food challenges is the most effective way for you to identify factors in your patients' diets which are causing them ill health. Numerous research studies outline the superiority of elimination diets over conventional blood test and skin prick tests for allergy. Identification and exclusion of the offending foods relieves symptoms and reduces the destructive inflammatory load on the body, allowing healing to take place. The Patient Information handout details the diet procedure and instructions for both you and your patients. This supplementary information for practitioners details implementation strategies and safety considerations. The flowchart describes the steps involved and the decisions to be made in the elimination and rechallenge procedure.

Pre-program digestive restoration
Your patients with food intolerances are likely to have some digestive incompetence as a causative factor. Optimal digestion and gut membrane integrity protects the body against the entry of large food particles into the bloodstream and the subsequent development of immune reactivity, sensitivities and allergies. Some simple strategies to improve digestive competence before the elimination diet program can benefit patients by reducing excessive reactivity. Consider the following options in the weeks leading up to the program:

- 'Leaky gut' - Anti-inflammatory Mucosal Support
- Gastritis, ulcers - Hyperacidity Relief
- Poor digestion - Gastric Acid Support, High Potency Whole Pancreas Enzyme Concentrate
- Dysbiosis - Dysbiosis Control (probiotic), Immune Enhancing Probiotic, Lactobacillus plantarum 299v

Deciding on your program level
There are two elimination diets provided.

1. General level: This is the core elimination diet. It eliminates the most common dietary antigens based on a number of research studies. Excluded foods are milk, eggs, gluten-containing grains, fish, shellfish, peanuts, nuts, soy, com, tomatoes, oranges, chocolate, alcohol and caffeine. This diet is less restrictive than other popular elimination diets in order to provide better compliance. In most patients, this diet excludes their troublesome foods and will give resolution of symptoms. Most patients should start on this level.

2. Sensitive level: This is a more extensive elimination diet, incorporating exclusion of foods from the general elimination level plus salicylates, amines, preservatives, artificial colours, certain meats, legumes and yeast. Due to its low allergenic potential, the allowable foods are quite limited. This diet can be used if the general diet does not relieve the patients symptoms, and food-sensitivities are still believed to be an underlying cause. This diet can also be used as a first choice to identify sensitivities in patients with suspected salicylate or amine sensitivity.
The Dietary Elimination and Rechallenge Program

Suspected food intolerance
Allergy, atopy, autoimmunity, skin disorders, GIT disorders, etc

Unknown cause
Correct digestive processes
*Gastric Acid Support*
*Whole Pancreas Concentrate*
*Immune Enhancing Probiotic / Dysbiosis Control / L. plantarum 299v*

Specific food suspicions
Single food elimination
Symptoms unresolved

Symptoms unresolved
Elimination diet - General
(1-3 weeks)
Eliminates milk, eggs, gluten-containing grains, fish, shellfish, peanuts, nuts, soy, corn, tomatoes, oranges, chocolate, alcohol, caffeine

Symptoms relieved
Symptoms unresolved
Rechallenge
Rechallenge each eliminated food individually

Elimination diet - Sensitive
General elimination level plus salicylates, amines, preservatives, certain meats, legumes, yeast

Symptoms relieved
Symptoms unresolved
Rechallenge
Rechallenge each eliminated food individually
Start with General antigens, move onto Sensitive

Wellness Diet
Follow patient guide
Avoid identified food sensitivities

Address other causes
Nutrient deficiencies, stress, obesity, toxins, etc

Probably not food-related
Preparing your patients
The Patient Information Handout provides all the information your patients will need to complete the program successfully.

- Program overview
- Shopping list for each diet level with included and excluded food lists
- Step by step rechallenge procedure with recommended challenge meals
- Diet and symptom diary for daily recording
- Frequently asked questions
- Handy practical tips
- A list of ingredients in packaged foods to watch out for

Encourage your patients to contact you with any questions or concerns. This will help avoid any problems and increase dietary compliance. Request that they fill in the diet and symptom diary every day throughout the elimination and rechallenge stages to assist with allergen identification.

Timeframes for program stages
Most patients will only require 1-2 weeks on the elimination diet to experience an improvement in food-related symptoms. An improvement of around 50% or more in frequency or severity is desirable before starting food challenges. Patients who have not experienced significant improvement in symptoms after 3 weeks may need to be switched to the Sensitive elimination diet for more extensive allergen exclusion. If patients don’t respond to the Sensitive diet within 3 weeks, their symptoms are probably not food related, and other treatment strategies will need to be considered.

The food challenges for the General level will take around 6 weeks (14 challenges, 3 days each). The additional challenges in the Sensitive level will take around 3 weeks (7 challenges, 3 days each). Use your discretion to challenge the most suspect food groups first, in order to tailor and shorten the process for each individual patient.

Safety considerations
After elimination of a dietary antigen for 1-3 weeks, the body reverts from a state of chronic allergy to a temporary state of hypersensitivity. Ingestion of the allergen at this stage may result in a rapid and exaggerated reaction. This makes offending foods easier to identify, but also carries some risk for the patient.

CAUTION:
- Patients who have had previous severe reactions to a food, or reactions which involved facial swelling or breathing difficulties, should not challenge that food.
- Patients should not challenge a food they have never eaten before.

Patients who have foods in these categories can perform an oral challenge under medical supervision with instant access to emergency medical care.

Nutritional supplementation
The elimination diet is designed to be followed for approximately 1-3 months, including all challenges. Depending on the level of dietary restriction, nutrient supplementation may be required within this period. Some indicated formulas may be:

- Meta B Complex
- Meta EPA/DHA
- Calcitite Hi-Strength
- Hemagenics Intensive Care
- Zinc Drink

Due to the narrow possibility of reactivity, nutritional supplements should be challenged and observed before introduction in order to gauge any potential reactions.
**Getting enough protein**
For patients who eat meat, getting enough protein on the elimination diet is easy. For vegetarians however, many sources of protein such as nuts, soy and legumes may be excluded and protein supplementation may be required. A low-allergenic, rice-based protein supplement such as Ultra Clear Maintain Plus can be challenged and (if tolerated) included in the daily diet. Patients requiring non-meat based suggestions for a protein-rich breakfast may also appreciate Ultra Clear Maintain Plus.

**Interpreting challenge results**
Assessment of your patient’s diary records of the program will identify the offending foods. Most reactions occur within 72 hours of food ingestion, so relevant symptoms will be recorded in the three day challenge period. Some research suggests that milk can elicit delayed eczema and wheezing up to 5 days after challenge. Keep in mind that reactions within the three day period for a challenge may occasionally be related to the previous challenge food, especially with a dairy challenge.

Some challenge foods contain multiple possible allergens. Orange and tomato sensitivity could indicate a more widespread salicylate intolerance. Cheese and tempeh sensitivity may indicate an amine intolerance if patients are able to tolerate fresh cow or soy milk. Map the patient’s reactive foods carefully to identify any relevant trends.

**Dietary planning**
Once allergens have been identified, we aim to create a nutritious, well balanced diet which excludes these particular antigens for at least 6 months. Use Your Guide to Wellness diet with the offending foods removed, and substitute with other nutrient dense foods if required.

If salicylate or amine sensitivity has been identified, use the salicylate and amine diets in the Key Clinical Concept Detox manual to assist dietary planning.

**Reduce allergic tendency in the long-term**
Reactions to certain foods do not indicate that patients will need to exclude them from their diet forever. Multiple factors influence reactivity to foods, including immune system function, digestion, toxins, stress, gut flora, obesity, sex hormones, and more. Addressing these factors can reduce the problem of food sensitivity overtime in many patients.

After allergen exclusion for at least 6 months, individuals may become more tolerant of the offending food. Rechallenges with small amounts of the food may be conducted at this time, and the food gradually reintroduced into the diet if results are negative.

**Special cases**
Some cases of food sensitivity will not respond to 3 weeks on the Sensitive level. In rare cases it can take up to 3 months for remission of some gastrointestinal disorders. The sensitive diet is not suitable for prolonged use in these situations. If you suspect a patient has food allergies which remain unresolved, referral to an allergy specialist may be required.