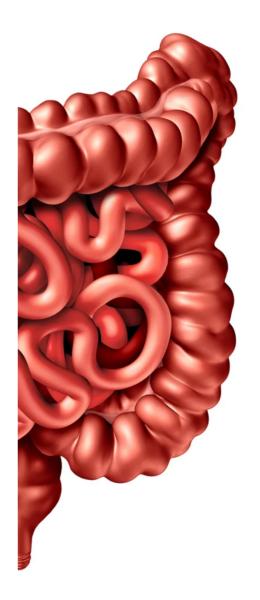
FOOD INTOLERANCE(IgG)

SCIENTIFIC ABSTRACTS

CASE STUDIES



GASTROENTEROLOGY.....

Food Exclusion Based on IgG Antibodies Alleviates Symptoms in Ulcerative Colitis: A Prospective Study.

Jian L, Anqi H, Gang L, Litian W, Yanyan X, Mengdi W, Tong L
Inflammatory Bowel Diseases, Volume 24, Issue 9, September 2018, Pages 1918–1925,

Results: Food-specific IgG antibodies were detected in 70.10% of participants. After intervention, the Mayo score was significantly lower in the intervention group than in the control group (2.41 \pm 0.89 vs 3.52 \pm 1.15, P < 0.05). The number of patients with extraintestinal manifestations decreased from 7 to 2 in the intervention group and from 6 to 5 in the control group.

Conclusions: An IgG-guided exclusion diet ameliorated UC symptoms and improved QoL. Interactions between IgG-based food intolerance and UC warrant further study.

Serological Investigation of Food Specific Immunoglobulin G Antibodies in Patients with Inflammatory Bowel Diseases

Chenwen Cai, Jun Shen, Di Zhao, Yuqi Qiao, Antao Xu, Shuang Jin, Zhihua Ran, Qing Zheng PLoS ONE 9(11): e112154. doi:10.1371/journal.pone.0112154

Results: Food slgG antibodies were detected in 75.9% (60/79) of CD patients, 63.6% (21/33) of UC patients and 33.1% (88/266) of healthy controls (HC). IBD patients showed the significantly higher antibodies prevalence than healthy controls (CD vs. HC, P=0.000; UC vs. HC, P=0.001).

Conclusions: The study demonstrates a high prevalence of serum IgG antibodies to specific food allergens in patients with IBD. sIgG antibodies may potentially indicate disease status in clinical and be utilized to quide diets for patients.

The Value of Eliminating Foods According to Food-specific Immunoglobulin G Antibodies in Irritable Bowel Syndrome with Diarrhoea

Hong Guo, Tao Jiang, Jinliang Wang, Yongchao Chang, Hai Guo And Weihong Zhang The Journal of International Medical Research. 2012: 40: 204 - 210

Results: Food-specific IgG antibodies were identified in 39 (50.65%) patients with D-IBS patients compared with four (15.38%) controls. After 4 weeks' dietary therapy, most symptoms of D-IBS had improved. By 12 weeks, all symptom scores had decreased significantly compared with the baseline scores.

Conclusions: The 12- week specific-food exclusion diets resulted in significant improvements in abdominal pain (bloating level and frequency), diarrhoea frequency, abdominal distension, stool shape, general feelings of distress and total symptom score compared with baseline in patients with D-IBS.

Cramping pain in stomach Constipation & bloating for over seven years

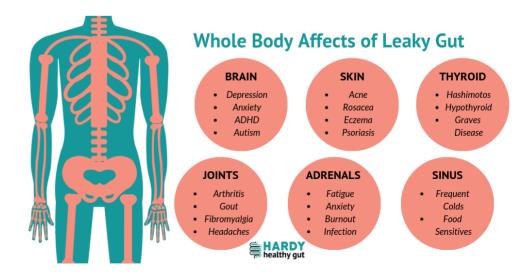
Gus, Building Firm Manager Multiple visits to hospitals & numbers of antispasmodics.

Gus, a building firm manager, experienced intermittent bouts of debilitating pain accompanied by bloating and constipation. This sometimes caused him to miss work. "I would be walking around holding my stomach in agony. It was embarrassing, excruciatingly painful and worrying for everyone."

Gus tried to establish the cause of his symptoms but after many investigations was told that "Some people just get tummy aches" and was diagnosed with Irritable Bowel Syndrome. He was prescribed antispasmodics which didn't help and left him feeling misunderstood and angry for over 7 years. Gus had tried food avoidance on several occasions over the years but found it difficult to pin down which food would be the cause of the attacks because sometimes it could take a couple of days before he would react.

"I caught the BBC Look East News feature about your Foodprint® service and thought I would give it a go. The test was simple and easy to complet and the simple colour coding system on the results meant you could quickly identify the foods to avoid."

Gus eliminated wheat, barley, rye, corn, oats, dairy, eggs, crab, yeast and pear. "The results were immediate, I'd not felt so good in such a long-time. It has changed my life, I feel much happier now that I have worked out the cause of my problems and family gatherings are no longer a worry!"



Cramping pain in stomach & recurrent diarrhoea for seven years

Sarah, 33, from Felixstowe, Suffolk Multiple visits to hospitals

Sarah, 33, from Felixstowe, Suffolk, experienced debilitating stomach problems that ruled her life for seven years. "My gut problems started when I was 19. I started suffering from agonising cramping pains in my stomach and passed blood when I had a bowel movement. It was really scary and I seemed to spend my life dashing to the loo all the time with diarrhoea. I lost a lot of weight and felt progressively more tired and fatiqued."

Sarah's doctor referred her to hospital several times for investigations and gave her leaflets on nutrition, but no one suggested how her diet could affect her symptoms. When a friend who'd been having health problems went to see a nutritionist and was diagnosed with an intolerance to dairy, he urged me to get tested too. "I was amazed to see how dramatically his health improved after eliminating dairy from his diet." She went to see the same nutritionist and was tested using the Food Detective™ test. Within 40 minutes, Sarah discovered that she had an intolerance to milk and dairy products and was advised to eliminate them from her diet.

"My tiredness seemed to ebb after two weeks and slowly my energy levels came back up to normal. I'd recommend the Food DetectiveTM test to anyone who is troubled by symptoms like mine – it's such a simple test but it could change your life overnight."



The Food-Specific Serum IgG Reactivity in Major Depressive Disorder Patients, Irritable Bowel Syndrome Patients and Healthy Controls.

Karakula-Juchnowicz H, Gałęcka M, Rog J, Bartnicka A, Łukaszewicz Z et al, Nutrients 2018, 10(5), 548.

Results: IgG food hyperreactivity (interpreted as an average of levels of IgG antibodies above 7.5 μ g/mL) was detected in 28 (43%) participants: 14 (64%) from the MDD group, ten (46%) from the IBS group and four (19%) from the HC group.

Conclusions: Our findings suggest more common food-specific serum IgG hyperreactivity among patients with IBS and MDD compared with HC, which may be one of the mechanisms leading to the development of immune activation and low-grade inflammation observed in these disorders.

Food-Specific IgG Guided Elimination Diet; Role in Irritable Bowel Syndrome?

Gillian R. Hart (2017). Int J Nutr Sci & Food Tech 3:4.57-59

Results: 3,626 of the 5,236 individuals stated that they had followed the diet rigorously and 76% of those reported improvement in their condition. Patients with gastroenterological or psychological illness showed the greatest improvements and the results were noticeably better again in those with several different symptoms

Conclusions: An increasing number of studies are emerging that show a correlation between food-specific-IgG guided elimination diet and improve ment in a variety of conditions including IBS. The point being here that each dietary intervention, on this basis, is personalised; dependent on specific tailored food-IgG test results; and provides a unique targeted approach.

IgG-Based Elimination Diet in Migraine Plus Irritable Bowel Syndrome

HELIF ILIGAZ AYDINLAR MD Pinar Yalinay Dikmen MD Arzu Tiftikci MD Murat Saruc MD Muge Aksu Hulya G. Gunsoy Nurdan Tozun MD Headache The Journal of Head and Face Pain December 2012

Results: Compared with baseline levels, elimination diet per se was associated with significant reductions in pain-bloating severity (1.8 [1.3] vs 3.2 [0.8]; P<.05), pain-bloating within the last 10 days (3.2 [2.8] vs 5.5 [3.1]; P<.05), and improvement obtained in quality of life (3.6 [1.4] vs 2.9 [1.0]; P<.05) by the elimination diet as compared with provocation diet

Conclusions: Assay of IgG antibodies to food seems to have a role in helping patients with concomitant presence of migraine and IBS to identify candidate foods for elimination.

Food elimination based on IgG antibodies in irritable bowel syndrome: a randomised controlled trial

Atkinson W1, Sheldon TA, Shaath N, Whorwell PJ. Gut. 2004 Oct;53(10):1459-64

Results: After 12 weeks, the true diet resulted in a 10% greater reduction in symptom score than the sham diet (mean difference 39 (95% confidence intervals (CI) 5-72); p = 0.024) with this value increasing to 26% in fully compliant patients (difference 98 (95% CI 52-144); p<0.001). Global rating also significantly improved in the true diet group as a whole (p = 0.048, NNT = 9) and even more in compliant patients (p = 0.006, NNT = 2.5).

Conclusions: Food elimination based on IgG antibodies may be effective in reducing IBS symptoms and is worthy of further biomedical research.

Treating irritable bowel syndrome with a food elimination diet followed by food challenge and probiotics.

Drisko J1, Bischoff B, Hall M, McCallum R. J Am Coll Nutr. 2006 Dec;25(6):514-22.

Results: Baseline abnormalities were identified on serum IgG food and mold panels in 100% of the study subjects with significant improvement after food elimination and rotation diet (p < 0.05). Significant improvements were seen in stool frequency (p < 0.05), pain (p < 0.05), and IBS-QOL scores (p < 0.0001).

Conclusions: These data demonstrate that identifying and appropriately addressing food sensitivity in IBS patients not previously responding to standard therapy results in a sustained clinical response and impacts on overall well being and quality of life in this challenging entity.

Food-specific IgGs Are Highly Increased in the Sera of Patients with Inflammatory Bowel Disease and Are Clinically Relevant to the Pathogenesis

Nanping Xiao, Fenghua Liu, Guangxi Zhou, Mingming Sun, Fengfu Ai and Zhanju Liu, Intern Med 57: 2787-2798. 2018

Results: Food-specific IgGs against egg, milk, wheat, corn, rice, tomato, codfish, and soybean antigens were found to be significantly increased in the sera of CD patients compared with UC patients and healthy controls (p<0.01).

Conclusions: Food-specific IgGs against egg, milk, wheat, corn, rice, tomato, codfish, and soybean are highly increased in the sera of CD patients. IFX treatment was able to down-regulate the levels of foodspecific IgGs by suppressing intestinal inflammation and promoting mucosal healing. Therefore, food-specific IgGs may serve as an important approach in the diagnosis and management of food allergy in IBD.

Irritable Bowel Syndrome for over 18 months

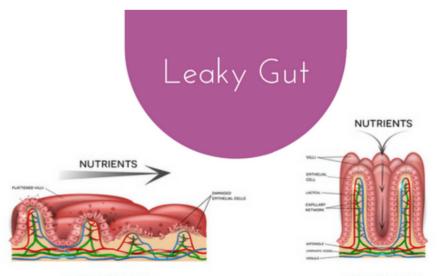
Sandra, 54, from Crawley, West Sussex - Air Hostess Multiple Blood Tests, Endoscopy & CT SCAN .

Sandra, 54, from Crawley, West Sussex, was on the verge of giving up her career as an air hostess because of agonising bouts of Irritable Bowel Syndrome (IBS). "My IBS symptoms started seven years ago after I suffered two bouts of salmonella and campylobacter in quick succession. I started having terrible crippling pains in the right hand side of my stomach and chronic diarrhoea that would last for days. It left me feeling so weak I would be laid up in bed for days at time."

Over an 18 month period, Sandra underwent numerous medical investigations, including an endoscopy and a CT scan – plus multiple blood tests. "I was desperate for them to find a cause for my symptoms, but on the other hand I dreaded it might be something more serious. Eventually one doctor told me I had IBS and would just have to live with it."

In desperation, Sandra went to see a nutritionist who suspected she was suffering from a food intolerance. "She carried out a pin-prick blood test for food intolerance called the Food Detective and within 40 minutes was able to tell me that I was intolerant to apples, wheat, almonds, rice, brazil nuts, cashew nuts, cocoa beans, whole egg and shellfish.

"After cutting out these foods I began to feel better and within a few weeks my IBS symptoms disappeared. It was such a relief to find out what was wrong with me. "I couldn't believe what a difference it made – I got all my energy back and could eat again without having to worry about rushing to the loo.



DAMAGED VILLI

NORMAL VILLI