450 Pleasant Street, Brockton, MA 02301•508 583-2565 • www.baritzwellness.com

## Gluten Intolerance

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Gluten intolerance is a condition in which the consumption of gluten has adverse effects. Intolerance to Gluten includes celiac disease, wheat allergy and gluten sensitivity. Gluten is a protien found in wheat and a few other grains. It is estimated that 10 to $15 \%$ of the US population have some form of gluten intolerance. Symptoms can include bloating, abdominal discomfort or pain, diarrhea, headaches, migraine headaches, tiredness, attention-deficit, hyperactivity, schizophrenia, muscular disturbances as well as bone and joint pain.

Celiac disease is an auto-immune reaction to gluten that damages the lining of the small intestine and prevents it from absorbing parts of food that are important for staying healthy. This can be diagnosed by a biopsy of the small intestine.

Wheat allergy is an allergic reaction to foods containing wheat. It's one of the more common food allergies in children and can be diagnosed with traditional allergy tests such as skin scratch tests or blood testing.

Gluten sensitivity is intolerance to gluten that can develop at any point in life. It is best identified by eliminating all gluten for three weeks and then reintroducing to see if reactions occur.

Treatment for all three conditions is a gluten-free diet, the difference being celiac disease is life-long, but wheat allergy and gluten sensitivity may decline over time. A gluten-free diet excludes foods containing wheat, kamut, spelt, barley, rye, malts, triticale and in some cases oats. As well as eliminating foods with gluten as a flavoring, stabilizing or thickening agent, often "dextrin". People on a gluten-free diet are subject to developing nutritional deficiencies and should consult with their health care provider to ensure they are supplementing appropriately. ${ }^{1,2}$

## How much Gluten is safe?

The term gluten-free generally indicates a harmless level of gluten rather than a complete absence. The World Health Organization defines naturally gluten-free as having 20 parts per million or less of gluten. Numerous studies ${ }^{3,4}$ on people with celiac disease concluded that the effects of gluten are dose dependent: many having no reactions up to $50 \mathrm{mg} /$ day, very slight changes at $100 \mathrm{mg} /$ day, moderate changes at $500 \mathrm{mg} /$ day and extensive damage at $1,000 \mathrm{mg} /$ day. Many foods contain large amounts of gluten for example a slice of whole wheat bread contains $1,800 \mathrm{mg}$ and a serving of pasta contains 6,400mg.

## Standard Process whole food supplements

Standard Process whole food supplements have been successfully used by tens of thousands of clinicians with hundreds of thousands of patients for over 70 years. Some Standard Process whole food supplements contain very tiny amounts of gluten, typically micrograms. Even at large doses it would be almost impossible to get anywhere near the threshold level for those with celiac disease. Although caution is always warranted with food sensitivities, there is usually no detectable reaction to whole food products that have been checked for compatibility using our muscle testing procedure. For those very rare (one in one thousand) patients who need to be $100 \%$ gluten-free Standard Process and Medi-Herb do offer a line of gluten-free products.

To have a custom program created for you or for a free consult call 508 583-2565
${ }^{* *}$ To view this and other health tips go to www.baritzwellness.com and select the Health Tips tab**

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[^0]:    1. Saturni et. al. 2010, Nutrients. 2:16-34 (Standard Process News, July 2012)
    2. Hallert et al 2009, Aliment Pharmocol Ther. 29:811-816 (Standard Process News, July 2012)
    3. Ciclitra PJ, Evans DJ, Fagg NKL, Lennox ES, Dwoling RH. Clinical Testing of gliadin factors in coeliac patients. Clin. Sci. 1984;66:357-64
    4. Ejderhamn J, Veesess B, Strandvik B. The long term effect of continual ingestion of wheat starch-containing gluten-free products in celiac patients. In: Kumar PJ, ed. Coeliac disease: one hundred years. Leeds, United Kingdom; Leeds University Press, 1988; 294

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