

What Is The Perfect Diet For Those With Coeliac Disease To Maintain Optimum Health?

By Dr Ron Hoggan Ed.D 11th March 2008

Dr Ron Hoggan Ed.D shares his insights, gained after years of research, regarding what constitutes the healthiest diet for everyone – especially those with coeliac disease.

Virtually every parent and every professional person who works with children wants to see them learn, grow, and achieve to the greatest extent of their potential. The vast majority of these caregivers know that nutrition plays an enormous role in each child's realizing their potential. Unfortunately, that is where agreement ends. There are almost as many perspectives on what constitutes a healthy diet as there are people on this planet. Some claim that the healthiest diet is that of a vegetarian which almost invariably leads to a heavy reliance on grains and which is devoid of vitamin B12. Others assert, based on cardiovascular disease being our number one killer that the best diet includes the smallest amount of fats. They believe that fat consumption is related to blood cholesterol levels and that blood cholesterol levels are the best predictor of heart attacks. Yet low cholesterol has been linked to increased cancer risk. Still others argue for the health benefits conferred by a high protein diet. They point out the importance of proteins in providing the building blocks for immune system function and the body's maintenance and repair at the cellular level. A small but growing faction points to the health benefits of a diet dominated by fats with little or no carbohydrate content. Other diets target refined sugars and flours as problematic. Added to this diversity, there is a plethora of dietary perspectives that advocate rigid proportions of fat, protein, and carbohydrates. The proportions of each component vary according to the data that is given the most credence by the creators and advocates of each diet. Many dietary rituals have grown up around cancer avoidance or therapy, weight loss strategies, treatments for cardiovascular disease or its avoidance, and autoimmune diseases. Book, video tape, audio tape, menu guides, and other media sales are just a starting point. Some advocates of specific dietary

strategies are even selling special foods that comply with their recommendations. The profit motive can be a powerful factor in creating bias. Then there are the government sponsored healthy eating guides. Of course, each paradigm assumes that one diet can be recommended for all people. The USDA has recently devised recommendations that do make concessions to gender and stage-of-life (with separate recommendations for children, adults, and seniors) but even with these changes, the USDA provides a clear message advocating plenty of grains and little fat. It is difficult to determine just how much these recommendations have been influenced by special interest lobbies. Agricultural and food production corporations have made astronomical investments in current dietary practices and shaping new dietary trends. Is it reasonable to expect them to be responsive to evolving research findings?

Those of us who have experienced the painful shock that we were ill, sometimes deathly ill, from grain proteins that come highly recommended by government food guides, have had to revise our views of healthy eating and reject such flawed guidance. Gluten sensitivity and coeliac disease often crop up in the context of what many health care professionals tout as a healthy diet. Prior to my own diagnosis of coeliac disease, I remember one physician recommending that I eat bran every morning to reverse some of the gastrointestinal problems I was having. He would not believe that eating bran made me vomit. There is a persistent sense that we should all know what constitutes a good diet. Almost every one of us who have to avoid gluten knows that avoiding it is a healthy choice for us, irrespective of government or private sector recommendations for healthy eating. We have learned not to trust these prescriptions filled with certitude and rigidity. We have found new-found health in eating habits that are diametrically opposed to those recommendations.

Thus, many of us will have a very different view of conventional dietary wisdom. For instance, Dr. Eve Roberts, a scientist at Toronto's Hospital for Sick Children, was quoted on Monday, September 24th in the Victoria Times Colonist as saying: "I do not want

children to grow up with liver disease because we forgot to tell them how to eat" (1). I'm sure that same attitude abounds throughout the medical profession. Unfortunately, despite the overwhelming consensus that children should not suffer such diet-induced illnesses, there is little agreement on exactly what we should be telling children (or adults for that matter) to help them avoid fatty liver disease. The medical literature provides research reports of several contradictions on this point.

In fact, contradictions abound throughout the medical literature. So how are we to choose a healthy diet? What can we teach our children about eating well? For those of us who are gluten sensitive or have Coeliac disease, gluten avoidance is a given. For our children, the answer is less clear. They will be at greater risk of having coeliac disease or gluten sensitivity, but what should we teach them about these grains? Should they avoid gluten entirely? Should they eat normally until they become ill—perhaps risking permanent neurological damage or a deadly cancer? Should they be constantly vigilant with regular blood tests, endoscopies, or IgG allergy testing?

Many of us have been told to "just eat a balanced diet". It sounds appealing, but it is so vague as to provide little meaningful direction. What is a healthy diet and how do we judge if any special interest group is more interested in health than profits? Just how much can we trust information that has a price tag attached to it? Somebody is profiting. Can they really provide objective guidance? These questions should form part of our search for information. There is nothing wrong with making a profit or earning a living from providing dietary advice. However, it is important to be aware of any possible conflicts of interest.

For these reasons, I have developed my own strategy for determining what advice and guidance I can provide to my children and grandchildren. I acknowledge that this approach is limited by my own biases, my finite capacity for assimilating and synthesizing information, my incomplete familiarity with nutritional research, and my own personal

experiences. On the other hand, I don't have to worry about being directly influenced by profiteering or lobby groups diverting me from my primary purpose.

On that basis, I have proceeded to explore my own dietary program. I have conducted some trial-and-error experiments on myself, and I have read as extensively as my part-time avocation of dietary investigation permits. From this, I have learned to trust my own gut. If something doesn't feel right in my stomach, I avoid it. I have also learned to trust my sense of smell. If a food does not smell appetizing to me, I don't eat it. I suspect that this is a tool that evolution has provided us with to determine what is and is not safe to eat. Those without it probably stopped contributing to the human gene pool. I have learned that IgG allergy testing is an effective tool with which I can reduce the lengthy trial-and-error process necessary for identifying the majority of allergies. I realize that this testing has its weaknesses, but so does almost every other form of medical testing. I have come to accept that as long as human beings are involved, we will have imperfect testing, regardless of claims to the contrary. Finally, although I try to read critically, I read medical and scientific research reports to stay abreast of new findings and gain a better understanding of this complex field.

The tentative conclusions I have reached, pending new information, are as follows:

1. Gluten grains probably aren't very good for people. They are highly allergenic affecting at least 10% of the general population, and perhaps as much as 40% of the population. These grains also contain opioids morphine-like substances that can be highly addictive and have a deleterious effect on our ability to resist cancer. They also contain large quantities of starch that is converted very rapidly into sugars.
2. The evidence suggests that refined sugars and starchy foods cause many of our problems with obesity, vision problems due to growth related distortions of the eyeball, type II diabetes, and hypoglycemia.
3. Dairy products probably aren't very good for anyone either. They are also highly allergenic

and contain opioids similar to those found in gluten. Further, about two thirds of the world's adult populations are lactose intolerant. They don't retain enzymes for digesting milk sugars after childhood.

4. I think it is wise to avoid processed foods where possible. The more they've been processed, the further they are from the state in which we evolved eating them.
5. I believe it is a good idea to avoid eating soy because it has been linked to neurological diseases and other health problems that I don't want to develop.
6. I avoid foods to which IgG blood testing has shown to cause an immune reaction in me.
7. I try to avoid juices, as these are mostly sugar.

Those are the things I try to avoid. On a more positive note, there are several specific strategies that I try to follow:

1. I take supplements of vitamins and minerals which evidence has shown that I either absorb poorly or have been depleted from the soils in which my food is grown.
2. I try to eat whole fruits and vegetables.
3. I try to eat when I am hungry—not according somebody else's idea of appropriate mealtimes.
4. If I am ever diagnosed with cancer, I will follow a ketogenic diet. That is a diet that is dominated by fats, includes about 30% protein, and includes no carbohydrates. I have tried this diet for about a month. I can't say that I enjoy it very much, but I'd be happy to forego the pleasure of carbohydrates if my life is at stake.
5. I'm very grateful to my wife who works very hard at finding tasty treats so I don't have to feel isolated or deprived in social situations where food is consumed.
6. I'm convinced that even a little exercise is a critical feature of a well balanced diet, but that belongs in another column.

I realize that these strategies are often impractical and I don't pretend to live up to all of them, except for gluten and dairy avoidance. I also suspect that I would be better off if I ate organic fruits and vegetables along with range fed meat. I also suspect that I should avoid any genetically modified food. We really don't know what's in that stuff! I haven't reached the point yet where I am sufficiently motivated to change my diet to that extent, although I do realize that it would probably be a good idea. I am convinced that Dr. Barry Sears is onto something when he advocates specific proportions of each food type for optimal health and performance. Unfortunately, my diet is already complex enough that without some specific and highly motivating reason, I'm just too busy or lazy to be bothered with measuring such things. I just let my taste buds and availability (my wife only cooks one cake at a time) determine my portion sizes.

This is the balanced diet I recommend. I sorely doubt that my children or my grandchildren follow my advice, except when they visit during mealtimes. However I am confident that such a diet, should they choose to accept it, will not cause them to self-destruct due to dietary disease.