

## **Frequently Asked Questions**

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As I reported in the May 2006 issue of Vitamin Research News and in a recent webinar, food allergy testing is an invaluable tool for eliminating or reducing seasonal allergy symptoms, sinusitis, and asthma. Even more global health promoting benefits can be seen relative to chronic symptoms such as headaches, autoimmune conditions, intestinal discomfort, fatigue, and inflammation when offending foods are eliminated from ones diet. Below are some often-asked questions and answers.

### **1. What are food allergies?**

A food allergy is an adverse food reaction for which an immunological basis is clearly defined. Immune-mediated adverse food reactions involve antibody production to certain food antigens. These reactions depend on a person's sensitivity to some foods over others, which may occur for many reasons including genetic predisposition and current health status.

### **2. What may promote a food allergy?**

Possible causes may include improper oral tolerance, stress, antigenic overload, compromised digestion, imbalanced gut microflora, and poor immune function.

### **3. Should certain foods be eaten or avoided prior to testing?**

No. It's best to maintain usual dietary habits, consuming a variety of foods. It's strongly advised to avoid foods that may have previously resulted in an adverse reaction as secondary exposure may prove fatal.

### **4. Should medications be discontinued prior to testing?**

Anti-inflammatory and immunosuppressive medications, such as prednisone and cyclosporine, depress the immune system and may interfere with the test results. Abstain from these types of medications for 2 to 6 months prior to testing, or until symptoms re-emerge.

### **5. What do elevated IgG antibodies to certain foods mean on the FOODStats report?**

Elevated IgG antibodies indicate a delayed immune-mediated reaction to certain foods tested. This may manifest as various symptoms. Because ill effects aren't felt right away after intake of the suspect food, pinpointing symptoms to specific foods may prove challenging. Generally, symptoms may manifest anywhere from 2-72 hours after consumption of the culpable food. IgG antibodies live actively in circulation for about 21 days with a residual activity on mast cells for about 2-3 months. Symptoms may therefore persist for weeks to months after omitting the culpable food from the diet.

**6. Why does the FOODStats report show elevated antibody levels to banana when the patient never eats bananas?**

Banana is a common ingredient found in many fruit shakes, smoothies, and baked goods. With a suspect reaction to banana, consider a possible cross-reaction to natural rubber latex. Sensitization to latex has extensive cross-reactivity with certain foods, particularly banana, which may lead to clinical allergic reactions. Rubber latex is a common ingredient found in balloons, appliance cords, hearing aids, swimwear, condoms, rubber bands, and bandages.

**7. Does reactivity to gluten equal celiac disease?**

A definitive celiac disease diagnosis is through a tissue sample taken from the small intestine where pathological damage is observed. A gluten antibody response does not diagnose celiac disease, but may warrant further investigation.

**8. Can withdrawal symptoms occur from a reactive food?**

Yes. We easily become addicted to foods we are reactive to! As with any addiction, when we avoid the trigger we may develop withdrawal symptoms, which may include throat congestion, stuffy nose, diarrhea, fatigue, irritability, headaches, malaise, and increased appetite. Withdrawal symptoms should not be confused with other possible disorders; it's advised for patients to consult their practitioner about specific symptoms. Withdrawal symptoms attributed to a food reaction are transient.