Decode Food Reactions: Allergies To Sensitivities Transcript

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Introduction to Food Reactions

Hello and welcome back to our reversing mast cell activation syndrome and histamine intolerance summit. I'm your host, Dr. Meg Mill And today, I'd like to talk to you about food.

Food reactions. And to really differentiate between food allergies, food sensitivities, and enzymatic reactions, because I think there's a lot of confusion when it comes to food reactions and the mechanism of why they actually occur.

So I want to help you navigate this situation. I want to start by talking about food allergies. Food allergies are IGE mediated reactions. They are immediate and often severe and can be anaphylactic and life threatening.

You often experience hives, swelling, itching, trouble breathing, can have throat tightening, swollen lips, a wheezing, and the symptoms come on quite quickly.

Generally, when someone has a food allergy, they have this for life. It's not something that is transient that you get over. You have this food allergy and you want to avoid this food long term.

Food Allergies and Immediate IgE Responses

You want to look at cross-contamination and make sure that the food you're allergic to is not on shared equipment, as sometimes this can be variable in the way they're cleaned, and even a small amount of something on shared equipment can stimulate a reaction.

A food allergies are something that we want to avoid all costs. We generally, like I said, avoid these for life. There is a new process that some allergists are doing called oral immunization therapy.

And in this therapy you are taking a tiny, very small amount of your food allergen and increasing it at a very minute portion over a long time to really build up tolerance to that particular food.

And that is done under the care of someone who is trained for that process. But otherwise we generally just require long term avoidance. And for a food allergy reaction to occur, you must have actually had previous contact with the antigen, which produced no symptoms.

So that's why sometimes when people are saying, okay, I ate that food before and I didn't have reaction, why am I reacting now? You actually had to be primed.

And during which the body started making antibodies or an activated immune cells that didn't cause symptoms, and that will cause symptoms on subsequent exposures to that same antigen.

So IGE molecules bind to the receptors on the surface of mast cells and base of cells upon re exposure to the same antigen, or sometimes a similar antigen.

The antigen binds to an adjacent IgG molecule and it brings their receptors together, triggering a cascade that induces the release of histamine and other inflammatory chemicals from the mast cells.

So it's one of the ways that the mast cells release histamine and other inflammatory mediators. And this process, like I said, creates a wide range of symptoms from hives to anaphylaxis.

Usually, no, you have that allergy because generally you get a severe reaction. This type of food reaction actually occurs in a small number of people.

A much larger number of people have other types of food reactions, and that's where food intolerances, enzymatic reactions and sensitivities come in. So I want to start by talking about enzymatic food intolerances that are due to the lack of a particular enzyme.

Enzymatic Intolerances and Histamine Breakdown

And this is where histamine degradation issues in the gut become a problem, because we breakdown histamine by an enzyme called diamine oxidase. And diamine oxidase isn't the only enzyme that we have that breaks down food.

We have a number of enzymes located in the brush border of our intestines that help us break down certain substances. The most common one that we think of is lactase, because you probably know someone who has a lactose intolerance.

They can't break down lactose from dairy products. These people often have gas and bloating and feel much better when they take a lactate enzyme. And that's because they are able to break down the lactose.

Now, some people have genetic propensities to have different various enzymes deficiencies, and I am one of those people. I have genetic snips that affect my diamine oxidase pathway so that can happen.

And that's something that we can test genetically. But more often it comes from gut dysbiosis. And this occurs because of an imbalance in our gut bacteria.

We get a disruption in the brush border of our gut. And that's where these enzymes are produced. And this causes a decrease of these enzymes and their capability to help us break down the food.

And this happens when the microvilli become damaged. One of the things that we see that can occur is this intestinal permeability and leaky gut. And we often get that signal through zoom in and that zonal and tells the tight junctions to actually open up.

And we're getting the leaky gut dynamic, however, is not actually the only way that that can happen. You know, for example, you can actually wear down your gut lining just from repeated use of NSAIDs that can wear the lining so much that it also reads.

And this is another way that the gut becomes very permeable. And that's not as an immediate leaky gut reaction when we're evaluating this intestinal permeability, or as people like to call a leaky gut, we need to look at it in multiple ways.

And having adequate diamine oxidase tells us that we have these healthy, plumped up microvilli that are actually doing their job appropriately, that they're making good levels of enzymes like diamine oxidase to break down the histamine in our food.

And this also drives another point, and that is that clinically, as we work on your gut, you actually can see less histamine reactions in your body. Overall because we're breaking down histamine.

And so that's why sometimes when you're not even having digestive symptoms, those can be a sign of histamine. As we all know that the bloating, the gas, the digestive symptoms.

But we also see the other symptoms clear because as we said, we have four different types of histamine receptors. So we can see the skin reactions, the allergic reactions, the headaches, the anxiety.

All of these things start to clear up when we're working on reversing some of these issues. One of those, as we mentioned, is better diamine oxidase function.

But another reason that is that you're having less intestinal permeability, less things are leaking through that intact

gut lining.

Food Sensitivities and Delayed IgG Reactions

And when less things leak through, there's less to excite your immune system and cause this immune activation. And this brings us to another one of our food reactions, which are food sensitivities or IgG mediated reactions.

Food sensitivities are another immune related reaction to food, and these are usually from IgG, or IGA antibodies. And symptoms of food sensitivities can happen anywhere from 2 to 48 hours after we eat the food, which makes it so confusing because you're not expecting that the food you ate two days ago is what is causing your symptoms.

Now, and it's very hard for people to understand which food caused the reaction, because the reactions are not occurring with the food. So you can falsely assume that you're able to tolerate a food when that food actually is causing an immune response for you.

And also another problem is that the symptoms are quite variable. They can show up as acne, congestion, runny nose, constipation, depression, anxiety, diarrhea, fatigue, gas, bloating, headaches, migraines, heartburn, immune system impairment, insomnia, irritable bowel syndrome, joint pain, inflammation, rashes, eczema, swelling, sinus infections, or even waking.

Sometimes, even those stubborn pounds that won't come up are actually from a hidden food sensitivity. Do any of those sound familiar? I think the answer is yes because they overlap with a lot of the other symptom.

So what is the dynamic behind this IgG food sensitivity? This IgG antibody reaction is not like the IgG reaction. In fact, they're often quite transient.

And this is happening because the food is actually getting through the lining of your gut. So I like to use this analogy to help understand think of your gut lining like a cheesecloth.

There are these teeny tiny little particles are supposed to permeate through the cheesecloth and get into the blood so that we can absorb the nutrients into our bloodstream that we need.

But when we have some sort of imbalance in the gut and we're not digesting the foods well, our particle size becomes too large and we start to get what we talked about, intestinal permeability.

And the food can get through the lining and bigger particles than intended and other things that we're not intended to get through. The lining can also get through that lining.

When this happens, we start to get an IgG antibody response. Our immune system says alert, alert. There's a pathogen. It's a foreign substance because it's not used to seeing the substances in the blood that are getting through the damaged gut lining.

And because of this, you get these IgG antibody reactions to food that you eat regularly, because these are the foods that are regularly experiencing this process.

What do we do now? We're getting reactions, the foods that we eat all the time. Well, the first thing we need to do is eliminate the foods. And in my practice, we actually do food sensitivity testing to pinpoint these foods.

We look at a measurement of these antibodies. And what we do is we eliminate the foods for 90 days. Now when we're talking about the IgG antibodies, remember I said they can occur symptomatically up to a few days after you eat the food, but they also have an a long term immune response.

So we can start to see this immune response happening for a long time. The half life of these antibodies is around 23 days, so that when half of the antibodies will be gone.

So think about that in 23 days, from the food you ate and how to react. And to only half of those antibodies are going to be gone. So we want to eliminate this food for a time period that will really show a decrease in the antibodies.

And sometimes I think people think limiting the food is the same thing as eliminating. And it's not because when we're looking at the length of that antibody, if you're eating, let's say dairy once a week and you think, okay, well, I just eat it every once in awhile, but maybe once a week, 99% of the time in my week, I'm not eating dairy, but that once a week those antibodies are lasting 23 days.

So then that once a week those antibodies are lasting a long time, and then you eat it again. And those antibodies and we keep going. And we're seeing this higher threshold.

And you're still getting the immune response. So in order to really show elimination of these antibodies we have to completely eliminate them. We can't just eat them sometimes and see a difference.

You know, you may bring down your load, but you're not going to get a true resolution unless you completely eliminate them from your system. So what I like to do to really bring those down are look at a 90 day elimination, and then we want you to actually eat the food again.

Gut Healing, Reintroduction, and Restoring Tolerance

We want to reintroduce it. And then we look for symptoms and we reintroduce the food and say okay, well I reintroduce the food. What symptoms? I'm going to look very closely, pay attention to this one food and look for my symptoms over a few days.

If you don't get any symptoms, then you reintroduce it and put it back as a part of your diet. If you do see the same symptoms, then we pull that out for about another four weeks before reintroducing it again.

Our goal is to have you tolerate the food. That's not to have you completely eliminate the foods forever, but we need to bring down those antibodies. In the meantime, we also need to work on the health of our gut.

We need to do things like rebalance your microbiome and heal the damaged breast border so we can get those good enzymatic reactions. We need to heal the gut lining so we don't have intestinal permeability.

We need to make sure we're digesting our foods well so that the foods are in the particle size that we need, that our proteins are broken down, that they're turned into amino acids, that we're digesting and absorbing the nutrients that we need to get.

Because remember, even if you're eating the most healthy diet, if you're not digesting and absorbing, you're not getting the nutrients that you need in order to really get the functions that we want to out of those foods, we also need to eliminate the infections and overgrowth and invaders.

We need to optimize our secretory IGA for an optimized immune response. We need to, like I mentioned, make sure we're healing that brush border so we don't have this happen over and over again because you can actually start to get a revolving door of these food sensitivities.

If you don't work on the healing, you need to bring all of these steps together in order to work on the healing. Because what's going to happen is you're going to pull that food out, and then you're going to have an issue with another food, and then you pull that food out, you're gonna have another issue, and it just becomes this revolving door of issues because you're not actually getting to the root and actually healing the things that you need to do to make a difference in your health.

And what can start to happen is we can start to get loss of oral tolerance. You may feel like there are only ten foods that you can eat without getting a reaction.

And when this happens, we really need to focus on your gut health. We need to ensure that you have enough hydrochloric acid and digestive enzymes to break down those proteins.

If you don't break the proteins down into amino acids, then your dendritic cells will sample larger proteins and they'll say, that's not right, that's not how it's supposed to be.

And then that creates the immune response. Another way to improve overactive dendritic cells is to improve your secretory IGA IgG antibodies found in the lining of our small intestines.

And they will attach to foreign proteins or proteins that are not supposed to be there, like the large food that isn't broken down. And it's going to decide whether it should have immune response to it.

And the secretory IGA also binds to the protein and attaches to it and kind of surrounds it. So the dendritic cells can't really sample it and have that of our immune response.

So it can prevent the dendritic cells from becoming overreactive. And we can also use things like flavonoids. While we're working on rebalancing the microbiome and healing the gut lining and bringing all these then digestive function back in order.

And the flavonoids can be helpful as an addition to block that overreaction of our immune system and the overreaction of the dendritic cells and dampen the immune response.

So I do stool testing in my practice to directly look at all of these components together. We want to make sure that we're we're looking at each function.

It's it's not a one stop shop. We need to look at everything together. And we need to be able to really look at what that is and pinpoint it for you so that we can heal exactly what you have going on.

We need to make sure that you have enough short chain fatty acids. We need to make sure that you have a good, healthy microbiome. We need to make sure that you have enough secretory IGA.

And I could go on and on, but we need to bring each piece back into balance. And that takes a step by step process. But when we do the work and we heal each of these process, we really start to optimize immune function, and we start to be able to see so many other symptoms that clear up that we're that are in different conversations that we're talking about.

You know, it is I have to just take a side note and say, I mean, it really is amazing. All of the different things that we don't associate with the gut symptoms that start to clear up when we do this work.

But what we're focusing on right now is that we can often tolerate foods that we never thought possible. And the idea is not to have you on a limited diet.

Sometimes we have to work on limiting the diet and short term to really get to the bottom of some of these things, but when we do work on them, our goal is to be able to have you tolerate a wide variety of nutrients so that we can really support overall health.

So I hope you found this helpful on your health journey. Have a great day.