ReSet The Yeast Connection

Carolyn Dean MD ND
# TABLE OF CONTENTS

## INTRODUCTION

Preview of Yeast ReSet Protocol

## SECTION ONE: ALL ABOUT YEAST

Chapter One: The Personal Side of Yeast
Chapter Two: Candida and its Toxic Friends
Chapter Three: Show Me the Evidence
Chapter Four: Making the Diagnosis

## SECTION TWO: YEAST BALANCE PROGRAM

Chapter Five: Yeast ReSet Diet
Chapter Six: Yeast ReSet Protocols
Chapter Seven: Living a Yeast-Free Life

## SECTION THREE: TREATING CHILDREN, WOMEN AND MEN

Chapter Eight: Children With Yeast
Chapter Nine: Women With Yeast
Chapter Ten: Men With Yeast

## SECTION FOUR: YEAST RESET MENU & RECIPES

Chapter Eleven: Menu & Yeast ReSet Recipes

## REFERENCES

## MEET THE DOCTOR OF THE FUTURE
INTRODUCTION
I’ve been studying health since my teens, and over the past five decades I’ve developed a very wide overview and perspective on our current health care crisis. Speaking with thousands of patients, clients, and callers on my radio show, I’ve identified two clear causes of most health problems. They are Mineral Deficiency and Yeast Overgrowth Syndrome (YOS) – and most people suffer from both.

Candidiasis, Candida Related Complex, Candida Hypersensitivity, and Yeast Allergies are all names for what I call Yeast Overgrowth Syndrome, which I will shorten to YOS throughout the book. It’s a condition where yeast has overgrown and outgrown its natural environment in the large intestine and has invaded the small intestine. It is a health threat that remains untreated, mistreated, and if it’s ever recognized, it is undertreated. I call the protocol that goes with this book Yeast ReSet because a certain amount of yeast is natural to our body and we have to hit the ReSet button to achieve the right balance.

A syndrome is a group of symptoms that consistently occur together, or a condition characterized by a set of associated symptoms. Doctors don’t like syndromes – there are too many variables. They want one major symptom so they can make a disease diagnosis and treat with a disease-specific drug. YOS, with its dozens of symptoms, gets a deer-in-the-headlights look from most doctors who ignore it or just call it a fad.

Medicine has been calling YOS a fad for over 40 years and I’m tired of this oversight, since the definition of a fad is an intense and widely shared enthusiasm for something, especially one that is short-lived and without basis in the object's qualities. I think YOS has outlived its “fad” status and should be treated with the respect it deserves.

Do we really need another yeast book? Absolutely, because every patient, client and customer I’ve had over the past few years has had some level of YOS and most didn’t know it despite thoroughly researching their condition. It seems that even alternative practitioners are ignoring YOS in favor of genetic testing, hormone evaluation, and microbiome investigation. I say that the environment created by yeast growing out of bounds and producing 178 different toxins is the reason our genes are being triggered to misbehave and our hormones are out of whack and our bacterial microbiome is out of balance.
MY YEAST STORY
I grew up with a huge box freezer in the basement stocked with ice cream. I remember that most nights I did my homework accompanied by a staggering amount of ice cream and a can of syrupy peaches or pears. There were also the chronic sore throats and ear infections – tonsils out when I was around 6-years old and ice cream after the operation to keep the swelling down!

I first learned about YOS in my naturopathic training, which began in 1979. I could immediately spot my own relationship to yeast. A few years later, I read Dr. Truss’ book, The Missing Diagnosis, and Dr. Crook’s book, The Yeast Connection. Early in my practice, a patient of mine, bedridden by YOS, demonstrated the insidious nature of this condition when left untreated.

I became very involved with diagnosing and treating YOS in my practice. The Candida Foundation of Canada operated on the third floor of my office building in Toronto. At the Foundation, I gave monthly lectures to the public on Candidiasis and related topics. Because of my work with Candida, I was invited on a TV Ontario show called Speaking Out with host Harry Brown. On November 20, 1986, I was a guest with Dr. William Crook, one of my medical heroes. During that 90-minute program, an astounding 86,000 calls were tabulated. This more than anything convinced me of the epidemic of YOS and the desperation of people to find a solution.

After Dr. Crook passed away in 2002, his daughter, Elizabeth Crook, invited me to become the medical advisor to the Woman’s Health Connection and the website yeastconnection.com, and to finish the work on his last book, The Yeast Connection and Women’s Health. The yeastconnection.com website is still online as a source of information, but it is not an active site.

During my association with Elizabeth Crook, we encouraged Random House to allow us to do an updated edition of the 1986 Yeast Connection because the book is very much out of date, with Dr. Crook even recommending the artificial sweetener aspartame!

I thank Dr. Crook for his pioneering work on yeast and offer the most up to date approach to yeast with ReSet The Yeast Connection, which contains a much more complete and effective treatment approach, of which I’m sure Dr. Crook would approve!
Human Microbiome

The human microbiome is the collective genomes (genetic material) of the microbes (composed of bacteria, bacteriophage, fungi, protozoa, and viruses) that live inside and on the human body. The human microbiome outnumbers the cells of the human body – there are about 10 times as many microbial cells as human cells.

This book will bring you back to the basics and help you change your lifestyle to ReSet Your Yeast. I will also unveil a “magic elixir” that’s been overlooked in the treatment of YOS. I won’t make you wait until the end of the book to tell you, either. It’s my ReMag, liquid magnesium. Although I didn’t set out to create this 100% absorbed, non-laxative magnesium to treat yeast, I was thrilled to find that it is an integral part of an effective yeast protocol. You can read my free eBook about ReMag. It’s called Invisible Minerals Part I - ReMag.

With input from my patients, clients, and customers, I realized that people with magnesium deficiency find it’s next to impossible to lower their yeast levels. Here’s what happens. Toxic acetaldehyde produced by yeast addles your brain and magnesium is required in order to detoxify it. Unfortunately, brain fog can overcome your resolve to avoid carbs and you end up feeding your yeast. Also, without sufficient magnesium, acetaldehyde and a host of other yeast toxins keep your immune system all fired up causing collateral damage to many tissues in the body. Eventually your weakened immune system is no longer able to control your YOS and you develop more symptoms that doctors continue to misdiagnose.

My multiple mineral, ReMyte, also has a place in the Yeast ReSet Protocol. In later chapters of this book and Invisible Minerals Part II – ReMyte & ReCalcia you will find out more about yeast toxins cross reacting with endocrine glands, especially the thyroid. ReMyte is a multiple mineral, and 9 of its 12 minerals support effective production of thyroid hormones. The minerals in ReMyte also support optimum function of the immune system, adrenal glands, prostate, and brain.

ReSet The Yeast Connection will introduce you to an anti-yeast lifestyle beginning with a yeast-free diet. Another of my products is ReStructure, a meal replacement/protein powder that will help keep your diet yeast free.
Changing your lifestyle does take more work than just popping a pill, but it also has many other benefits. It’s another reason why doctors choose to ignore YOS; it takes much longer than their usual 7-minute appointments to consult with you about yeast.

I’ll go over the details of the Yeast ReSet Protocol in Chapter 6, but let me give you a brief outline immediately so you can see what it entails. You may already know you have YOS and just want to dive into the treatment that I’ll outline here. Some of you may want to read the rest of the story to understand how we managed to let yeast get the upper hand in our intestines, with its toxins spreading from head to foot!

YEAST RESET PROTOCOL

1. Yeast ReSet Diet
   a. Avoid sugar, gluten and dairy. See Chapter 5 for food lists and Chapter 11 for recipes.
   b. Use ReStructure whey protein powder
   c. Experiment with Fermented Foods
   d. Eat Anti-fungal Foods: garlic, onion, lemon, lime, daikon, cayenne, turmeric, ginger

2. Prescript Assist Soil-Based Probiotics

3. Yeast ReSet Detox Formula
   a. Bentonite
   b. Psyllium Seed Powder - (Note: 1 tsp powder = 1 TBSP husks)
   c. Antifungal (garlic, or caprylic acid, or grapefruit seed extract)

Yeast ReSet Support Formulas
ReAline (Antioxidant/detox) ReStructure (Meal Replacement)
ReMag (Magnesium) ReCalcia (Calcium since you will be eliminating dairy)
ReMyte (Multiple minerals)
RnA Drops (Making perfect cells)
Yeast Causes Everything
As you will see from the lists of symptoms given at the beginning of Chapter 4, yeast can potentially cause or aggravate most health conditions. It’s obvious to me that YOS has become epidemic. Allopathic doctors, however, don’t know anything about intestinal yeast. It wasn’t included in my medical school training in the mid 70s, and it’s still not discussed.

If your doctor does attempt to treat yeast, s/he will likely just give you an antifungal pill (drug or natural) and expect it to treat the problem. Some practitioners focus on a yeast diet as the only therapy. Others may say all you need is a special probiotic. The fact of the matter is that you need to do all three.

There are also associated therapies that can be harmful. One program promotes heavy use of saunas to “sweat out” the toxins, which can also sweat out significant amounts of magnesium and other minerals causing magnesium deficiency symptoms that are mistaken as yeast detox. In the Yeast ReSet Protocol, I recommend gentle detoxification using ReAline and ReMag.

I am in favor of coffee enemas as an assist to detoxifying yeast. However, you must research the application of coffee enemas and see if they suit you. Consult with a naturopathic doctor who knows your case if you have questions. If you undertake to do coffee enemas, only do one or two per week and make sure you do a retention enema of 2-3 ounces of water and the contents of 1-2 Prescript Assist capsules at the end of your coffee enema. This procedure will help you re-establish your gut flora that can be disrupted with a coffee enema.

You may be confused about how much treatment is required and how long to treat. Most people under-treat their yeast. When I’ve told clients they should go on a yeast protocol, many have said “I did that years ago” as if treating it once in the past has taken care of it for life. Or, they followed some form of yeast treatment that didn’t work, so they assume they didn’t have yeast in the first place and just resorted to treating their individual symptoms, not the whole picture. Many say they tried a yeast free diet and felt so much worse they gave it up.

You may have been on a grain-dairy-sugar-free diet for general health reasons, and not necessarily to get rid of yeast. This diet does “control” yeast and reduces YOS,
but it doesn’t eliminate the yeast. I call it “partially treated yeast” that will periodically flare with stress, overindulgence, or antibiotics, but nobody can identify the underlying cause, which is *YOS*. Partially treated yeast can be very frustrating because you know you are on a perfect diet and doing all you can to take care of your health, but when you do the detective work, there will always be a good reason for your symptoms flaring.

My main message is that yeast treatment can be a long-term project. An effective yeast protocol includes diet, probiotics, natural antifungals, and detoxification, and it may take several months. After that, you may have to repeat the treatment (for a much shorter time) if your symptoms return, if you have to take an antibiotic, or if you go on vacation or a food binge and eat and drink yourself into *YOS*.

Yes, it is unfortunate that you may need long-term treatment, but fortunately, the treatment does work when you learn how to apply it properly. The good news is that by doing the combined approach of diet, probiotics, natural antifungals, and detoxification, you don’t have to be quite so strict on diet.

**The Incidence of Yeast Overgrowth Syndrome**

In the past several decades, it’s no exaggeration for me to say that the vast majority of people who approached me for telephone consultations suffered from *YOS*. So much so that I began saying Yeast Causes Everything! *YOS* symptoms are often treated with drugs that simply cause more yeast overgrowth and more symptoms. I think yeast is the basis of much of the chronic disease the population suffers. The fact that most doctors don’t recognize this problem has caused untold suffering in patients who go undiagnosed, untreated, or inappropriately treated.

Many other theories have been proposed to explain the health decline among the North American population. Some even argue that there is no decline in health and insist we are living longer than ever before. But statistics and headlines argue a different point entirely. No one can ignore the fact that the U.S. ranked 37th out of 191 countries in health care systems by the World Health Organization in 2000!

One likely reason for our failing health that everyone seems to agree on is chronic inflammation. Did you know that *YOS* and magnesium deficiency are two major causes of chronic inflammation?
The cover story blazing through flickering flames on a February 2004 issue of TIME magazine warned the public about “The Secret Killer: The Surprising Link between Inflammation and Heart Attacks, Cancer, Alzheimer's and Other Diseases.” The introduction to the story was just as dramatic: “The Fires Within - Inflammation is the body's first defense against infection, but when it goes awry, it can lead to heart attacks, colon cancer, Alzheimer's and a host of other diseases.”

Doctors and drug companies are now researching inflammation and not cholesterol as the cause of heart disease. They claim they don’t know what’s really causing the inflammation, but that doesn’t stop them from prescribing drugs to suppress it. Why has the body’s defense system suddenly gone awry? What’s causing this epidemic of inflammation and inflammatory diseases? And what exactly causes inflammation?

When I say that the epidemic of inflammation is due to YOS, I’m talking about intestinal yeast overgrowth. I’m not talking about yeast vaginitis in women. However, intestinal yeast is usually the underlying cause of chronic yeast vaginitis. Most doctors know nothing about YOS. They just throw up their hands and say the cause of inflammation is unknown and just hope to treat it with more drugs. In natural medicine, we think of widespread inflammation as toxicity. We also know that drugs are toxic. So, the question is, how can you treat toxicity with more toxins? To a natural medicine practitioner, it just doesn’t make sense.

Inflammation is the body’s response to injury and infection, but medicine doesn’t seem to recognize the numerous ways we are injuring and infecting our bodies every day. We injure our bodies with too much sugar, too many simple carbohydrates, too much alcohol, too much calcium, and not enough magnesium…all known causes of inflammation. We injure our bodies with an overwhelming load of toxins (there are about 60,000, mostly untested, chemicals in our environment): antibiotics and medicinal drugs; fluoridated prescription drugs that irreversibly bind magnesium; mercury fillings and vaccines; lead in gasoline; chemical fertilizers contaminating most of our food supply; and GMO foods that have taken over the food chain and become foreign chemicals in our body. We are exposed to an enormous number of infectious organisms every day.
Allopathic doctors say they don’t know what causes inflammation; natural medicine doctors say it’s a combination of all the above toxic factors, but I say that yeast is a more sinister threat lurking in your body. Also, environmental toxins can overwhelm the immune system and switch on an invasive form of yeast organisms that are stealth invaders that overwhelm our defenses from the inside, exponentially adding to our toxic load.

In the TIME article, there was no discussion of the inflammatory role played by a yeast, Candida albicans, that can grow out of control under the influence of drugs, chemicals, stress hormones, sugar, and carbs. In what appears to be a concerted effort to ignore YOS in our population, conventional medicine has not informed practicing doctors of the devastating danger of yeast.

The hardest crime to solve is an inside job. In the case of YOS, we harbor an organism that is a normal inhabitant of our body that is naturally able to evade detection until it’s too late. That’s right: yeast have what’s known as “fungal cloaking devices” that help them elude the immune system. When the immune system is differentiating between friend and foe, it will identify bacteria and viruses as invaders but skip over yeast because it’s part of our normal flora. Their cloaking device is part of what they are. However, the fact that yeast runs wild in individuals who are immune-compromised with cancer or AIDS means that the immune system does have mechanisms that hold yeast in check.

One of yeast’s normal functions in the body is to break down dead and dying tissues, intestinal bacteria, and ultimately helps break down living organisms when they die. Another normal activity is the production of 178 different chemical antigens that can be absorbed into the blood stream and set up a never-ending inflammatory cascade (an antigen is a toxin or other foreign substance that induces an immune response in the body, like the production of antibodies). Yeast organisms do all this in the dark, moist mucus membrane tissues that become a perfect habitat for them.

Humans have lived compatibly with yeast for millennia, but it’s only in the past seventy years, since the widespread use of antibiotics, that yeast has crossed the line and become the enemy. Yeast invades mucus membranes and orifices, and YOS may also be responsible for the monster bacteria that become resistant to antibiotics.
I’m not just interested in curtailing your yeast population but also in strengthening your immune system, your mineral stores, and restoring your intestinal bacterial flora. If you just set out to kill yeast but don’t change the intestinal environment and your immune system, yeast will return.

Some folks argue that they hardly ever took antibiotics; however, according to Dr. Melissa Phillips, using antibiotics, even one time, can result in decreased beneficial bacteria and an increase in harmful bacteria such as Clostridium difficile and the yeast Candida albicans. She says, “such shifts in microbiota can cause yeast infections and GI symptoms including bloating, abdominal pain, and diarrhea, but recent work suggests the consequences may be much longer-lasting and more serious.”

Yeast researchers admit that there is limited understanding of when, why, or if the immune system attacks yeast when it overgrows. The gut yeast live in equilibrium on the epithelial (skin) layer of our internal and external tissues along with immune cells. In this equilibrium, the yeast are in a fairly quiescent bud-like stage. That balance is overturned when you take antibiotics, killing good and bad bacteria, which creates an unbalanced environment in the gut that allows greater growth of yeast and unleashes its mycelial (thread-like) invasive stage.

The complex factors involved in transforming yeast have yet to be properly researched. One important factor is that when the intestinal environment becomes more alkaline, yeast is able to switch to its mycelial invasive form. This fact really pokes holes in the dietary theory that optimum health is related to a more alkaline body. It underscores the fact that we should not swing fanatically from one end of the spectrum to the other.

I’ve always been wary of an extreme alkaline diet and the practice of testing your urine and saliva pH to make sure it stays alkaline. Blood, urine, saliva, and tissues all have their own optimum pH, and it’s impossible to speculate what’s happening in your blood and tissues from urine and saliva pH. What I do know is that a raw food diet of vegetables and fruit and a diet that relies on green smoothies creates a cold and damp intestinal environment that favors YOS. Proponents of these diets are fond of enticing people to their lifestyle by saying you can eat all the fruit you want because they are all-natural! However, a diet high in fruit sugar is ideal for yeast proliferation. It also puts a
huge strain on your liver, which is forced to metabolize fructose, unlike glucose, which is shunted to our cells by insulin.

The stomach environment is mostly acid, and quite necessary to digest food and kill parasites or yeast that you might ingest. If you take baking soda and drink alkaline water to make your body more alkaline you simply neutralize your stomach acid. Another fact about acid-alkaline balance in the body is the way in which probiotics regulate acidity in your intestines. Lactobacillis acidophilus bacteria are the most common beneficial probiotic and they increase the acidity of the gut in order to slow down the growth of yeast.

**Can We Adapt to Antibiotics?**

Actually the better question is, do we even want to! Scientists say that not enough time has passed since we began using antibiotics and changing our gut flora for us to develop a proper defense against bacterial dysbiosis and YOS. With only two generations since the discovery of antibiotics they say it’s impossible for us to evolve in a way that protects our bodies. Such a defense system could take hundreds of years. Yet these scientists offer no present-day solutions.

When I interviewed a yeast scientist (who wanted to remain anonymous) for this book, he was critical of me telling people to: 1) avoid yeast-promoting foods, 2) take probiotics, and 3) take natural antifungals. He was especially negative about the yeast-free diet. He couldn’t possibly see how avoiding yeast in foods could affect the yeast in the body. He didn’t understand the concept of cross-reactivity; even though it was outside his field of expertise, he still felt I was “wrong.”

I told him that my patients and I didn’t have 100 years to wait for an answer from scientists or for the body to adapt to antibiotics. I’d rather use the clinical experience of a growing number of practitioners who are wise enough to see the threat of YOS and take steps to treat it.

Doctors are becoming more aware of the growing antibiotic resistance of bacterial organisms, giving them a free pass to invade your body. That alone is reason enough to cut back on their use and find safe, natural alternatives. The first antibiotic, Penicillin,
was prescribed in 1941, and it didn’t take long for doctors to notice resistance to the drug and yeast overgrowth.

For decades, medicine has failed to identify YOS as a disabling disease because it is primarily caused by drug side effects (antibiotics and cortisone) and it is not readily treated by drug therapy. Most doctors do not want to be accused of making people sick, so they turn a blind eye to many drug side effects. Also, they have never been trained in diet therapy, which is very important in the treatment of YOS. YOS is not something doctors learned about in medical school, so unfortunately your doctor was never exposed to this information. The Microbiome Project continues to sweep yeast under the carpet.

There is one light at the end of the tunnel that may help solve the problem – or at least get the medical community involved - changing the name of Yeast Overgrowth Syndrome to Fungal Microbiota Dysbiosis.

“Fungal Microbiota Dysbiosis Seen in Inflammatory Bowel Disease” is a 2016 study from Hospital Saint-Antoine in Paris and published in *Gut*. Investigators followed patients with inflammatory bowel disease (IBD) and found an imbalance in their fungal intestinal microbiota. The above Medscape article quoted Dr. Harry Sokel who said "The fungal microbiota is a new actor to take into account in the pathogenesis of IBD and potentially in other diseases."

Fungal microbiota are not new actors on the bowel scene at all. When I wrote *IBS for Dummies*, I described the continuum from IBS to IBD. I think the major factor in IBS is YOS, and if left untreated, some people’s IBS can develop into IBD.

WebMD defines IBD as a disease with an unknown cause. The author says that some agent or a combination of agents – bacteria, viruses, antigens – trigger the body’s immune system to produce an inflammatory reaction in the intestinal tract. IBD could also be an autoimmune response to the body’s own tissues.

The investigators on this study say that bacterial dysbiosis – or imbalance – is known to occur in IBD with a decrease in Firmicutes bacteria and increases in some types of Proteobacteria, including *Escherichia coli*. They also found an increased ratio of Basidiomycota to Ascomycota (fungi), higher levels of pro-inflammatory fungi, such as *Candida albicans*, and lower levels of anti-inflammatory fungi, such as *Saccharomyces cerevisiae*.
Dr. Sokol concluded that the fungal microbiome could be a target for treating IBD; however, the next steps were not to offer treatment, but “to experimentally understand the effect of fungal components of the microbiota on the host and also the dialog with bacteria within the gut. This would help define an appropriate therapeutic strategy targeting the fungal microbiota." Although they are no closer to treating YOS, at least researchers are entertaining the possibility that Candida is involved with intestinal dysbiosis and colon health. Unfortunately, the most common antifungal drug, Diflucan, is a fluoride compound and fluorine atoms combine with magnesium, making it unavailable to the body.

The Seven Questions
In medical school, we never learned The Seven Questions that can be used to diagnose YOS. Dr. Santleman found that the following seven questions, taken from Dr. Crook’s Candida Questionnaire, were sufficient to confirm a working diagnosis of YOS. They provide a good introduction for you to understand the cause of YOS.

1. Have you, at any time in your life, taken "broad-spectrum" antibiotics?
2. Have you taken tetracycline or other broad-spectrum antibiotics for one month or longer?
3. Are your symptoms worse on damp, muggy days or in moldy places?
4. Do you crave sugar?
5. Do you have a feeling of being “drained”?
6. Are you bothered with vaginal (or penile) burning itching or discharge?
7. Are you bothered by burning, itching or tearing of eyes?

If you can answer No to all these questions, you have avoided the plague of the century. But if you’re like most of my patients, and answer in the affirmative to two or more of these questions, you are battling monsters that have taken over your body. Yeast is the modern day body snatcher.

I usually add another question to the above list: “When did you last feel well?”
Often the timing coincides with the intake of antibiotics, surgery, or hospitalization. Also, itching can occur in and around any mucus membrane: eyes, ears, throat, anus and any skin surface where yeast can grow or yeast toxins can be excreted. There are also sugar cravings, which can include carbs of any shape or size.

I’ll go into more details in Chapter 4 about The Seven Questions, also called the Fungus Related Disease Questionnaire-7.

It is mostly women who fight this battle openly, but men are just as susceptible to YOS as you will see in Chapter 10. Unfortunately, when a woman with YOS strenuously demands that a doctor listen to her complaints and help her find out what’s wrong, the doctor often makes a short entry into her chart that she is neurotic and fighting to be diagnosed with a disease that doesn’t exist and she should accept the fact that she is depressed and needs antidepressants!

I remember that before Chronic Fatigue Syndrome was accepted by mainstream medicine as a physical diagnosis, the psychology journals regularly published papers dissecting the personality of Chronic Fatigue patients never admitting that infections, toxins, and nutrient depletion trigger most cases.

The “emerging diseases of civilization” require education in the treatment of low-grade infection, toxicity, and nutrient depletion, which most doctors are quite unable to address. If these diseases are recognized, treatment with medications to suppress the symptoms often complicates the picture with drug side effects that usually make people feel worse – not better. Studies show that only about 4 percent of doctors recognize drug side effects and when a patient complains, instead of removing medications, they increase the dosages or add more drugs to the swirling pot of poison. I call the total decline in health Total Body Meltdown.

Yes, I’ve painted a very startling and stark picture, but only to show you I understand the full implications of what you are suffering. The good news is that there is light at the end of the tunnel. The worst is over! YOS is treatable and can be conquered, and I’ve been doing just that with my patients and clients for over thirty-five years.

In 1991, I published a report called 2,000 Cases of Candidasis. Long before that, I began refining the best way to overcome yeast. I know it can be treated and I know you can beat it. I know you can get your life back. Recognizing yeast is the first step.
It’s the lack of diagnosis that worries most people with YOS. When your doctor doesn’t know what’s wrong with you and when friends and family don’t believe that you are ill, you feel very lonely in your quest for health. You may begin to doubt yourself, which adds to your stress and anxiety.

Many patients and clients have also been partially treated for yeast and think their case is hopeless because the treatment didn’t work. You can overcome YOS if you treat it with diet, probiotics, natural antifungals, detoxification, and nutrient repletion. Using only one of the five approaches can lead to the yeast winning the battle! Using them all together is the key to good health.

YOS is an abomination. It’s a disease that shouldn’t exist, but it does. It exists because our society creates it and then covers up the crime. My focus in this book is to remind you that yeast is the basic underlying, but largely ignored, cause of a tremendous amount of disability. And because the treatment is not a pill to pop – as we have been brainwashed to demand – most patients do not get the treatment they require in order to bring their yeast under control.

Because the treatment of YOS is not a pill but instead involves a lifestyle change of a yeast-free diet, probiotics, a natural antifungal, detoxing, and adding nutrients, doctors just don’t have the time to discuss a long treatment approach with you. A very safe and effective solution is ignored. This book will help you grasp that you are in charge of your own wellness and show you how you can achieve health on many levels when you get your yeast under control.

You’ll learn that you can start and stop this program as required. You can start it when you “go off the wagon” and then get yourself back in balance. It’s a workable program and it will make so much sense when you understand what yeast really is and the ways it can overtake your body. Remember, Yeast ReSet is the treatment you reach for whenever you take an antibiotic, or after the holidays, or after traveling when your body is crying out to get back in balance.

Yeast ReSet is a weight loss program as well as a way to retrieve your mental balance and concentration. I know that brain fog is a very real and tragic part of YOS, so I will be very clear and very precise in what I tell you. You’ll simply follow my treatment protocols to the letter, and as you start to feel better, you’ll be back in charge of your
health, your life, and your brain. Let me say it again: you don’t have to suffer anymore. The worst is over.

Underweight and YOS

It’s not common, but some people with YOS are underweight. Their biggest concern is losing more weight on a yeast-free diet. If you have maintained your weight with bread, pasta, and sweet vegetables (potatoes, sweet potatoes, corn, etc.), and you have to avoid them on your yeast-free diet, I recommend a high-fat diet. Such a diet includes avocado, olives, nuts, non-lactose dairy, coconut oil, olive oil, fatty fish, etc.
SECTION ONE: ALL ABOUT YEAST

CHAPTER 1: THE PERSONAL SIDE OF YEAST

You can read about all the books and left-brain information about a condition, but often it doesn’t strike home until you read about someone else’s personal experience.

Gwen’s Story

Gwen slowly walked into my office, head down and biting her lip. “You are the tenth doctor I’ve seen for the umpteenth vaginal infection I’ve had in the past ten years,” she blurted out. “I think there’s much more wrong with me than a just a simple vaginal infection.”

Gwen stared at me almost defiantly. I could see she had really been through the ringer. I understood now why her gait was more like an exhausted shuffle than a walk; with her chronic vaginal symptoms, she was probably in a lot of pain. Gwen had huge bags under her eyes from sleeplessness. Pasty, puffy, pale skin was a sure signal of improper nutrition and her edginess and an extra twenty or so pounds suggested to me she was binging, probably on sugar. She pulled a tissue from her bag and blew her nose. “Sorry, I’ve got a cold. Again. This is the third one this winter.” She rushed on when I didn’t interrupt her, “I’m such a wreck; I’m exhausted all the time yet I can’t seem to sleep. And there’s more.”

I gently ushered her to a chair. She seemed a bit surprised when I showed her to an armchair close to mine and not on the other side of my desk. “Why don’t you start at the beginning?” I asked. I settled back in my chair, focusing all my attention on Gwen.

She looked at me with disbelief. “How much time do you have? This is a long story!” I smiled. “You have as much time as it takes.” Tears immediately came to her eyes, and I must admit to mine, too, as the barriers between us dissolved and Gwen knew she was with someone who would finally hear her out.

“Do you mind if I use my notes?” she asked a little hesitantly. She quickly added that, “Most doctors get a bit upset when they think I have a long list of symptoms.”

“Keeping notes or even a diary is a great idea,” I said encouragingly. “Most of my patients find notes help because of their brain fog and poor concentration.” Another look
of surprise swept across her face. “That’s what I have, a foggy brain, I’ve never heard anyone call it that before. What is that all about?”

“Now we’re getting ahead of ourselves, let’s start from the beginning so we can see the whole picture,” I cautioned. Gwen sighed and settled back, anxiety and tension dissolving from her face and body. She took a big breath and embarked on a story that would make the angels weep.

“I said I’ve had non-stop yeast infections for ten years; I’m thirty-three now but I had my first vaginal symptoms when I was only seven years old.” She twitched in her chair as if remembering those painful times.

Gwen continued. “I had an itchy and sore vagina for months, I’d often scratch myself and make it worse.” She looked a embarrassed and said, “When my mother would catch me scratching she would bat my hand away and tell me I was a bad girl, so I was afraid to tell her what was happening. I thought there was something really wrong with me.”

Taking another deep breath, Gwen said that, “When I finally got up the courage to tell my mother that I thought I had cancer, she was very concerned and rushed me to the doctor.”

“Let me ask first,” I interrupted, “what had been going on with your health before you started to get the vaginal itching?”

“I’ve been trying to remember that,” Gwen said thoughtfully. “I even asked my mother. It seems I was a sickly child with ear infections from the time I was born.”

“Were they mild infections or were they treated with medications?” I queried. “You mean antibiotics?” she asked. I nodded. “Yes, lots of antibiotics,” she said.

“Were you breast fed? Did your mother tell you?” I asked. Gwen began with a smile that turned to a grimace; she sighed again. “My mother said she was very upset that she couldn’t breast feed me, she had wanted to but I had so much gas that my stomach used to blow up like a balloon. The doctors told her I was allergic to her milk.” She continued, “It seems I was still going through formula changes when I moved on to solid foods at around six months! And then I turned out to be a very picky eater and I only liked bread and sweet things.” Gwen laughed and said, “Even so, my Mum used to joke that I was a health nut because I loved to eat plain yogurt, nobody in the house could
stand it but me. I think she was trying to make me feel better because I was always sick and I was pretty pudgy, even as a kid.”

Then, after looking at her watch, Gwen hurriedly added, “Mum told me that I used to get about five colds a year and had to take antibiotics because they would turn into bronchitis. But when I developed eczema, a doctor told her to get rid of all the rugs and stuffed toys and even our dog and cat because I was close to developing asthma. I remember I even had to stop eating yogurt because he said dairy products could be causing my constant colds.”

She had been on the edge of her chair to give emphasis to her last statement but she flopped back, exhausted, and said, “It was a shortly after we saw that doctor that I started to itch. The doctor just asked me if it hurt to go to the bathroom, and I said it did, and he asked if I liked bubble baths, which I did, so my Mum and I left his office with a prescription for an antibiotic for a bladder infection and a warning not to take bubble baths.” She was almost in tears again and exclaimed, “The antibiotic didn’t help at all.”

Gwen glanced down to consult her notes but she suddenly looked up quizically and demanded, “What on earth was going on with me? Nobody seems to be able to tell me.”

“Believe it or not,” I began slowly, “I’ve heard many people, mostly women, tell me a similar story.”

“No kidding,” Gwen blurted out. She paused, shook her head, looked out the window for a second and gave me her first genuine smile and said, “Wow, that makes me feel better already.”

With that very positive opening, I felt Gwen was ready to hear some of the facts about yeast and how it had become the “enemy within”. I told Gwen that we are not alone! Candida albicans is a fungus and a close relative of mold and yeast. That’s why it’s often called a yeast infection when it overgrows. Candida is one of the 500-1,000 organisms that live in our mouths and digestive tracts, and most of the time they all get along with each other.

However, there is something that happens to the whole delicate balance when you take antibiotics. The good and the bad bacteria are wiped out in your intestines and the yeast are left unharmed. In the absence of any competition, they grow into all the empty
nooks and crannies. They love sugar, bread, and alcohol, often making a person crave these foods.

Gwen’s eyes widened as she got the picture of what had been happening to her gut ever since she was an infant. She looked down at her abdomen and exclaimed, “I know what baking yeast can do; I bake my own bread!” She then wanted to know, “Does this Candida yeast produce gas bubbles like baking yeast?” I nodded, happy to see how quickly she got the picture of what yeast does in the body.

“So,” she said, leaning forward eagerly, “When I was a baby I had an ear infection, practically when I was born, and taking antibiotics made my intestines a great place for yeast to grow and cause a lot of gas…and,” she paused to take a breath and asked, “Is that why I had so much trouble with gas and milk and everything?”

“Yes,” I said, “Yeast love to eat sugar and milk contains milk sugar, formulas usually have extra sugar in them, like corn syrup. So, they were all feeding your yeast.” But I added, “I remember you said that you used to love yogurt?” She nodded. “Well,” I said brightly, “Yogurt is loaded with good bacteria, the kind that keeps yeast from growing out of control. When you ate yogurt it probably kept your symptoms to a minimum, then when you stopped all dairy products you began to develop vaginitis.”

Gwen’s only response was, “Unbelievable.”

People with lactose intolerance often unnecessarily avoid yogurt. It contains more natural sugars than cheese (approximately 13 grams of lactose per cup of plain low-fat yogurt and 8-9 grams of lactose per cup of plain Greek yogurt), but the probiotics in yogurt actually help to digest the lactose for us.

When Gwen recovered from her shock, I had a question for her. “Tell me,” I asked, “Did your mother ever say she was bothered by yeast infections?”

“Oh, yes,” Gwen nodded, “She said she even had one when I was born.”

It was my turn to sigh. I told Gwen that I have seen infants who appear to have become infected with yeast from their mother’s vaginal canal and it has been misdiagnosed as a bacterial infection and mistreated with antibiotics, just like she was.

Gwen let out a groan like she was punched in the stomach. “You mean…why didn’t the doctors tell us, why didn’t they know?” She whispered, “What a waste…”
I was used to this phase of a new patient interview. Once you realize that you have been misdiagnosed and suffering for so long, you realize how much of your life has been caught up in symptoms of ill health.

I didn’t let Gwen stay in that place of regret and despair for long. I told her gently, “But now you know and now you can do something about it. Many people never even get that far in their journey back to health.”

Gwen wiped her eyes, and with a determined look in her eye, said, “Yes, you’re right, let’s get on with it. What can I do to get rid of this monster?”

“There is more I need to know about you and your symptoms,” I cautioned. Referring to my own notes, I said, “Were you ever treated for the vaginal itch that you had when you were seven?”

Gwen said, “As a matter of fact, until you pointed it out, I never realized before that I got them after I stopped yogurt. But I fought so much with my mother about the yogurt that she let me have it again and, you know something, I think that’s when the itching went away!” She slumped again and added, “Then when I started having my periods it came back again. The week before my period was a disaster; it got so bad all I could do was sit at my desk all day and try not to scratch, so I had to go to the doctor.”

Gwen tilted her head and looked up for a moment then continued, “Actually I wanted to get out of phys ed classes and the teacher said I had to get a doctor’s note.”

“What happened?” I asked gently. “It was horrible,” she grimaced. “I had to have an internal exam, my first one. I squeezed my mother’s hand so hard I think I gave her a bruise!” She sighed, “I’ll never forget the doctor’s face, a lady doctor, I would never have gone to a man. She looked very sad and told me and my Mum that I was very red and swollen and I did have a discharge, which she would send away to be tested.”

“What did they find? I prompted. Gwen shook her head side to side in slow motion then said, “You know, they found yeast. They knew back then I had yeast. But I had to keep using some anti-yeast cream every month because it kept coming back.” She looked at me a bit accusingly. “So, if I do have yeast and I was being treated for yeast, why didn’t it work?”

“Let’s go back to your periods,” I said. “The hormone estrogen stimulates yeast growth, so, at times of the months when the estrogen levels are highest, which is before
the period, if you have excessive yeast in your body anyway, it will grow even more out of control.” I could almost see a light bulb above Gwen’s head when she asked, “Are birth control pills made from estrogen?”

“Yes,” I said. “Most of them are. Why do you ask?”

Gwen seemed like she was enjoying being a detective in her own health mystery and said, “When I started taking the pill for really bad PMS and menstrual cramps, my itching was there all the time and what had only been staining became a real discharge. So now I had headaches and really sore breasts before my period and painful cramps that made me throw up when my bleeding started, and the discharge. I was also getting more irritable and even depressed at times.”

I told Gwen, “You’ve opened up something that few doctors even know about.” I explained that the yeast, Candida, produces 178 toxic chemical antigens, which can be absorbed into the blood stream and cause symptoms from head to toe. People can be allergic to yeast itself, allergic to some or all of the 178 different byproducts, and have gas and bloating of the intestines due to YOS. Some of the byproducts mimic hormones or block hormones and lead to PMS, menstrual dysfunction, perimenopausal symptoms, thyroid dysfunction, and sexual dysfunction. Many more women than men are troubled by yeast. One reason is that women have three times the mucous membrane surface of men. Also, the natural female hormones, estrogen and progesterone, favor the growth of yeast. Taking estrogen or the birth control pill stimulates yeast growth.

Symptoms of YOS number in the dozens because they affect every body system. They include allergies, fatigue, sugar cravings, intestinal gas and bloating, frequent colds, skin rashes, and joint pain. I told Gwen that I would give her a Candida Questionnaire that would help identify all her symptoms.

Gwen chimed in and said that when she tried to tell her doctors about her many different symptoms and ask if they were related, they just wanted to send her to an allergist for her allergy symptoms and gave her a hemoglobin blood test for her fatigue. They laughed and said everyone had sugar cravings. About her gas and bloating, they just said it was normal to have gas. She said she usually never got beyond that point and never got to ask why she had so many colds. Cortisone creams for her skin rash just made
it worse and, as for joint pain, she refused a referral to see an arthritis specialist – arthritis at her age – ridiculous!

“Now,” I said, “I think you have enough information that we can move on. We’ll do a physical examination first then give the Candida Questionnaire that you can bring back on your next visit in one week. It’s also important that you keep a food diary this coming week. If you can, also write down how you feel after you eat and what your cravings are. Don’t make any changes or do anything different this week and put it all down in this booklet.” I handed Gwen a small notebook and ushered her into the examining room.

Happily, the physical exam did not turn up anything untoward. She was twenty-five pounds over her optimal weight, but apart from that and puffiness caused by fluid retention common in yeast patients, there were few outward signs of all the inner distress. A vaginal swab was sent off to the lab and routine blood work was done. I was also happy that another patient was on the way to getting her life back. Of course, it would take courage, will power, and a desire to change on Gwen’s part, but I could tell that she was ready to make the leap and take back control of her health.

I have hundreds of stories and have consulted with thousands of people over the past 30 years. Each person’s story has a different twist but they all fall into the category of YOS. Following is The Downward Spiral of events and circumstances that mark a person, male or female, for YOS. Many clients have told me that they see their story very clearly is in these words.

THE DOWNWARD SPIRAL

1. Diaper rash, caused by Candida albicans (yeast), is mistakenly treated with cortisone creams, which encourage further growth of the yeast.

2. Childhood ear infections can begin at birth as yeast infections picked up from the mother during delivery. Most ear infections are treated with antibiotics.

3. Ear infections may become chronic and require multiple courses of antibiotics, leading to diarrhea and intestinal yeast infections.

4. Anesthetics used in surgery to place tubes in the ears add another toxin.

5. Colic can develop due to antibiotics.
6. Inability to digest milk due to an irritated bowel leads to frequent changes of formula and further irritation.

7. Gas and bloating can result from hard-to-digest soy formula.

8. Eczema, aggravated by food sensitivity, is suppressed with cortisone creams while it encourages yeast.

9. Allergies to foods, especially yeast, wheat, and dairy, can arise from poor digestion and lead to more YOS.

10. Asthma, which may be environmental and can be yeast-related, is treated with medications including corticosteroid inhalers.

11. Multiple colds and flus are mistreated with many courses of antibiotics.

12. Annual flu vaccines contain mercury preservative, which acts like a powerful antibiotic and encourages yeast.

13. Cravings for sweets can be caused by YOS and may cause or aggravate hyperactive behavior in children.

14. Dental cavities lead to multiple mercury amalgam fillings still used by almost 50 percent of dentists. Toxic mercury vapor may be inhaled or absorbed, disrupting enzymes in the brain, kidneys, and liver and acting like an antibiotic and creating YOS.

15. Allergic reactions are treated with allergy shots, antihistamines, and cortisone sprays.

16. Many adolescents take long-term oral antibiotics for acne, adding to their yeast population.

17. Many teens and young adults develop mononucleosis, and up to 20 percent never feel quite as healthy again.

18. Bladder infections are treated with antibiotics, which cause vaginal yeast infections and intestinal YOS.

19. Birth control pills cause chronic vaginal yeast infections, which are mistreated with antibiotic creams and pills.

20. The high levels of estrogen during pregnancy encourage vaginal yeast infections.

22. Chronic sleep deprivation is common in all parents of small children and is a major stress on the immune system.

23. Irritable bowel syndrome can develop after a bout of diarrhea (attributed to traveler’s diarrhea or food poisoning) and is usually treated with antibiotics.

24. A leaky gut occurs when budding yeast from the large intestine grows into the small intestine. It shifts from a budding stage to a tissue invasive stage and pokes holes in the intestinal lining. Undigested food molecules are absorbed along with up to 178 toxic chemical antigens.

25. Chronic sinus infections (97 percent are fungal, according to the Mayo Clinic) occur due to lowered immune system and are mistakenly treated with antibiotics.

26. Hypothyroidism often occurs because yeast toxins cross react with thyroid tissue and block thyroid receptors. In the majority of people, it remains undiagnosed and untreated.

27. Hospitalization for infections or surgery usually warrants intravenous antibiotics and a host of other drugs that cause YOS.

28. Major colds and flus can lead to bronchitis and pneumonia, which are treated with strong antibiotics.

29. Chronic fatigue syndrome and fibromyalgia are treated with anti-inflammatories, sleeping pills, and antidepressants, which add to the toxic load.

30. Environmental allergies with extreme sensitivities to inhalants, especially perfumes, colognes, household products, pesticides, and molds, can be caused by yeast in thread-like form growing into the mucus membranes of the nasal passages. The usual treatment is corticosteroid inhalers.

31. Dysmenorrhea, irregular periods, infertility, and worsening premenstrual symptoms occur due to a buildup of toxins and lack of nutrients.

32. Infertility is treated with an array of synthetic hormonal drugs, which encourage yeast growth.

33. Depression, anxiety, panic attacks, and palpitations are self-medicated with alcohol and treated with antidepressants.

34. Menopause is medicated with synthetic hormones.
35. Prostatitis in men is an inflammation of the prostate gland that is often driven by yeast and yeast toxins.

Charlotte’s Story
Charlotte is one of those women whose irrepressible energy lights up a room, but life has not been easy for this thirty-year-old mother of three. In 1995, Charlotte’s life came crashing down. Her mother had just died of breast cancer and doctors told Charlotte that a breast biopsy showed very early signs of cancer. They offered her a bilateral mastectomy to try to prevent the disease. Charlotte thought she was doing the right thing and wanted to avoid the constant state of anxiety while she waited for cancer to strike. She also wanted to put an end to the painful mammograms and biopsies that she was forced to undergo every year – sometimes twice a year.

Charlotte didn’t feel sick going into surgery, but after reconstructive breast surgery followed by a year of antibiotics, she was a mess. Thirty pounds overweight with crushing fatigue, she was bloated and housebound with bowel problems and close to becoming an alcoholic trying to drown her problems. She was finally diagnosed with irritable bowel syndrome but was given no successful treatments for any of her symptoms.

Charlotte explained that she never watches TV, but she said by some miracle she turned on the set one day in 2000 to hear Dr. Crook speaking directly to her about all the symptoms she was experiencing. After buying Dr. Crook’s book and going on the anti-yeast diet, Charlotte couldn’t believe the miraculous change. She found out that her IBS was really leaky gut and she had to be very strict with her diet to get it under control and keep it under control. Weight that she had given up trying to lose just seem to melt off along with the bloating and the fatigue and a dozen other symptoms that she thought were just the way she was.

This downward spiral may describe your story or that of friends or family members. I hear about these cases every day, stories that bring tears to your eyes about women and men who are chronically ill and have widespread symptoms that have been ignored or misdiagnosed and mistreated. They have nowhere to turn.
Most people tell me that their doctor doesn’t believe in yeast. If a patient can talk a doctor into giving a safe antifungal prescription like nystatin, they are usually not told that a diet and probiotics are also crucial to a beneficial outcome. Those people tell me that when a prescription of antifungal medication didn’t work their doctor would say they didn’t have YOS in the first place, leaving them still sick and even more confused.

Many people have gotten so desperate that they send an email or pick up the phone to pour their heart out to a “stranger” and beg me to tell them what to do about their exhaustion and head to toe symptoms.

Cathy’s Story
Cathy emailed saying she had a quick question and gave me her life story in about 200 words. A single mother in her late 30’s, she described herself as overweight with fibromyalgia, chronic back pain, hypertension, headaches, vaginitis, insomnia, heartburn and burning feet. She didn’t list them, but said she was taking numerous meds. She wanted to launch into a weeklong detox. She said her back pain and burning feet keep her from exercising, so that wasn’t an option. Since she had tried every diet pill, diet, and weight loss plan, she had just about given up.

Cathy was probably in the category of “Too Toxic to Detox”, but I said if it were me, I’d start with ReMag for some pain relief, gentle detox, headache relief, hypertension treatment, and sleep before gradually beginning a yeast detox program. In Cathy’s case, she would begin by slowly avoiding the yeast-growing foods and taking oral Bentonite to absorb yeast toxins as the yeast died off without their normal sugar and carb diet.

Larissa’s Story
Larissa, in her late 20’s, emailed about her 2-year long chronic yeast vaginitis. She kept getting the same vaginal medications over and over with no relief. She had major concerns about being able to get pregnant with this chronic infection. She found intercourse too painful and couldn’t imagine giving birth. I told her about a simple boric acid douche that would help her symptoms while she embarked on reducing the yeast overload in her intestines.
Larissa’s doctor failed to recognize the source of yeast that kept repopulating the vagina. Larissa had \textit{YOS} in the intestines, which became the focus of her treatment. She would follow the yeast-free diet and take probiotics and stop constantly repopulating her vagina with yeast.

A recent client had a whole laundry list of symptoms that she wanted to eliminate. Weight gain (in excess of 100 pounds) was her major concern, but since I asked for her complete health history and everything that was bothering her, she sent the following: brain fog, memory loss, poor concentration, continuous headaches, oral thrush (yeast growth in the mouth), burning mouth, bad breath, sore throat, itchy ears, itchy eyes, itchy anus, indigestion, bloating and gas, frequent urination, diarrhea, joint pain, athlete’s foot, toe nail fungus, exhaustion, and waking in the morning feeling hungover.

Imagine taking this list to your HMO doctor and barely getting into the first three symptoms when your 7 minutes are up. Because you start with brain fog, memory loss, and poor concentration, you are handed a prescription for an antidepressant like Prozac, which is a fluoride drug that can block magnesium. If you begin the appointment talking about your continuous headaches, you can choose among two-dozen pain relievers or muscle relaxants. For oral thrush, the standard treatment is sugar-sweetened nystatin liquid to swish around in your mouth. The nystatin may start to kill some yeast but the sugar revives others. For patients who get hives as a manifestation of their \textit{YOS}, most doctors will do a work up for autoimmune disease.

For bad breath, mouth fresher laced with alcohol will grow more yeast. For itchy ears, the standard treatment is cortisone drops, which grow more yeast. For itchy eyes, there are cortisone eye drops. For itchy anus, there is more cortisone cream. Indigestion, bloating, and gas are usually labeled GERD (the medical term for heartburn) and treated with Protein Pump Inhibitor drug that kills your stomach acid, making it impossible for you to digest your meals or absorb your minerals (the PPI drugs are also now flagged for causing magnesium deficiency). Undigested food is the best diet for yeast.

You may be asked for a urine sample to see if you have a urinary tract infection to explain your frequent urination and you will probably be given an antibiotic, which will increase your fungal overgrowth considerably. Diarrhea warrants a prescription for Lomotil. Joint pain, a NSAID drug. For athlete’s foot, there’s an antifungal cream. For
toenail fungus, you’re given a very strong oral antifungal that rarely works but has a lot of side effects. Exhaustion takes you full circle back to Prozac.

I’m just reporting what occurs every minute of every day in most doctors’ offices across the country. In medical school, doctors are trained to diagnose disease and treat disease symptoms with drugs. Little is done to find the underlying cause when a patient has a complex array of symptoms. For weight gain, a common effect of YOS, it’s not just drugs that doctors are being taught to recommend. I recently found an article titled “The Value of Bariatric Surgery for Obesity” in the Journal for Nurse Practitioners.²

It seems that even nurses have given up on the possibility of weight loss in their patients. Or maybe doctors and nurses read the report in the journal Obesity that opined that by 2048, all American adults may be overweight or obese.³ It seems that medicine has thrown in the towel on obesity and declared it inevitable like grey hair and wrinkles!

Sarah’s Story

I have clients whose conditions were so mismanaged that they have become bedridden with yeast as the underlying cause. Sarah had severe acne as a teenager and was put on antibiotics for several years. She developed chronic yeast vaginitis, craved sugar and carbs and didn’t hold back. In her adult years, she was an air traffic controller with an enormously stressful job. Sinus infections made her a chronic user of antibiotics. Her doctors didn’t pay attention to the reports from the Mayo Clinic that 97% of sinus infections have a fungal basis. Her leaky, irritated sinuses caused her to be sensitive to most chemicals, and her leaky gut made it seem like she was allergic to everything she ate.

Diane’s Story

Diane’s symptom list began with weight gain and included intolerable menopausal symptoms, anxiety, depression, lack of energy, no motivation, indigestion, gas, feeling of fullness high up under the sternum, lower abdominal pain and cramping, and joint inflammation including her fingers. Diane, like many other women, had tried to diet all her life, but she could never get past the first week without feeling so miserable that she had to stop.
Sugar, bread, and coffee are usually the first foods to go when you want to get healthy and lose weight, and such was the case for Diane. She would forget how bad it was the last time, and every year tried a new diet. She attributed the constant headache to caffeine withdrawal, and after a few days of feeling miserable, she would throw in the towel and for another year decide that she would have to live with being overweight.

**Casey’s Story**
Casey’s list of complaints included weight gain of about 40 pounds, joint pain, sugar cravings – worse at night, no energy, no sex drive, feeling cold with cold hands and feet, and fluid retention. She fell into the description of someone whose yeast toxins targeted her thyroid and sex hormones. Research shows that yeast toxins cross react with every hormonal tissue in the body and can either activate them through an inflammatory process or block their activity. Prostatitis and thyroiditis are the two most common hormonal tissues that react to yeast inflammation. Often thyroiditis is followed by hypothyroidism, PMS, dysmenorrhea, symptomatic perimenopause, and symptomatic menopause.

**Wendy’s Story**
Wendy was 20 pounds overweight and also complained of muscle tightness, stiffness, pain and spasms, and elevated cholesterol. She had a history of taking lots of antibiotics, which always caused yeast vaginitis. According to my questionnaire, every tooth she had was filled with mercury and she got an annual flu shot, which is preserved with mercury (thimerosal). We did some mercury testing and found out she was mercury toxic. Mercury is a poison and was acting like an antibiotic in her body, killing off good bacteria and leaving room for yeast to roam free in her intestines.

**Sadie’s Story**
Sadie had flu-like symptoms, migraines, burning bowel movements, and medicated her pain with alcohol, which was only making her *YOS* worse. Daily alcohol intake is a sure way to create *YOS*. Then, you get to the point where you’ve got your own intestinal still, and your yeast are also making alcohol for you. One of the byproducts of yeast is alcohol,
and another is acetaldehyde, called the hangover chemical. When you have your own internal alcohol supply, it only takes a drink or two to feel quite inebriated. Some people with heavy YOS find they can’t drink anymore because it makes them feel just terrible.

**Frances’ Story**
Frances was overweight by about 25 pounds, but she didn’t complain of that as much as her Lupus, migraines, rheumatoid arthritis, Sjogrens, depression, allergies, and anxiety. I explained to her the yeast and autoimmune connection. Yeast toxins can cross react with any tissue in the body, so as the immune system attacks those toxins, sometimes body tissues are caught in the cross fire and become damaged. It’s not necessarily “the single cause” of autoimmune disease, but as neurosurgeon Dr. Russell Blaylock says, “The body does not attack a healthy self but a diseased self.” The diseased self can be caused by yeast toxins cross reacting with body tissues.

**Sylvia’s Story**
Sylvia’s YOS manifested as shortness of breath and chest pain at night. She was in her early 40’s and had no risk factors for heart disease. However, she had started drinking alcohol on weekends and smoking cigarettes at age 16, and lived on junk food. She drank and ate her way through college and was also on the birth control pill. Her yeast was bubbling up into her stomach causing pressure under her diaphragm and creating the shortness of breath and chest pain when she lay down.

Please go to Chapter 10 for the stories that men tell about their YOS.
CHAPTER 2: CANDIDA AND ITS TOXIC FRIENDS

WHAT IS CANDIDA?
What is this organism that can have such a widespread, devastating effect on our bodies? Candida albicans is neither a plant nor an animal. It’s a type of fungus that shifts between being normal budding yeast to a tissue-invasive thread-like fungus depending on its environment. Maybe that’s why it’s sometimes called yeast and sometimes called a fungus. If you feed sugar and carbs to Candida in the budding yeast stage, it will outgrow its home in the large intestine and turn into a thread-like fungal stage and move into the small intestine.

Candida’s relationship to mold is so close that if you have Candida overgrowth, you are often sensitive to or allergic to mold. The antibodies to mold are the same antibodies that attack Candida. So, if you are overloaded with Candida, you are more susceptible to mold. You may react with asthma or shortness of breath when you inhale the odor of moldy leaves or the musty odor in a dank and damp basement. Moldy leaves or damp basements can also produce anxiety, depression, headaches, sinusitis, and allergies. Mold can make all your yeast symptoms much worse.

Candida is not an easy life form to pin down clinically or in scientific research. It is a natural inhabitant of our intestines, vying for space with over 500 other species totaling 100 trillion life forms – ten times the 10 trillion cells that make up the rest of your body. Candida makes its home in our mouth, digestive tract, vagina, and skin. For the most part, it gets along with its neighbors. When you begin taking antibiotics, however, the whole delicate balance is lost. Antibiotics don’t discriminate; they wipe out most of the good bacteria along with the bad, leaving Candida unharmed.

Candida is also a stealth organism, protected from harm by an immune system that often turns the other cheek. Additionally, YOS is not taught in medical schools, so most doctors don’t know about it.

Our bodies are most familiar with the yeast Candida albicans, which is responsible for over 85% of Candida infections. There are at least 200 Candida species and about 40 can cause infection in humans. After Candida albicans, the following three are the most common: Candida tropicalis, Candida glabrata, and Candida krusei.
Candida’s Role

Candida’s main function may come as a shock. It awaits our demise or the demise of our tissues and evokes the Biblical “ashes to ashes, dust to dust.” Candida is an important scavenger cleaning up dead and dying debris and tissue. If it weren’t for molds, fungi, and yeast, once-living material would never decompose and would build up, rapidly competing for our living space. But, like a rabid dog that senses fear, Candida can sense dead and dying tissue or a decomposing meal in our intestines and begin to expand toward what, for them, is food. Our story of Candida is how it transforms from a normal inhabitant of our intestines to an invading army and transforms us from health to disease.

Our standard practice of living according to the rules of “eat, drink, and be merry” has long since caught up with us. Seventy percent of the population is overweight and the majority suffer one or more chronic ailments and are on one or more prescription medications. When I was in my teens, I began to study health and nutrition and became what is still commonly referred to as “a health nut.” I feel that too few of us trusted our instincts and became “health nuts” and are suffering the consequences.

The walking wounded endure high blood pressure, diabetes, high cholesterol, heart disease, stroke, cancer, and autoimmune disease. These conditions are often brewing for years before our defenses are overwhelmed. What stirs that witch’s brew is inflammation, and I contend that YOS is a prime source of inflammation in the body.

To the great detriment of the health of our society, this fungus is growing rampant in a large proportion of the population – mostly women. It’s one of the many diseases of civilization – the culmination of the side effects of drug and food technology and the disservices of our stressful way of life. The miracle of antibiotics has its downside as an underlying cause of YOS. The refining of sugar and wheat has its downside by creating a simple food source for Candida. The tremendous levels of stress hormones that flood our bodies every day, hour, and minute in our sped-up world also make us prey to yeast.

The candidates for creating Candida overgrowth do so by altering our intestinal environment by killing protective bacteria, creating an acidic pH, and allowing the build up of toxins.
CAUSES OF CANDIDA

1. Antibiotics
2. Alcohol
3. Steroid hormones and stress
4. Mercury in dental fillings or vaccines containing mercury (thimerisol)
5. Birth control pills
6. Immunosuppressant drugs
7. Pregnancy
8. Diets high in sugar, carbs, yeast and yeast products, moldy foods and fermented foods
9. Exposure to molds at home or work from untreated water damage
10. Chlorine in drinking water, shower and bath water, and swimming pools

1. ANTIBIOTICS

YOS has been with us for decades, ever since we began using antibiotics, but we neglected to replace the good bacteria that are destroyed along with the bad. Yeast itself has grown in human bodies since Adam and Eve. Candida albicans, the main yeast in the human body, lives there happily enough, kept in check by beneficial bacteria in the intestines.

Cultivation of yeast in our intestines is not the intent when we take antibiotics or succumb to sugar cravings, but it is the result. When we are prescribed antibiotics to kill a marauding microorganism, we imagine the drugs as smart missiles specifically targeting the enemy. They are not that smart, they are rather stupid drugs that mow down significantly more innocent bystanders than they do the enemy. The collateral damage to the “good” bacteria in the intestines can be severe, leading to huge gaps in defending the intestines from a takeover by yeast. The onset of intestinal YOS is slow and insidious, and since doctors didn’t learn about it in medical school, they miss all the signs. Even when a woman develops vaginitis from antibiotics, it can be misdiagnosed as a bacterial infection and treated with more antibiotics.

I’ve had patients who have been on antibiotics every month for decades for kidney and bladder infections. Common sense dictates that after several ineffective
treatments with antibiotics, then you were barking up the wrong tree – but one patient
told me she’s had 300 courses of antibiotics!

We’ve known for decades that antibiotics upset the natural flora of the bowel. One study in 1985 showed that 86% of Syrian hamsters suffered a decrease in total bowel flora after being given antibiotics. After the antibiotic treatment, a group of hamsters that were given C. albicans by feeding tube developed Candida infection in the liver, spleen and kidneys.4

In that same study, the authors said that those animals whose intestinal flora survived did so by forming a dense layer of beneficial bacteria in the mucus gel of the intestines, out-competing yeast cells for adhesion sites. They also found inhibitor substances (volatile fatty acids and secondary bile acids) that reduced C. albicans adhesion. This provided early evidence of the benefits of probiotics.

Dr. W.A. Egger contends that exposure to a steady stream of antibiotics has altered bacterial pathogens such as Streptococcus pneumoniae, Staphlococcus aureus, and Enterococci, creating antibiotic resistant strains and flesh eating bacteria that antibiotics can’t touch.5 According to the CDC, 90% of upper respiratory infections are viral and should not be treated with antibiotics, yet almost half of all patients with upper respiratory tract infections in the U.S. still receive antibiotics from their doctor.6

Researchers found that Group A beta - hemolytic streptococci is the only common cause of sore throat that requires antibiotics, penicillin and erythromycin being the only recommended treatments.7 The authors of this study estimated there were 6.7 million adult annual visits for sore throat between 1989 and 1999 in the U.S. Antibiotics were prescribed in 73% of visits. Furthermore, patients treated with antibiotics were given non-recommended broad-spectrum antibiotics in 68% of visits. From 1989 to 1999, there was a significant increase in the newer and more expensive broad - spectrum antibiotics, much touted by drug reps, and a decrease in the more effective antibiotics – penicillin and erythromycin. If antibiotics were given in 73% of visits and should have only been given in 10%, this represents 63%, or a total of 4.2 million visits for sore throat that ended in unnecessary antibiotic prescriptions between 1989 - 1999.

None of these figures take into account the number of unnecessary long-term antibiotics used for other non - fatal conditions such as acne, intestinal infection, skin
infections, ear infections, etc. They seem to be given indiscriminately for any sort of infection or swelling accompanied by a fever. In 2008, the CDC estimated that there are 142,505 visits annually to emergency rooms due to adverse reactions to antibiotics.\(^8\)

It took over 60 years for allopathic medicine to come to the realization that they were overusing antibiotics. How much longer will we have to wait for YOS be recognized by mainstream medicine? The answer is too long to be of any benefit to the suffering public.

2. ALCOHOL
For the most part, the people I consult with have such severe YOS that they avoid alcohol because it makes them feel so much worse. Alcohol may have been a contributor to the evolution of their symptoms, but at a certain point, the additive effect of drinking alcohol to the actual alcohol produced by yeast is too much to bear. Yes, that’s right, as you will read just below in Chapter 3, yeast produces alcohol as one of its 178 toxins.

If you are reading this book because you have a mild case of yeast and want to get rid of it, just know that alcohol is not your friend. It’s great friends with yeast and encourages it to grow, and it’s just going to make you ill.

Alcohol carries a double punch. It’s a fermented product and an alcohol sugar, both of which encourage yeast growth. Just as you can crave sugar and carbs urged on by your ravenous yeast, you can also crave alcohol. In fact, YOS may be one of the reasons that people become addicted to alcohol.

The regular use of alcohol causes liver damage and changes brain chemistry. If your addiction is serious, the 12 Step Program will help, but it’s got to include a yeast-free diet. If you continue to eat a lot of sugar and carbs by eating all those donuts at your AA meetings, the alcohol that you are making in your own little yeast still is still affecting you!

3. STEROID HORMONES
Stress puts your body on steroids. Our own body’s steroid hormones are there to help treat inflammation, but when on overload, they cause problems. When used as synthetic drugs or when you pump them out in high amounts because you’re under chronic stress,
they disrupt the body and cause YOS. They do that biochemically by stimulating the breakdown of glycogen in the liver into glucose, and glucose is the perfect food for yeast. We’ve heard that stress produces excess cortisol and that hormone promotes belly obesity, but I think yeast and yeast toxins are also very much involved but ignored.

4. MERCURY CONTAMINATION

Mercury is second only to plutonium in its toxic effects. When you chew food with teeth that have mercury fillings, you create mercury vapor that you swallow. This mercury vapor acts like a super antibiotic killing gut bacteria. It amazes me that the CDC can state that there is no level of mercury that is acceptable in the human body yet dentists still continue to use mercury in their offices and place it in people’s teeth.

We are also exposed to mercury as the preservative called thimerisol in vaccines, including the flu vaccine. Many kinds of fish are contaminated with mercury and can cause elevated levels in our body. You can also be exposed to mercury if you live near a coal-burning plant or crematorium or work in a dental office.

Antibiotics and mercury together make a very bad combination that promotes YOS. Investigators found that antibiotics decimate normal gut flora, which normally break down methyl-mercury, rendering it less toxic. Antibiotics can also increase the amount of yeast and E. coli organisms, which methylate inorganic mercury, making it more toxic. This double whammy results in higher absorption of methyl mercury and decreased excretion of inorganic mercury.

A hair analysis can help diagnose the extent of mercury toxicity. A mercury testing company, Quicksilver Associates, goes one step further. Their Tri-Test samples hair, urine, and blood, helping to pinpoint the type of mercury and its origin. The Mercury In Your Mouth, written by Quicksilver Associates, states that mercury is a cellular toxin, poisoning and disrupting living cells because it bonds with sulfur groups, which are found in most body proteins. Mercury also irreversibly binds with magnesium since it's a divalent chelating mineral, thus making magnesium unavailable to the body. If you have YOS, the acetaldehyde that yeast creates needs magnesium in order to detoxify it many yeast symptoms.
5. BIRTH CONTROL PILLS
The premenstrual surge in hormones provides an environment that encourages yeast to grow. However, when you take hormones in the form of the BCP, for three out of four weeks you are creating that very same environment.

6. IMMUNOSUPPRESSANT DRUGS
As the name of the drug implies, suppressing the immune system will take the focus away from keeping yeast and yeast toxins under control, allowing them to run rampant in the body.

7. PREGNANCY
Hormones reach very high levels during pregnancy and can encourage YOS. Pregnancy is also a time of cravings, and when women give in to carbohydrate and sugar cravings, they can cause more YOS.

8. DIETS HIGH IN SUGAR, CARBS, YEAST, MOLDY FOODS AND FERMENTED FOODS
All these foods are fodder for yeast. Toast and jam for breakfast, sandwiches for lunch, lots of coffee with sugar, and pasta for dinner is high carb heaven for yeast. Even juicing healthy foods like carrots and beets or eating yams and corn can be a problem because they are high carb foods. I’ll talk more about fermented foods and cultured vegetables in Chapter 5 XX.

9. EXPOSURE TO MOLDS FROM UNTREATED WATER DAMAGE
Below ground basements, water leaks, and roof damage can all create an environment for mold. Mold cross reacts with yeast. If your sinus membranes are already irritated with yeast, they will be more sensitive when you inhale mold spores. The immune system, already sensitized to yeast, can mount an aggressive attack against mold causing escalating allergy reactions. You may never know you are allergic to mold until you are no longer exposed for a few days. While away from the mold, either at home or work,
you feel better and then feel much worse when re-exposed. That type of symptom history can help you diagnose a mold allergy.

**10. EXPOSURE TO CHLORINE:**
You can be exposed to chlorine in swimming pools, showers, baths and drinking water. Chlorine kills microorganisms in water, and it does the same in your body, disrupting your intestinal flora leaving room for intestinal yeast to overgrow. Chlorine also binds magnesium and contributes to magnesium deficiency.

The above ten causes of YOS have greater impact in a body that is already compromised by the following factors:
1. High carbohydrate and sugar diet
2. Lack of HCL, bile, and pancreatic enzymes leading to incomplete digestion
3. Overburdened immune system
4. Intestinal dysbiosis
5. Toxic gastrointestinal tract
6. Leaky gut

**Intestinal Bacteria**
I used to just think that beneficial intestinal bacteria were mainly around for crowd control – to make sure yeast didn’t make it past the border guards. I also knew that bacteria make small amounts of vitamin K and B12 and help digest excess sugar that gets past the small intestine. Then, research on lactobacillus and bifidobacteria found that these two special groups of bacteria make lactic acid. Lactic acid is important in YOS because it protects the gut from yeast by slightly acidifying the intestines. However, so much was made of lacto and bifido that most, if not all, of the research funding was directed at these two species and yeast was, once again, ignored.

The Human Genome Project failed because medicine wanted to identify bad gene sequences and snip them out of existence. Every experiment to perform this type of procedure has failed so far. Gene extraction will probably never happen because health
and disease are not controlled by genes, but by epigenetic factors that turn genes on and off.

After the Human Genome Project (HGP) failed, geneticists, seeking more funding, launched the Human Microbiome Project (HMP) in order to identify the microorganisms found in the human body. They are looking at the microbacterial population of the skin, mouth, nasal passages, lungs, vagina, and gut – with the gut having the largest population.

The Microbiome Project will also fail because the focus is all on the body’s bacteria while ignoring the epidemic of YOS in the population and in our gut. Researchers note that the gut population consists of between 1 and 2 kilograms (2.2-4.4 pounds) of bacteria and other organisms. Yeast, parasites, and worms are lumped together under ‘other organisms’.

Evidence of the bias of the Microbiome Project against yeast can also be seen in all the recent books about the gut. I’ve read five new books about intestinal dysbiosis and none of them even mention yeast as an important part of the gut flora and a force to be reckoned with. I’m convinced that the authors are ignoring yeast intentionally – perhaps because it has such a negative image in science and allopathic medicine and requires too much patient education to treat it properly. Even integrative medicine doctors fail in this respect and offer lactobacillus and bifidobacteria probiotics as the only solution. As noted above, my recommendation is for soil-based probiotics, which I will discuss in Chapter 6.

**MAKING BREAD AND MAKING YEAST**

If you have ever made bread or seen it made, you know that baker’s yeast and sugar mixed together trigger a fermentation process that makes the bread dough rise several times its original size. Yeast in our intestines does the same. When the round buds of yeast grow to a critical size, it can no longer absorb enough food through its surface to reach the center. Consequently, smaller buds break off to form their own colonies. When they travel, they send out mycelial threads to conquer more territory.

Yeast don’t have mouths or stomachs; they grow into their food, absorbing sugars in the form of table sugar, milk sugar, fruit sugar, and glucose molecules from simple carbohydrates like bread. A standard American breakfast of sugared cereal, banana, milk,
toast, jam, and sugared coffee contains all their favorite foods, starting off your day with a fermenting brew.

Similarly, in the intestines, if Candida has the space to grow and a sugary food source, it won’t stop until it meets resistance. Resistance to yeast naturally comes from good bacteria called probiotics. I’ll talk more about probiotics in Chapter 6. In the absence of enough good bacteria, the solid constraints posed by the intestinal wall are the only barrier it recognizes. However, when the living mycelial threads encounter the unyielding intestinal wall, they poke and prod until they form tiny micropunctures in the moist lining and create a devastating condition called leaky gut (I’ll explore leaky gut below).
CHAPTER 3: SHOW ME THE EVIDENCE

I painted a frightening picture of YOS and how it’s not recognized mainstream medicine in the Introduction. I think I should give some more details about how this sad situation has come about.

WHY DOESN’T MY DOCTOR KNOW ABOUT YEAST?
Many years ago, a patient of mine, a PhD in biochemistry, who had a serious case of YOS wanted to make yeast her research topic at the local university hospital where she worked. She told me she was laughed out of the lab. Her colleagues assured her that this yeast fad was not something she wanted to be associated with and that if she insisted on pursuing such research, she would immediately lose all credibility.

I’ve also heard mainstream doctors criticize the physicians who first reported YOS as a growing problem in the population, notably Dr. Orian Truss and Dr. William Crook. They complained that Truss and Crook should have scientifically proven their theory before presenting it to the public and making it into a “fad disease”.

In medical school, our class was told that the intensive training we received would teach us everything we needed to know to practice medicine and that anything not in our curriculum was either unnecessary, invalid, or quackery. Such indoctrination left little room for medicine to accept the emerging diseases of civilization, such as chronic fatigue syndrome, multiple chemical sensitivity, fibromyalgia, autoimmune disease, secondary hypothyroidism, mercury toxicity, food sensitivity, IBS, and chronic inflammation. Especially ostracized is anything to do with YOS and yeast toxins, which I consider an underlying trigger for all the above conditions.

A doctor with blinders firmly in place will not see or recognize a patient who suffers from these diseases of civilization. They have not learned about any of these complaints in medical school and are quite confident in telling their patients that it’s all in their head and that the blood tests and investigations are all normal, but they are happy to make a referral to a psychiatrist to deal with the obvious anxiety, depression, and inability to cope.
You should also know that another very significant reason why YOS is not recognized is that it doesn’t have an insurance code that doctors can use to bill for diagnosing and treating it. Without a code, doctors will not be reimbursed for an office visit about YOS. Even worse, many doctors tell me that they can’t prescribe long-term antifungals like nystatin for YOS because the patient’s insurance company could alert their licensing board that they are practicing outside the standard boundaries of medicine. In medical school, doctors are taught that a “systemic” yeast infection in the blood only occurs in immunocompromised patients – those with leukemia, AIDS, undergoing chemotherapy or radiation treatment, or being treated with immunosuppressive drugs. A systemic infection in allopathic medicine means a blood-born yeast infection that causes a fever and can be life-threatening. One of the reasons why doctors scoff at the diagnosis of YOS is that some practitioners and writers mislabel and misdiagnose it as a systemic yeast infection.

For the most part, yeast organisms that overgrow in the intestines stay in the intestines, but their toxic chemical byproducts can leak through the gut and into the blood stream. But I’ve found several studies, both animal and human, mostly from decades ago, that show yeast organisms in the blood and urine of humans after ingestion and injection of Candida organisms. Thus, systemic yeast can be created in the lab, as evidenced by the following research.

In infant mice (15-19 days old), systemic and gut infections were evident after oral-intragastric feeding with Candida albicans. Organisms were found in high levels in the liver, kidney, spleen, stomach, and intestine in all animals up to the 24th day after infection. In another study, blood containing Candida albicans and Candida tropicalis from patients with acute leukemia was injected into mice. Within 30 minutes of injection, both organisms spread to the lungs, liver, and kidneys. Another branch of this study took animals infected with Candida albicans and treated them with immunosuppressive drugs (cortisone and cyclophosphamide) on days 30 and 33 after injection. This intervention increased the number of fungal organisms in the stomach by 40 to 370 times and in the intestines by 30 to 80 times.
William Krause, PhD, as far back as 1969 found that intact Candida albicans organisms make their way from the GI tract into the bloodstream. Dr. Krause swallowed a large dose ($10^{12}$ organisms) of Candida albicans. Prior to ingestion, Krause was completely free of Candida. Within 2 hours he developed shivering, fever, and a headache. Candida was cultured from blood samples at 3 and 6 hours, and from urine specimens collected 2.75 and 3.25 hours after inoculation. All colonies grown were identical to the strain he took.\textsuperscript{12}

Krause clearly demonstrated that it is possible for C. albicans to cross the gut wall and cause systemic effects in non-immunocompromised humans. We have no idea whether Krause had an intact gut lining or a leaky gut, which would have made the crossing that much easier. Presumably, mild cases of systemic yeast happen more often than anyone suspects.

There is also evidence that people with chronic YOS and yeast vaginitis have lower white blood cell (WBC) counts. Low WBC counts imply that the immune system is overworked dealing with a chronic infection.

**Drs. Truss and Crook**

I am fortunate to have experienced a special relationship with Dr. William Crook and his family. I co-wrote his last book, *The Yeast Connection and Women’s Health*. In 1976, he began his investigation of yeast. Dr. Crook had a female patient he couldn’t seem to help who suffered complex and chronic health complaints. The woman moved away but returned to town a few years later and visited his office completely healthy and energetic. Dr. Crook wanted to know what happened, and she said she had discovered an article by Dr. C. Orian Truss, "Tissue Injury Induced by Candida Albicans: Mental and Neurologic Manifestations."\textsuperscript{13} Dr. Truss described how Candida albicans, a yeast growing in the mucus membranes of the body (including the digestive tract), could play an important role in body-wide problems. Truss said that symptoms in patients with Candida overgrowth included fatigue, headache, PMS, depression, and other disorders of the immune, endocrine, and nervous systems.

Dr. Crook was skeptical at first, but was amazed to find that many of his female patients seemed to fit the Candida overgrowth profile. Dr. Crook contacted Dr. Truss and
learned about his protocol. He put some of his own chronically ill patients on a sugar-free diet and the anti-fungal drug nystatin and found that their health dramatically improved. In 1979, an article in an obscure Canadian medical journal described the correlation between Candida albicans and health problems affecting many adults. From this point on, Dr. Crook began gathering data that documented this relationship.

In December 1982, Dr. Crook introduced the concept of the "yeast connection" on a Cincinnati television show. Within a week, 7,300 letters arrived with requests for further information. This response led him to write The Yeast Connection, which was published in December 1983 and has become a classic for people suffering from yeast-related problems. I feel that The Yeast Connection needs to be updated, but when Dr. Crook’s daughter and I approached Random House, they refused to allow us to write a new edition. This was another reason I felt I had to write this book.

Dr. Crook predicted that the theory about YOS would be slow to gain acceptance by the medical establishment. In 1986, the American Academy of Allergy and Immunology (AAAAI) published a dismissive statement on what they called the Candidiasis-Hypersensitivity Syndrome. They said, "The concept is speculative and unproven; the basic elements of the syndrome could apply to almost all sick patients at some time. There is no published proof that Candida albicans is responsible for the syndrome."14

Despite criticism and occasional ridicule, Dr. Crook believed in the validity of the relationship between yeast and human health. He diligently pursued his knowledge of Candida albicans, publishing a series of well-received books on the subject. In the late 1990s and into the 2000s, new information about women's health problems appeared in both medical journals and the media.

When Dr. Orian Truss wrote The Missing Diagnosis in 1983, shortly before Dr. Crook’s book, he spoke about the “systemic effects” of yeast toxins entering the bloodstream. So when patients came to doctors saying they read a book that said they had systemic yeast, the doctors spurned Truss, his book, and the whole notion that yeast in a non-hospitalized patient could be systemic. The medical community immediately began calling YOS a fad.
Dr. Crook told me many years ago that the very first patient in the U.S. who was treated with high-dose antibiotics developed a yeast infection. The doctors using these new magic drugs were watching very closely and observed the side effects. It was recommended to combine antibiotics with antifungals, but somehow that sliver of wisdom got pushed aside, just like millions of patients with YOS are pushed aside by doctors who don’t seem to realize the damage that antibiotics can cause.

Even so, there is agreement in the medical community that conditions such as diabetes and alcoholism or long-term treatment with antibiotics are risk factors for YOS, which opens up the discussion of YOS to include millions of susceptible people. One of my clients has been on antibiotics for two weeks every month for 35 years, yet her overwhelming YOS was never diagnosed by her many doctors. Why? Because she didn’t have leukemia, AIDS, or cancer.

It’s becoming more obvious that YOS is not just present in people with a compromised immune system. As more researchers become aware of the YOS problem, more studies will unveil its effects, creating awareness and spearheading prevention and treatment.

For example, in one three-year study, 854 patients with acute and chronic diarrhea were screened and fungal overgrowth was found in 54.8%. The most common fungus was C. albicans (64.5%), followed by C. tropicalis (23.3%), C. drusei (6.9%), and Troulopsis glabrata (1.6%), as well as Trichosporon and Geotrichum in 2.3%.15

**CANDIDA IS NOT JUST VAGINITIS**

Most doctors just think of YOS as being simply a vaginal infection, but the yeast that causes vaginitis usually comes from overgrowth in the intestines and not the other way around. We know this because of evidence from clinical trials. In one study of almost 260 women with yeast vaginitis, combined local treatment and oral antifungal treatment (nystatin) gave a higher cure rate than local treatment alone.16

A six-month prescription of oral ketoconazole was compared with placebo in women with yeast vaginitis. After one year, the drug group had an average 50% cure rate compared with a 24% cure in the placebo group. The authors stated, “It appears that maintenance prophylactic therapy with oral ketoconazole is effective in preventing
recurrent episodes of vulvovaginal candidiasis, but that relapse is common after withdrawal of the drug.”
However, they warned that caution is essential in selecting patients for long-term ketoconazole therapy because of the risk of liver toxicity.\textsuperscript{17}

\textbf{WHEN THE GUT GIVES UP}
I’ve written two books on gut disease: \textit{IBS for Dummies} and \textit{IBS Cookbook for Dummies}. In those books, against the advice of the technical advisor (a dietician), I focused on \textit{YOS} as a major cause of IBS. The technical advisor had never heard of \textit{YOS} and was determined that neither would my readers. Thankfully I won that battle, but I continue to fight the war because yeast continues to be ignored at every turn.

My latest concern, as I mentioned earlier, is that the deluge of books on the gut emphasizing the bacterial microbiome all avoid talking about \textit{YOS}. It seems that medicine must keep its specialist agenda and not mix up bacteria and yeast in its Microbiome dialogue. Of course, there is much more to it than that – research funding is firmly shining on bacteria, and medicine has never acknowledged \textit{YOS}, claiming that it’s a “fad disease.”

\textbf{Small Intestine Bowel Overgrowth (SIBO)}
All this discussion on the bacterial microbiome has led to the creation of a new “dis-ease” called SIBO. There are SIBO websites, SIBO Symposia, SIBO books, and unfortunately SIBO blind spots – because they overlook \textit{YOS}.

We have people calling Customer Service saying, "I have SIBO," and then they want to know what they should do. First, they think they “know” something because they've been diagnosed, but it scares them because they don’t know what to do about it.

As far as I can tell, defining SIBO as an entity came out of the group that formed around the Specific Carbohydrate Diet (SCD). I learned about the SCD in my naturopathic training in the late 1970s from Elaine Gottschall, who had “cured” her daughter of ulcerative colitis with The Specific Carbohydrate, which she was prescribed by Dr. Sidney Valentine Haas. Dr. Haas had success with a grain-free, sugar-free, starch-free diet for celiac and IBD (irritable bowel disease) patients in the 1950s.
Elaine Gottschall was so grateful and intrigued that she began studying the diet-gut connection. Her Master’s thesis focused on the effects of various sugars on the digestive tract at the cellular level. She wrote *Breaking the Vicious Cycle: Intestinal Health Through Diet*, which brought the diet into prominence. The premise of The Specific Carbohydrate Diet is to keep simple sugars away from feeding bacteria in the gut, which can then overgrow. Dr. Haas believed that bacterial overgrowth could disrupt enzymes that normally attach to the intestinal cell surface and prevent proper digestion and absorption of carbohydrates. We do know that a severe bout of diarrhea can impair disaccharide enzymes, which break down sucrose, lactose, and starch, leaving them undigested and fodder for bacteria and yeast. Dr. Haas knew that bacterial toxins and acids could injure the lining of the small intestine. Excessive mucus could be produced as a defense mechanism against the irritation caused by toxins, acids, and undigested carbohydrates and lead to the condition called mucus colitis, now called IBS.

The above explanation makes sense, but the problem is that the emphasis has always been on bacteria and now SIBO is called bacterial overgrowth, not both bacterial and yeast overgrowth. Because SIBO is a bacterial diagnosis, doctors, both MDs and NDs, recommend antibiotic therapy for it, which of course will cause more yeast overgrowth, and SIBO treatment will not include natural antifungals.

The treatment for SIBO even included Fecal Implants, which are incredibly expensive and quite over-the-top. Of course, something that expensive and that dramatic will have a great placebo response and may work for some people in the short term! It will be very interesting to see if they lead to long-term improvement.

**Testing SIBO**
A hydrogen or methane breath test is used to diagnose SIBO, but it’s not measuring bacteria at all. It’s measuring whether or not you are able to digest a sugar drink of fructose, lactose, or lactulose. If you don’t digest these sugars they become food for intestinal bacteria, which produce hydrogen and/or methane as a result. Yeast also produces gas when it ingests sugars – mostly methane. This means that the hydrogen/methane is not just measuring bacteria.
SIBO DIETS
The following diets can all be used to starve the intestinal organisms that are feeding off undigested sugars:

- The Specific Carbohydrate Diet (SCD)
- FODMAP (Fermentable Oligosaccharides, Disaccharides, Monosaccharides and Polyols)
- Yeast ReSet Diet

However, I find that the SCD and FODMAP are too strict and you are made to feel like you have to be fanatic about the diet for it to work. FODMAP also allows grains, fiber, sugar and other fermentable carbs, which will feed intestinal organisms. The Yeast ReSet Diet is less restrictive when used along with Prescript Assist and the Yeast ReSet Detox.

The Functions of a Healthy Gut Lining (edited from IBS for Dummies)
1. Digestion: Houses enzymes that digest foods.
2. Absorption: Absorbs food molecules such as glucose to be converted into energy, amino acids from protein for growth and repair, and fats for cell membranes, hormones, and energy.
3. Nutrient absorption: Allows vitamins and minerals attached to carrier proteins to cross into the bloodstream where they act in all the metabolic functions of the body.
4. Detoxification: The gut is lined with lymphatic tissue that detoxifies infectious organisms, foreign chemicals, and chemicals produced by yeast and bacteria.
5. Immune barrier: The gut is lined with immune cells that act as the first line of defense against foreign bodies and infection.
6. Mood Stabilizer: The gut makes 90 percent of the serotonin in the entire body.
7. Microbiome: Home for trillions of bacteria that support a healthy gut lining.

When yeast disrupts the gut lining, it’s doing much more damage than just allowing toxins into the blood stream.
Leaky Gut: An Open Door To Our Tissues

In the absence of competition, yeast colonies grow into all the empty nooks and crannies of the large intestine and advance into the small intestine. It is a scientific fact that when yeast cells reach a certain critical mass, they change from a round budding stage to a thread-like tissue invasive stage. They are running out of food and looking for more, so they pack their bags and take a vacation to the small intestine from their home in the large intestine.

In the small intestine, where food is much more plentiful, the yeast threads poke microscopic holes in the intestinal lining. This damage activates the immune system and causes a breakdown of the “tight junctions” in the gut wall, much like tiny wounds that won’t heal. Such a phenomenon is called “leaky gut” – a superhighway to the blood stream with nothing to block toxins trickling across the gut lining.

Instead of absorbing life-giving nutrients through an intact intestinal wall using proper transport factors, undigested food molecules, yeast’s 178 toxic chemical antigens18, bacterial toxins, and other chemicals take a one-way ride. Hundreds and maybe thousands of waste products thus cause inflammation from head to toe.

Consequences of a Leaky Gut
1. Incomplete digestion of food. Undigested food is available for yeast to thrive on, and gas and bloating are direct results. Yeast toxins are then absorbed through a leaky gut along with incompletely digested food molecules that act as antigens in the blood stream, producing food allergy reactions.

2. Faulty absorption of food and nutrients, which leads to malnutrition and triggers food cravings. If your body is not getting the nutrients it needs, it craves more and more food – weight gain is a direct result.

3. Disruption of vitamin and mineral transport into the blood. Damaged carrier proteins result in all of the metabolic processes in the body working at a huge disadvantage since vitamins and minerals are vital as co-factors for everything that happens in the body – fatigue is a direct result and one of the first symptoms. The layering of symptoms can...
lead to chronic fatigue syndrome. Magnesium deficiency can cause heart symptoms, muscle cramps, and low energy; B vitamin deficiency leads to nervous tension, weight gain, and lack of energy; selenium deficiency lowers the immune response and along with iodine deficiency weakens thyroid function. The list of disruptions in the body is very long.

Researchers report that YOS is associated with a number of nutrient deficiencies: magnesium, zinc, vitamin A, vitamin B6, and Omega-6 and -3 fatty acids.¹⁹,²⁰

4. Lymphatic tissue, damaged first by yeast then by toxin overload from yeast and abnormal bacteria, causes gut swelling, irritation, and inflammation, culminating in IBS or IBD. The liver is overworked because the gut is producing an overload of toxins that overwhelms the gut lymphatic tissue.

5. Immune cells in the gut are disrupted by yeast and overworked by trying to create antibodies to the hundreds of yeast and bacterial toxins that are produced. With all this diversion in the gut, the immune system is not as responsive to germs from the outside world – frequent colds and flus are the direct result. The vicious cycle is revved up again when we have bronchitis or pneumonia and have to take another round of antibiotics and kill off more gut bacteria allowing more yeast to overgrow.

   Toxins that maneuver past the gut’s immune cells into the blood stream cause another riot of defense as antibodies are produced against invaders. Antibodies against many yeast byproducts are known to cross-react with body tissues, which means the body mistakes toxins for human tissue. When the body attacks its own tissues, we call that autoimmune disease: multiple sclerosis, lupus, thyroiditis, rheumatoid arthritis, and fibromyalgia are examples. IgA (immunoglobulin A) molecules normally in the lining of the gut are disrupted by gut inflammation and can no longer protect against parasites, bacteria, viruses, and yeast, and the cycle of dysbiosis continues.

6. Disruption of serotonin production in the gut leads to mood swings, anger, and irritability that no amount of Prozac will treat.
The solution to all these devastating problems is to get yeast under control and restore gut ecology.

**Blasting the Biofilm**

The current thinking is that bacterial biofilms are the cause of autoimmune disease and must be treated with antibiotics. Such treatment can cause more harm than good in the long run. Taking more antibiotics will create more yeast, which I think is a major cause of autoimmune disease. Fungal biofilms also occur and the treatment is with strong antifungal drugs.

I wrote a blog blasting the treatment of biofilms after a customer said her doctor told her not to take magnesium because magnesium was found in biofilms and taking magnesium could make biofilms worse! It’s like saying that intestinal organisms live off the food you eat, so you’d better not eat!

A biofilm is any conglomeration of microorganisms where the cells stick to each other and attach to a nearby surface – the intestinal wall. The bacteria are in a matrix of extracellular DNA, protein, calcium, magnesium, and polysaccharides, which are long chains of sugars. So bacteria are sitting in their dinner and bound up with calcium, iron, and magnesium.

Mistakenly, doctors tell patients to avoid those all those minerals to try to dissolve the biofilm, not realizing that calcium is the likely culprit and that patients should take magnesium (ReMag) to dissolve the calcium. They should also avoid calcium supplements. The theory that the biofilm is another infection that we have to treat with strong antibiotics or antifungals is a false premise and has gotten us into our present health care crisis.

Biofilms are hydrophobic – they don’t like water. So, we should ask whether or not biofilms occur in someone who is well hydrated and properly saturated with sea salt, magnesium, and multiple minerals. Perhaps biofilms won’t be able to form in such a healthy environment.

The latest fad treatment for biofilms is EDTA, a metal chelator that further identifies minerals in the biofilm matrix as the problem. EDTA is being used to break up the calcium, iron, and magnesium that help solidify biofilms. However, EDTA binds
minerals and heavy metals throughout the body, including your bones, and won’t just focus on biofilm minerals. When I personally experimented with IV EDTA chelation on myself, it only took 2 chelation treatments before I developed knee pain in both knees from minerals being yanked out of my body.

Doctors who do EDTA chelation for atherosclerosis usually give IV mineral treatments after chelation because they know they are pulling out minerals along with heavy metals. However, IV minerals are not going to replace all the important minerals that are lost. I think the whole EDTA chelation process is too experimental and can lead to mineral imbalance. Taking ReMag and ReAline, both gentle mineral chelators, is a much safer approach. Taking ReMag to dissolve the calcium in the biofilm matrix is the safest solution to dissolving the biofilm.

**Overuse of Antibiotics**

Doctors and the public are aware that antibiotics are overused, and researchers are either looking for safer antibiotics or seeking ways to mitigate their side effects. “New Insights Into How Antibiotics Damage Human Cells Suggest Novel Strategies for Making Long-Term Antibiotic Use Safer” is the title of a report from Science News, July 3, 2013. In this paper, researchers admit that therapeutic levels of antibiotics can cause severe oxidative stress that damages:

1) DNA
2) Enzyme systems
3) Proteins
4) Cell membranes in human cells

The researchers say the good news is that these effects can be alleviated by antioxidants. The study tested three antibiotics, Ciprofloxacin, Ampicillin, and Kanamycin, that are known to cause oxidative stress in human cells. The safe zone for these drugs only lasted six hours before side effects began to appear, and by the fourth day, human cell mitochondria were malfunctioning.

Mitochondria are "cellular power plants" generating most of the body’s energy, called ATP, with the help of magnesium. The mitochondria also take part in cell
signaling and cell differentiation and control the cell cycle and cell growth. Longer than 4 days on antibiotics and levels of the body’s major antioxidant, glutathione, begin to decline. These are very serious allegations that doctors do not take into consideration when they blithely write their prescriptions.

The researchers say that there are two solutions to the problem of antibiotic overuse. One is to go back to bacteriostatic antibiotics that stop bacteria from replicating but don’t kill them (and in the process kill human cells). But those drugs still have side effects, including YOS. The second solution is to use antioxidants to help undo the damage that bactericidal antibiotics cause. Magnesium, selenium, vitamin A, vitamin C, and vitamin E are the most effective antioxidant supplements.

Magnesium is my top choice as antioxidant. Also, antibiotics cause magnesium depletion, so we need more magnesium just to make up for that loss. We know that antibiotics poison mitochondria, and we also know that magnesium is a necessary cofactor in 6 of the 8 steps of ATP production performed in the mitochondria.

Cipro is the worst magnesium depleter of the three drugs named in this study because it contains fluoride molecules, which irreversibly bind magnesium, making it unavailable in the body.

For more on magnesium, alternatives to antibiotics, and ways to boost your immune system and stay healthy, read my *Future Health Now Encyclopedia* – it covers 130 disease conditions and tells you how to treat and prevent them naturally.

I mention this study and emphasize using alternatives because doctors are not going to change their prescribing habits. You have to find alternatives; don’t wait for your doctor. A February 2016 UK study published in the Lancet found that after an initiative to educate doctors about the overuse of antibiotics, there was a (ridiculously low) 3.3 percent reduction in prescriptions.

**Yeast Triggers Allergies**

Yeast growing on the mucus membranes of the nasal passages can cause irritation and inflammation, leading to greater reaction to inhaled allergens. As you can see in the Candida Questionnaire on page XX, sensitivity to chemicals, perfumes, and allergens is very common in YOS. The same is true for food allergies. Incompletely digested food
molecules in a leaky gut can allow the absorption of these molecules into the blood stream and set up antigen-antibody reactions that appear to be allergy reactions.

This is one of the reasons I think yeast should be treated before doing expensive allergy testing, since you may just be showing “allergies” to foods you commonly eat because of a leaky gut.

**Yeast and Inflammation**

As mentioned in the introduction, in the last decade, researchers have made significant strides in connecting inflammation to chronic illness. I link both YOS and magnesium deficiency to the rise in inflammatory conditions. But recent research on the bacterial microbiome lays all the blame on bacterial dysbiosis. Their research puts the origin of inflammation in the gut, but they ignore the role of yeast. As I mentioned earlier, the research funding is firmly in the bacterial microbiome camp.

Studies link chronic inflammation with high glycemic, high carb, junk food diets. The more sugary, high-carbohydrate foods you eat, the more likely you are to develop inflammation, which is now linked to serious diseases like heart disease, cancer, arthritis, obesity, and asthma. But that type of diet specifically feeds yeast – not just bacterial imbalance.

When I first saw the research on inflammation, it was easy for me to make the link to YOS and magnesium deficiency. The diet and lifestyle behaviors that lead to chronic inflammation also feed yeast and ultimately result in YOS. From my magnesium research, I know that 80 percent of the US population is deficient in magnesium. The two conditions are associated and both need to be treated simultaneously.

When yeast, bacteria, and food toxins hit the blood stream through the leaky gut superhighway, they trigger widespread inflammatory reactions. They either attack tissues directly or create allergic and foreign body reactions, which produce histamine and a witch’s brew of other chemicals like cytokines, interleukins, leukotrienes, and prostaglandins. Since medicine has the propensity to study one chemical at a time, they are never going to consider the big picture that I am laying out. They will pick one of the hundreds of natural chemicals in the body that are causing inflammation, make a drug to
kill that chemical, and expect it to work miracles. When it doesn't and when it causes more problems than it solves, they will just make another one.

**A Closer Look At Yeast Toxins**

We hear a lot about bacterial toxins – strep toxins can cause rheumatic fever, clostridia toxins can cause colitis, and there are the devastating effects of botulism toxins or tetanus toxins. But you don’t hear much about yeast toxins, which the body has to immobilize and neutralize constantly.

Most of the breakdown of yeast toxins happens in the liver, placing strain on that organ’s detoxification pathways. The body will also dilute these toxins with fluids, which result in edema and fluid retention throughout the body. As noted above, toxins are also selectively stored in fat cells, creating obesity as a way to protect against toxicity. According to Zimmerman (1999), “Candida infection is characterized by subacute inflammatory responses and often inefficient host defense. Mannoproteins (mannans) from Candida have been shown to activate human leukocytes.” Thus, the immune system is compromised when yeast overgrows. Zimmerman’s study compared yeast mannan toxins to strong bacterial LPS (lipopolysaccharide) endotoxins of highly infectious Salmonella abortus equi, E. coli, Klebsiella pneumonia, and Salmonella enteriditis. His team found that mannan is a major immunostimulatory component from Candida albicans. Compared to LPS, mannan was less potent, but still introduced anti-inflammatory factors that increase pro-inflammatory cytokines.

This “less potent” response to yeast endotoxins is probably another reason why YOS is not investigated more widely – because it doesn’t cause the acute damage that is common in virulent bacterial infections. But it’s the chronic damage of years of YOS that is my concern. Yeast is the perfect parasite, which flies under the radar of host and doctor alike.

Let’s look at some other yeast toxins that are truly scary chemicals, like candidatoxin, gliotoxin, acetaldehyde, and zymosan. It’s no wonder that the body attacks these chemicals with a vengeance. The trouble is that yeast never give up, but our immune system does.
Dr. K. Iwata of Japan began studying Candida in 1967. He identified Drunk Disease, or Meitei-Sho, and found it to be related to the overgrowth of Candida albicans. Dr. Iwata learned that Candida albicans in the digestive tract is capable of fermenting sugar and other carbohydrates and producing alcohol. In individuals with Drunk Disease, a person’s alcohol levels can actually cause drunkenness and are measurable on a Breathalyzer.27

Dr. Iwata and his co-workers also discovered and described the effects of Canditoxin. "Canditoxin produced unique clinical symptoms. Immediately after...intravenous injection (of toxin) animals exhibited ruffled fur and unsettled behavior...Toxicity was so acute and severe that the majority of treated animals succumbed from an anaphylactic-type reaction within 48 hours."28

Further research elicited this comment from Dr. Iwata, "When injected into uninfected mice, Canditoxin exerted toxic manifestation in spleen lymphoid cells...This indicates the possibility that...the toxin produced in the invaded tissues may act as an immunosuppressant to impair host defense mechanisms involving cellular immunity..."29

This is a very important statement – that Canditoxin acts as an immunosuppressant impairing cellular immunity. This action sets the stage for autoimmune disease.

For the most part, mycologists, people in the plant world who study fungi, have been responsible for naming yeast toxins. Unfortunately, their discussion rarely extends to the human suffering caused by these toxins. A similar lack of attention is being paid to toxic mold.

**Gliotoxin**

Epipolythiodioxopiperazine, also known as gliotoxin, can negatively affect the immune system disrupting the DNA in white blood cells killing them outright.30 Significant levels of gliotoxin have been isolated from the vaginal secretions of women suffering vaginal candidiasis.31 Gliotoxin is a powerful immunosuppressant, inducing programmed cell death in thymocytes, splenocytes, and mesenteric lymph node cells.32 Gliotoxin can also deplete bone marrow and mature lymphocytes by attacking T and B cells.33 Of immense importance is gliotoxin’s ability to disrupt normal glutathione metabolism within the
This may explain the well known increase in chemical sensitivity that people with YOS report. Fortunately, ReAline contains L-methionine, the precursor to glutathione, so that your body can produce more glutathione as needed.

**Alcohol**

People don’t realize that Candida produces alcohol in the body – enough to make some people feel drunk and give a high reading on a Breathalyzer test. And why not? Yeast, after all, is used in the wine making process, and if you have enough sugar in your gut…or lots of fruit…then you have the makings of your own still!

A recent study showed that patients with Type II diabetes produce measurable levels of alcohol in the body. It’s likely coming from internal yeast. The consistently elevated sugar levels in diabetics make them susceptible to YOS and therefore the production of above-normal levels of blood alcohol.

Here’s a theory of mine that can’t be proven yet but that I want to get on record. A consequence of exposure to alcohol, whether generated from your own still or at the local bar, is fatty liver, which produces abnormal liver function tests. The U.S. incidence of fatty liver is 15-20% in the general population. It’s commonly higher in overweight and obese individuals, as is YOS. So, my question: Is fatty liver a consequence of YOS?

**Acetaldehyde**

When alcohol breaks down in the body, it produces acetaldehyde – the hangover chemical. If you have YOS and also drink alcohol, you are hit with a double dose of acetaldehyde hangover, or what we call “brain fog.” In fact, most people with YOS can’t touch alcohol because it makes them feel so rotten. Acetaldehyde is not only produced by yeast and alcohol but also when you breathe the exhaust from cars and cigarette smoke. Acetaldehyde is a particularly potent toxin that can damage all the tissues in the body, including the brain. It readily enters red blood cells and combines with proteins and enzymes, travels to all parts of the body, and even passes through the blood brain barrier. It damages the structure of red blood cells making them unable to squeeze through tiny capillaries to convey oxygen to needy tissues.
Acetaldehyde blocks the attachment of oxygen to red blood cells. Your brain uses 20 percent of all the oxygen that you inhale, but stiff red blood cells with diminished oxygen cut down that amount considerably, leaving you gasping for air and feeling woozy.

Acetaldehyde damages nerve cells and induces deficiencies of vitamin B1 (thiamine), which is important for nerve health; the energy and neurotransmitter vitamin B3 (niacin); and vitamin B5, which is crucial for normal brain function. It interferes with normal hormone metabolism affecting the pituitary, thyroid, and adrenal glands. It blocks cell membranes from accepting thyroxine (T4) and estrogen inside the cells for metabolic processing.

The enzyme aldehyde dehydrogenase plays a crucial role in maintaining low blood levels of acetaldehyde during alcohol breakdown. The mineral required for the enzyme to properly function is magnesium. This means that if there isn’t enough magnesium in the body, acetaldehyde builds up in the blood stream. Also, all along this pathway the intermediate chemicals can be toxic, and health problems arise when those intermediates cannot be cleared. Once again, a function of not enough magnesium and other nutrients to run metabolic pathways – often because these pathways are so overworked. When high levels of acetaldehyde occur in the blood, facial flushing, light-headedness, palpitations, nausea, and general “hangover” symptoms occur.

**NOTE:** Working with my ReMyte multiple-mineral formula, I discovered that molybdenum is also crucial in the chemical breakdown of acetaldehyde into acetic acid. If there is not enough molybdenum to do the job, acetaldehyde accumulates in tissues causing inflammation, pain, and muscle weakness.

**Zymosan**

Zymosan is a constituent of yeast cell walls and consists of protein-carbohydrate complexes. It is so pro-inflammatory that it is used in experimental research to induce inflammation, including acute liver damage. Specifically, in macrophages it induces pro-inflammatory cytokines, arachidonate mobilization, protein phosphorylation, and inositol
phosphate formation. Zymosan has been associated with psoriasis, and I’ve personally had patients whose psoriasis cleared up when their YOS came under control.

HORMONAL DYSFUNCTION AND AUTOIMMUNE DISEASE

There is an epidemic rise in the incidence of hormonal dysfunction and autoimmune disease in our population. I think this is directly related to YOS and yeast toxins. In the early 1980s in Toronto, I had a working relationship with an immunologist-endocrinologist who ran extensive blood tests to evaluate the immune systems of patients with chronic fatigue and YOS. In many of my patients we found a reduction in suppressor T-Cell function at a time when the only thing I knew about T-Cells was their deficiency in the newly discovered HIV infection. Those findings made me appreciate how disruptive yeast could be.

Few people are aware of the research of Dr. Ari Vojdani, a brilliant immunologist who I had the privilege of working with in the late 1980s when I used his yeast antibody testing in my office lab. Dr. Vojdani discovered that yeast toxins cross-react with most tissues in the body. Cross-reacting with hormonal tissue can result in blocking of hormonal receptor sites and therefore blocked function of organs such as the thyroid, adrenal, ovaries, and testes, leading to a host of symptoms.37 This type of cross-reactivity sets the stage for autoimmune disease, which I rename as Total Body Meltdown.

Dr. Vojdani, in a lecture I attended in 2008, said that over the years of its operation, his lab had tested 100,000 specimens of people with exposure to chemicals and heavy metals, including mercury. Testing revealed two sets of biomarkers in these people. Eighty percent showed immuno-activation and increased immunity. However, 20 percent showed evidence of immune deficiency. The majority of that 20 percent expressed autoimmunity and showed evidence of viral, bacterial, and spirochete (Lyme) infections.

There was a time when the medical community did not believe that the body produced antibodies against chemical molecules and metals. These chemicals and metals were called haptens and have to be bound to protein in order for the immune system to recognize them as the enemy. Haptens studied outside the body apparently don’t react and therefore led to the mistaken belief that they are harmless.
According to Dr. Vojdani, as far back as 1933, Jacobson demonstrated that chemicals applied to the skin developed hypersensitivity and IgE antibodies in the blood. This means that although a hapten by itself is not antigenic, if it gets into the GI tract and binds to proteins, then it immediately induces pro-inflammatory cytokines (like histamine). These cytokines open tight junctions, which allow the chemicals entry into the blood and into the brain. This is one mechanism that creates autoimmunity. When a chemical or metal binds to human tissue it becomes antigenic, and then the body reacts to it.

THYROID, ADRENALS AND YEAST

I think yeast toxins do great damage to the body when they block thyroid function. As you’ve read, yeast produces 178 different toxins in its normal life cycle. Some of these toxins can cross-react with thyroid tissue and cause hypothyroidism. As noted above, Dr. Aristo Vojdani proved that yeast toxins block and jam thyroid hormone receptor sites, creating thyroid hormone deficiency. Also, acetaldehyde, produced by yeast, blocks cell membrane receptors keeping the thyroid hormone, thyroxine (T4), from getting into cells to do its work. An underactive thyroid slows down the metabolic rate, lowers the temperature, and creates a hospitable environment for yeast. If your temperature is low, the yeast will grow and nothing can stop them until you warm up.

Dr. William Crook, author of The Yeast Connection, told me years ago that there is a connection between hypothyroidism and overgrowth of yeast in the body. As I treated patients using his protocol, I found that unless thyroid levels were optimized, women would have a return of their yeast-related problems after antifungal treatment. As thyroid levels decline, the cooler body environment better supports YOS. This leads to a wide variety of health problems as the overgrowth activates the immune system to cause inflammation and oxidation. Weight gain is another symptom of low thyroid, but YOS also promotes weight gain in several ways:

- Yeast will eat up available sugar, making the brain think that there is famine afoot.
- If the brain senses starvation, one survival mechanism is to slow metabolism by converting active T3 into inactive reverse T3.
Yeast can directly invade the thyroid gland causing Hashimoto's thyroiditis. This will compromise thyroid function.

Immune cells will rally to try to suppress YOS with an inflammatory response. Part of this response is the production of "growth factors." These hormone-like chemicals make fat cells multiply.

Fat cells will then produce the hormone estrone, which also makes fat cells multiply.

The brain will also encourage a high intake of foods that are a quick source of sugar-grains and sugar-loaded foods. This high grain/sugar diet further promotes yeast overgrowth. The process becomes a cycle that feeds itself.

The thyroid gland is in two sections, located on either side of the trachea (windpipe) in the neck. It controls the metabolism of all the cells of your body. If thyroid levels are low, or hypo, your metabolic rate is lowered and your temperature is lowered, causing symptoms such as sluggishness, fatigue, pain, difficulty waking up in the morning, obesity, coarsening of the hair and skin, constipation, frequent infections, heavy menstrual periods, and poor wound healing. As I mentioned earlier, a low temperature does more than make you tired; it also creates the perfect environment for yeast to grow. So no matter how hard you try to kill off your yeast, if you have low thyroid function causing low temperature, then the yeast are still encouraged to grow.

An article titled “98.6 Degrees Fahrenheit Ideal Temperature for Keeping Fungi Away and Food at Bay” in the December 30, 2010 issue of Science News reported on research by scientists at Albert Einstein College of Medicine of Yeshiva University. They found that the optimum human body temperature of 98.6°F (37°C) strikes a perfect balance. It makes us warm enough to ward off fungal infection but not so hot that we need to eat nonstop to maintain our metabolism. Compared to other animals, humans are hot, and that’s a good thing because the number of fungal species that can thrive and therefore infect an animal declines by 6 percent for every 1°C rise in temperature. In nature, tens of thousands of fungal species infect reptiles, amphibians, and other cold-blooded animals, but only a few hundred harm mammals.
Symptoms of low thyroid overlap with many other conditions, so it’s important to make an accurate diagnosis. Unfortunately, blood tests for the thyroid tend to be inaccurate and can miss many cases of low thyroid. The basal body temperature test, described below, can be more accurate than blood tests.

**Thyroid Disruptors**

I’ll be the first to admit that hypothyroidism is not all about yeast toxins. It can also be due to many types of hormone disruptors. Most likely it’s a combination of many things. Chemicals (pesticides, fertilizers, herbicides, plastics) and heavy metals can block thyroid function. There is acknowledged hormonal disruption in animals and fish from these toxins, so why would we think that humans could be immune? Simultaneously there exists a deficiency of minerals in the food supply due to depleted soil. The thyroid gland needs proper amounts of iodine, selenium, and seven other minerals to function properly; without these minerals, the thyroid swells into what is known as a goiter.

Estrogen overload, called estrogen dominance, and xenoestrogens, which I describe in *Hormone Balance* (Dean, 2005), can block thyroid function. We also know that estrogen is a stimulant to yeast growth. Xenoestrogens are natural or synthetic chemicals that mimic estrogen and can block estrogen receptors.

Mercury is another common cause of hypothyroidism, either by direct damage because of the close proximity of mercury fillings to the thyroid or by acting like an antibiotic in the intestines and allowing an overgrowth of yeast. Then yeast toxins assault the thyroid gland. Mercury sources include vaccines, coal burning plants, dental waste, crematoriums, and fish.

Fluoride in toothpaste and drinking water has a negative effect on thyroid function. There may be other reasons, but fluoride kills bacteria and probably allows yeast to overgrow, which produces yeast toxins that block the thyroid. One other reason can be the binding of magnesium by fluorine ions when fluoride compounds or fluoride-containing drugs break down in the body.
Supporting the Thyroid Against Yeast

The best way to support the thyroid is to follow the Yeast ReSet Protocol. As I mentioned earlier, yeast toxins cross react with the thyroid, jamming hormone receptors and potentially causing hypothyroidism. Many people cannot improve their thyroid function unless they balance their intestinal yeast.

The Yeast ReSet Protocol includes supportive minerals, ReMyte and ReMag, which help you reclaim your thyroid. The standard treatment for low thyroid function, even for natural medicine practitioners, is to give thyroid replacement therapy. It may be the more natural form of Armour thyroid, but it’s still treating with hormones instead of treating the reason the thyroid became weak in the first place. Beyond YOS, the main cause of hypothyroidism is mineral deficiency. I recommend taking ReMag and my multiple mineral, ReMyte. There are 12 minerals in ReMyte, nine of which are necessary for the creation, conversion, activation, and transport of thyroid hormones. These minerals are: iodine, selenium, zinc, molybdenum, boron, copper, chromium, manganese, and magnesium. The combination also supports the adrenal glands, pancreas, prostate, heart, and immune system.

You can ask your doctor for a pre- and post-iodine loading urine test from a lab called Doctor’s Data to determine your need for iodine. But think about it, the test is for just one mineral and not all 9 thyroid minerals. Everyone I have ever tested has been iodine deficient. So, I advise everyone to take low dose iodine to support the thyroid. Low dose iodine is what you will ingest when you take ReMyte, along with the eight other minerals that the thyroid requires. For more on thyroid disease, read my free eBook, Total Body ReSet for Your Thyroid.

Adrenal Fatigue

The most common reasons for adrenal fatigue and adrenal dysfunction are poor diet, intense emotional stress, chronic inflammation, and an underactive thyroid. The causes of adrenal fatigue are remarkably similar to those of YOS. A diet high in carbs and junk food feeds yeast. Intense emotional stress causes cortisol levels to rise, which stimulate YOS. Yeast toxins trigger chronic inflammation – their 178 different toxins impair the immune system and encourage more yeast.
The treatment for adrenal fatigue begins with sodium, which is vitally important for proper adrenal function. It’s ironic that doctors advise against salt exactly when we need it most – but, of course, I’m recommending the sodium in sea salt with its 72 minerals, not the processed and empty sodium chloride table salt.

Weak and depleted adrenal glands, as indicated by exhaustion, low blood pressure, chronic stress, and bouts of anxiety, indicate combined sodium and magnesium deficiency. If you start taking large doses of magnesium without replacing sodium, you may feel even worse. I recommend ¼ tsp. of sea salt in every liter of drinking water. How much water? Half your body weight (in pounds) in ounces of water.

There is an ongoing debate among natural medicine practitioners about what comes first, adrenal fatigue or thyroid insufficiency, and which one to treat first. I think it’s a moot point, because they are often not looking at the main causes of both conditions – mineral deficiency and YOS – which means you must treat the two conditions simultaneously.

The beauty of the Yeast ReSet approach and using ReMag and ReMyte is that these minerals are stabilized ions that are 100% absorbed at the cellular level and are not hampered by a leaky gut or poor digestion – symptoms which often accompany hormone imbalance.

Antibiotic Weight Gain In Cattle

Many years ago, when I was researching my book, *Death by Modern Medicine*, I learned that the cattle industry and animal husbandry in the U.S. give millions of pounds more antibiotics to their animals than the whole human population. In 2011, 30 million pounds of antibiotics were earmarked for livestock, making up 80 percent of total antibiotic sales that year. In spite of all efforts to curtail the excessive use of antibiotics in humans and animals in order to prevent drug resistance, the numbers keep increasing.\(^38\)

The vast majority of animal antibiotics are said to be used as a preventive measure against infection, specifically for shipping-stress that can lead to infection – but the main reason is that they promote growth.

It was this “growth-promoting” function of antibiotics that really got my attention. My first thought was that if antibiotics can cause weight gain in cattle, then they can do
the same to humans. Antibiotics kill off intestinal flora and lead to YOS, yeast toxins, bacterial dysbiosis, and the inevitable fluid retention and fat cell increase to dilute and hide those toxins. It all adds up to weight gain. Weight gain is very common in YOS. Our bodies retain pounds of fluid in an attempt to dilute the inflammatory toxins that yeast produces. Over time, tissue toxins and fluids create cellulite and lead to weight gain.

The gas produced by yeast causes dramatic abdominal bloating, which can increase your waist size up to 6 inches from one meal to the next! It’s also well known that toxins are stored in fat cells to try to protect more vulnerable body organs. You’ll be even more aware of this protective mechanism when you try to lose weight without a proper detox program, because as the fat cells die off, they release toxins that make you feel really crummy. So much so that you probably want to stop dieting. That’s why it’s important to follow the Yeast ReSet Protocol outlined in Chapter 6 and learn how to prevent die-off symptoms. Read about die-off, also known as Herxheimer’s, in the same chapter.

Impacting our environment are low concentrations of antibiotics that are measurable in all oceans, rivers, and streams around the world. Most of this contamination is seeping into bodies of water from animal farms. Everyone is affected.

What’s being done about the abuse of antibiotics in animal husbandry? Denmark is leading the way. A ban on growth-promoting antibiotics in Denmark began in 1999. This led to a decrease in usage from 453,200 pounds to 195,800 pounds within a year. A follow up report from Scandinavia found that taking away antibiotic growth promoters had minimal or no effect on food production costs.

**MTHFR Gene Mutation**

MTHFR is an enzyme, methylenetetrahydrofolate reductase to be exact. A gene mutation in this enzyme is the latest health diagnosis that doctors are investigating and identifying in greater numbers. Unfortunately, they say they don’t really know what causes it or how to treat it once they find it. It’s gotten many people very concerned that they have an incurable genetic disorder. I have another theory as to why there is this sudden epidemic of genetic mutations. First, consider that gene mutations take generations to evolved, they don’t just happen overnight. So, what could be causing them?
Researchers have determined that an MTHFR gene mutation is triggered by several factors that affect the methionine pathway, specifically the methionine synthase (MS) enzyme. If the MS enzyme is impaired, then the MTHFR gene mutation is expressed by producing, on average, 50 percent less methylfolate than someone without the mutation. There are several factors that impair methionine synthase and block its activity:

- Lack of a necessary substrate in the Methionine Pathway – methylfolate (Vit-B9), which comes mainly from green vegetables.
- Lack of cofactors such as methylcobalamin (Vit-B12), which vegetarians are deficient in.
- Exposure to inhibiting compounds such as heavy metals, solvents, chemicals, and toxins, especially acetaldehyde, which affects the whole population.

As noted above, acetaldehyde is produced by yeast, cigarette smoke, car exhaust, and alcohol. The double whammy of yeast is that it also produces alcohol in its life cycle, which then is converted into more acetaldehyde. All would be well if you had fully functioning aldehyde dehydrogenase enzymes.

It turns out that our old friend, magnesium, helps ensure proper activation and functioning of aldehyde dehydrogenase, meaning, you can’t break down acetaldehyde without it. It gets even more interesting, because the reason you are breaking down acetaldehyde is to turn it into acetate, which can then be used as fuel in cellular energy production within the Krebs Cycle. Another key point in this whole dynamic is that the Krebs Cycle relies on magnesium for 6 out of its 8 steps.

The MTHFR gene mutation may not exist unless you have magnesium deficiency, which is an area that needs to be studied. Genes don’t control the body; it’s the environment of the genes that sets the stage for genes being turned on or off. The biggest environmental effect comes from vitamins and minerals, the most important of which is magnesium.

Methylation expert Dr. Ben Lynch tells his patients that treating Candida to remove its toxins, repairing the gut, and balancing intestinal flora are the first steps in correcting methylation deficiency. He also lays out a list of nutrients he says are
necessary for methylation problems, such as methyl-B12, methylfolate, and probiotics, but unfortunately, he doesn’t mention magnesium.

WHAT’S NEW ABOUT YEAST

I’ve already said that I believe that chronic YOS could be the missing link at the root of many chronic and life threatening illnesses and diseases. To go even further, in this chapter I’m suggesting that overcoming yeast now or avoiding YOS altogether may actually serve as protection against developing future disease conditions.

My curiosity about what’s going on in the human body when it is unwell drives me to investigate possible causes. I’m always trying to get to the bottom of “why” something happens. So, my theme for this chapter is “What If?”

What if YOS is at the root of chronic illnesses? What if chronic YOS is treated appropriately? What if people not only feel better? What if they avoid future illness?

I know that’s a lot of What if’s, but I’ve observed and studied and treated YOS for almost 4 decades and I’ve noticed that those who maintain balance in their yeast colonies and intestinal flora are among the healthiest people I know. Conversely, people who I worked with decades ago who didn’t maintain a healthy balance of yeast have chronic health challenges. A large percentage of people who have chronic health challenges also have chronic YOS.

NEW YEAST CONNECTIONS

YOS is linked to and mistaken for a number of symptoms and illnesses. You will see an exhaustive list at the end of Chapter 4. Each person has an individual relationship with YOS, and symptoms associated with YOS will fall somewhere along a spectrum, from mild, almost invisible symptoms to serious, almost debilitating symptoms. Everyone can have a different focus for their particular yeast symptoms.

At the end of Chapter 4 you will have an opportunity to complete the long Candida Questionnaire to assess your own picture, but for now I want to introduce another way of looking at the impact of YOS.

On the lower end of the spectrum you might have a mild overgrowth of yeast but really not feel like you have any symptoms at all. Many women, for example would deny
that they have a problem with yeast because they’ve never had a vaginal yeast infection. However, a yeast infection for women or jock itch and athlete’s foot for men are not the first signs of YOS. When you read the list of possible YOS symptoms, I’m sure you were amazed at how many symptoms you have and just learned to live with.
CHAPTER 4: MAKING THE DIAGNOSIS

If allopathic medicine doesn’t “believe” in YOS, why do I not only believe it exists but think it’s responsible for a multitude of sins? Actually, I stand on the shoulders of several inquisitive doctors who recognized YOS and wrote books stating their concerns. Dr. Orian Truss and Dr. William Crook are the two most notable doctors who identified YOS almost 40 years ago, in the 1980’s. They cite evidence that the very first patients treated with antibiotics developed yeast symptoms. They report that drug companies began to bundle antifungals with antibiotics, but that practice was discontinued in the early 1950’s, leaving us completely vulnerable to YOS.

Most doctors don’t “believe” in YOS because they didn’t learn about it in medical school. They say Drs. Truss and Crook and anyone else treating YOS are just promoting a fad. Another ‘nail in the coffin’ is the lack of a definitive test that can tell unequivocally whether or not you have YOS.

Let’s review what is known about testing for yeast. YOS is not easy to identify because yeast grows in and on everyone, so it’s not a matter of whether you have it or not, but it’s the quantity of yeast in the individual that’s important. The only way you could tell if you have YOS is to miraculously have been tested for yeast antibodies when you were free of yeast and compare them to your current YOS condition.

There is no particular number of yeast organisms that can give you a diagnosis of YOS. One person may be able to tolerate a much larger load than the next. Also, someone can be allergic to yeast in even small amounts, giving them symptoms similar to someone with an extensive YOS.

What is definite about yeast is its ability to make you crave carbs, invade every skin surface and orifice, make you itch, scratch, develop rashes, and actually make you smell yeasty or moldy! These are sure signs and symptoms of YOS that help you know what’s going on in your body.

The Candida Questionnaire, which you will find below, will help you define your symptoms and put numbers to them.
Accepting The Candida Questionnaire

In the late 1980’s, I had a small lab in my family practice where we ran Candida antibody testing from blood samples. In the final analysis, I found I could get as much information from Candida Questionnaires at no extra cost to the patient.

A 1991 study out of the Naturopathic College, Bastyr University, proved the effectiveness of the Candida Questionnaire. The study showed that “Candida albicans found in stool culture correlated with symptomatic scores on Dr. William Crook’s Candida Questionnaire.” This study proved that practitioners and patients could rely on the Candida Questionnaire for screening purposes. 39

In a 2001 study, Crook’s Candida Questionnaire was filled out by 380 patients who were evaluated before and after a three-week treatment with the antifungal drug nystatin. The questionnaires were compared to a control group. The statisticians concluded that using only 7 questions of Crook’s original 70-item questionnaire could predict a positive response in 95% of patients. The 7 questions are called the Fungus-Related-Disease-Questionnaire-7, or FRDQ-7, which you will find in this chapter. 40

All in all, I’m in agreement with many practitioners who say that the most important test for Candida overgrowth is whether or not you have ever taken antibiotics and having a high score on the Candida Questionnaire.

YEAST SYMPTOMS

Before filling out your questionnaire, I’d like to make you familiar with the wide range of symptoms associated with YOS. You may not even be aware that some of your current symptoms are caused by yeast. Dr. William Crook, a pediatrician, was one of the first doctors to make the yeast connection. He connected symptoms that are so widespread that it’s best to break them into several different categories and explain how yeast can be the root cause. I’ll also include a list of the illnesses and conditions that have been misdiagnosed in people with YOS.

There are an overwhelming number of symptoms included in my lists, but I wanted the list to be exhaustive. The most common symptoms are in the following
categories: digestive problems, hormonal imbalance, and emotional and mental challenges.

Hormonal imbalance is difficult to diagnose at the best of times, and it’s almost impossible to determine if yeast toxins blocking receptor sites cause it. If you are on hormone replacement, yeast toxins can also block those hormones.

**General Symptoms**

This group of symptoms is difficult to categorize into a body system, so that’s why I call them general symptoms caused by yeast toxins. Most people with *YOS* experience these symptoms some of the time, but they associate them with stress and not with yeast. It is actually quite amazing how much you can chalk up to stress, but as you will find out, stress itself causes yeast to overgrow.

<table>
<thead>
<tr>
<th>Anemia</th>
<th>Food sensitivities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brain fog</td>
<td>Headaches</td>
</tr>
<tr>
<td>Chemical sensitivities</td>
<td>Irritability</td>
</tr>
<tr>
<td>Confusion</td>
<td>Lack of coordination</td>
</tr>
<tr>
<td>Difficulty in concentration</td>
<td>Spaced-out</td>
</tr>
<tr>
<td>Drowsiness</td>
<td>Sweet cravings</td>
</tr>
<tr>
<td>Eye floaters</td>
<td>Vision failing</td>
</tr>
<tr>
<td>Fatigue</td>
<td>Wooziness</td>
</tr>
</tbody>
</table>

**Misdiagnosed as:**

<table>
<thead>
<tr>
<th>Anxiety</th>
<th>Alzheimer’s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Panic attacks</td>
<td>Sleep apnea</td>
</tr>
<tr>
<td>Insomnia</td>
<td>Adrenal fatigue</td>
</tr>
<tr>
<td>Depression</td>
<td>Adrenal exhaustion</td>
</tr>
<tr>
<td>Chronic Fatigue Syndrome</td>
<td>MS</td>
</tr>
<tr>
<td>Fibromyalgia</td>
<td>Hypoglycemia</td>
</tr>
<tr>
<td>Dementia</td>
<td></td>
</tr>
</tbody>
</table>
Skin Conditions
Most skin rashes can be made worse by YOS. They can either be due to a physical yeast infection on the skin or a result of yeast toxins being excreted through your sweat. For example, symptoms of psoriasis can be due to a yeast toxin called Zymosan. Since the standard treatment of skin rashes is cortisone creams, it’s very important to know that cortisone can grow yeast and make it worse in the long run.

Acne
Acne rosacea
Athlete’s foot
Contact dermatitis
Cradle cap in babies
Diaper rash in babies
Eyelids flaky
Fungal skin infections (tinea versicolor, ringworm, seborrhea)
Hives

Intertrigo – yeast infection of the skin folds; armpits, groin, under breasts
Jock itch
Nail symptoms – brittle, discolored, peeling, thickening
Strong body odor resistant to soap or deodorant
Rashes
Thrush, oral yeast infection

Misdiagnosed as:
Acne
Eczema
Psoriasis
Rosacea

Ear, Nose, Eye and Throat Symptoms
Most doctors and patients feel that many of the following symptoms are related to hay fever allergies. That’s partly correct because many people with YOS also have allergies as a result of their compromised immune system, and the fact that the mucus membranes of the nose and throat are so irritated by yeast that they are defenseless against pollens, chemical smells, and odors.

Carolyn Dean MD ND
<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Misdiagnosed as:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allergies</td>
<td>Nasal septum deviation</td>
</tr>
<tr>
<td>Asthma</td>
<td></td>
</tr>
<tr>
<td>Bad breath</td>
<td></td>
</tr>
<tr>
<td>Blisters in the mouth</td>
<td></td>
</tr>
<tr>
<td>Bronchitis</td>
<td></td>
</tr>
<tr>
<td>Burning or tears in eyes</td>
<td></td>
</tr>
<tr>
<td>Canker sores</td>
<td></td>
</tr>
<tr>
<td>Coated tongue</td>
<td></td>
</tr>
<tr>
<td>Cough</td>
<td></td>
</tr>
<tr>
<td>Coughing up mucus (white in color or clear)</td>
<td>Reduced hearing</td>
</tr>
<tr>
<td>Deafness</td>
<td>Scratchiness in throat</td>
</tr>
<tr>
<td>Dry mouth</td>
<td></td>
</tr>
<tr>
<td>Dry throat</td>
<td></td>
</tr>
<tr>
<td>Earaches</td>
<td></td>
</tr>
<tr>
<td>Ear itchiness</td>
<td></td>
</tr>
</tbody>
</table>

**Gastrointestinal Symptoms**

For people who have the following GI symptoms, the first diagnosis often made is that of IBS (Irritable Bowel Syndrome). However, having written the book *IBS for Dummies*, I learned that most people with IBS and IBD have a degree of YOS, if not from the disease itself, then certainly from the antibiotics they take for bowel infection.

<table>
<thead>
<tr>
<th>Symptoms</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Abdominal cramps</td>
<td>Abdominal pain</td>
</tr>
<tr>
<td>Abdominal distention</td>
<td>Abdominal gas, excessive</td>
</tr>
<tr>
<td>Abdominal bloating</td>
<td></td>
</tr>
</tbody>
</table>

Carolyn Dean MD ND 75
Belching
Can’t stand a tight waistband or belt due to bloating
Constipation with bouts of diarrhea
Diarrhea
Excessive belching
Excessive mucus in stool
Food sits in the stomach
GERD, acid reflux, heartburn
Hemorrhoids
Hiatus hernia
Rectal itching
Rectal burning
Reflux
Vomiting

Misdiagnosed as:
Crohn’s disease
Colitis
Heartburn, GERD, Acid reflux disease
IBS constipation
IBS diarrhea

Genitourinary Symptoms
Any mucus membrane can be subject to the irritation and inflammation of yeast and yeast toxins. Vaginal symptoms are often associated more directly with YOS and therefore are self-treated with vaginal creams. The same can be said for rashes on the penis.

Bed-wetting
Impotence
Jock itch
Painful intercourse
Prostatitis
Penile itching or discharge
Urinary burning
Urinary frequency
Urinary tract infections (bladder and/or kidney)
Urinary urgency
Vaginitis
Vaginal burning
Vaginal discharge
Vagina itching
Vulvar rash

Misdiagnosed as:
Bladder infection
Bacterial vaginosis
Chronic Bladder infection
Interstitial cystitis

Carolyn Dean MD ND
Erectile dysfunction

Kidney infection

**Heart Symptoms**
Gas and bloating in the small intestine can press up under the diaphragm and interfere with normal diaphragmatic breathing. Gas building up under the diaphragm can even put pressure on the heart and potentially interfere with the heart rhythm.

Chest pain

Heart palpitations

Heart arrhythmia

**Musculoskeletal Symptoms**
When yeast toxins invade the blood stream they can settle in the joints causing painful inflammation and swelling. Doctors in the West don’t seem to understand how this can happen. However, in my Chinese Medicine training, I learned that certain internal meridians divert infection and inflammation to the joints in order to protect the internal organs. How smart of the body! But not so smart when we treat joint pain with drugs that try to suppress the inflammation and not get to the root cause and treat YOS.

Joint pain with or without swelling

Muscle tightness and spasms

Muscle aches

Tightness of the chest wall

Muscle weakness

**Misdiagnosed as:**
Arthritis

Rheumatoid arthritis

Fibromyalgia

Frozen shoulder

Fibrositis

Heart disease

**Hormonal Imbalance**
As I mentioned earlier, I learned from Dr. Ari Wojdani early on in my Candida training that Candida toxins cross-react with most of the organs in the body. They also block receptor sites on hormonal organs like the thyroid, ovaries, and adrenal glands.
Cold hands and feet        Lack of libido
Dysmenorrhea             Menstrual irregularities
Hyperthyroidism          Premenstrual mood disorders
Hypothyroidism           Prostatitis
Impotence

**Immune Deficiency and Autoimmune Disease**

The immune system is the first line of defense against YOS and against yeast toxins, but the immune system can only do so much. It can become overloaded with toxins so that it doesn’t defend against common ailments. Yeast toxins can cross-react with body tissues, which can cause the immune system to attack these tissues in an autoimmune disease process.

The symptoms of an impaired immune system and autoimmune disease are very extensive. When your immune system is run down you are more susceptible to just about any disease. Unfortunately, prednisone is the usual drug treatment for suspected autoimmune disease, and steroid drugs encourage YOS.

Lupus                     Gluten enteropathy /celiac disease
Rheumatoid arthritis      Grave’s disease (hyperthyroidism)
Hashimoto’s thyroiditis   Non-specific blood test abnormalities
(hypothyroidism)

**Central Nervous System**

Numbness                  Tingling sensations

**Misdiagnosed as:**

Multiple Sclerosis
Mental/Emotional Symptoms

Antisocial                      Feeling drunk with no alcohol intake
Anxiety                        Feeling hung over with no alcohol intake
Changes in taste, sight, hearing, smell  Hyperirritability
Cravings or addictions for alcohol, sugar, carbs, fruit Impaired memory
Crying spells                   Nervousness
Depression                      Panic attacks

Misdiagnosed as:

Anxiety disorder  Manic Depression
Bipolar

YOU’VE LISTED EVERY SYMPTOM POSSIBLE!

That is precisely the problem with diagnosing Candida. It can cause every symptom imaginable. That’s why allopathic doctors go out of their way to ignore it, because it’s so complex. But, before you get discouraged, answer the Seven Questions below.

I introduced you to the Seven Questions already, but let me tell you more. This simple questionnaire is the easiest way to decide if you have YOS. If you do, then you no longer have to worry about what’s going on; now you know, and you can proceed to learn more about YOS and then follow the Yeast ReSet Protocol in Chapter 6.

THE SEVEN QUESTIONS

Dr. Heiko Santelmann, from Oslo, Norway, designed the FRDQ-7 (Fungus Related Disease Questionnaire-7) to diagnose YOS. This questionnaire can help you decide whether you should look further into YOS as a cause of your inflammation and chronic symptoms. If you answer positively to two or more of these questions, you possibly have YOS and could benefit from the Yeast ReSet Protocol.
Scoring the FRDQ-7

0 = none
1 = occasional or mild
2 = frequent or moderately severe
3 = severe or disabling

Fungus Related Disease Questionnaire-7 (FRDQ-7)

1. Have you, at any time in your life, taken broad-spectrum antibiotics? (0 or 3)
2. Have you taken tetracycline or other broad-spectrum antibiotics for one month or longer? (0 or 3)
3. Are your symptoms worse on damp, muggy days or in moldy places? (0 or 3)
4. Do you crave sugar? (0 or 3)
5. Do you have a feeling of being "drained"? (0, 1, 2 or 3)
6. WOMEN: Are you bothered with vaginal burning, itching, or discharge? (0, 1, 2 or 3)
   MEN: Do you have burning, itching, or discharge from the penis?
7. Are you bothered by burning, itching, or tearing of your eyes? (0, 1, 2 or 3)

TOTAL SCORE FOR FRDQ-7:

Score 0-3 = FRD unlikely
Score 4-9 = FRD probable
Score 10-21 = FRD almost certain
It’s also very helpful to fill out the long Candida Questionnaire, which is below. It will clarify your diagnosis and show you the most common symptoms of YOS, but first, I’ll run through the various Candida tests that you may come across and explain why they are mostly ineffective and why the Candida Questionnaire and a therapeutic trial of Yeast ReSet Detox provides the best diagnosis.

**Denying The Spit Test**
If you’ve done any yeast research on the net, you’ve come across the Candida Spit Test. Here’s how it’s done. First thing in the morning, before brushing your teeth or drinking water, spit into a clear glass of water. Wait 30 minutes – if the clot of saliva develops legs (threads that head to the bottom of the glass), presumably you have yeast.

I wish it were so. It would be great to have a reliable test for Candida. However, this is not a reliable test. A simple build up of mucus from a diet high in sugar and dairy can produce excess mucus secretion and a positive spit test. Simple dehydration also thickens your mucus. When you get up in the morning after 7-8 hours sleep, not having taken any water, your mouth is probably dry and has a coating of mucus. This mucus can have legs.

**Yeast Lab Tests**
We are living in a time of unlimited testing but of limited funds. Some holistic doctors won’t even see a new patient until they have had a few thousand dollars worth of testing. You might even be told you must have a series of costly tests before and after a particular antifungal treatment to see if it’s working. But shouldn’t you know that the treatment is working because you feel better?

I’ll briefly go through the pros and cons of the available Candida tests, but as you can tell, I have a bias against Candida testing and rely on the Candida Questionnaire to record Candida symptoms and to decide if you are suffering from YOS. I also recommend filling out the Questionnaire every 1-3 months to follow your progress. Faithfully recording the numbers helps you see that you are improving even if your progress seems too slow and you don’t think you are seeing enough results. In this process, you are your own clinical trial of one person as you use the Yeast ReSet Protocol. Your symptoms
improving is all the proof and validation that you need that it is working – not some shift in an equivocal blood test.

The labs that perform Candida testing, often as part of their GI testing, are Doctor’s Data, Great Smokies, Great Plains. They can be located on the internet. They require a practitioner’s prescription to order the tests.

1. Candida Antibodies
As I mentioned above, Candida antibody testing does not give you an unequivocal Yes or No answer to diagnose YOS. The accuracy of the test varies from person to person and test to test. The most worrisome readings are of the false negative variety. If Candida is still in the “stealth” stage, antibodies may not have formed and therefore can’t be measured. The opposite can happen if the immune system is so weakened from chronic YOS that antibodies don’t form and the test is a false-negative. Another complication can occur if the immune system has fought Candida in the past; the infection could be gone, yet antibodies are still present and produce a false-positive test.

2. Stool Testing for Candida DNA by PCR
a. Polymerase chain reaction (PCR) testing, in general, is rapid, sensitive, and yields specific results. However, its high sensitivity can produce false-positives due to detection of small numbers of Candida cells that are normally present, or due to the lingering presence of dead Candida cells. Thus, anyone could be positive using a PCR Candida test since we all naturally have some Candida.

b. The Comprehensive Stool and Digestive Analysis (CSDA) evaluates the immune status of patients with IBS, indigestion, malabsorption, and other GI-related problems. The focus is on digestion, absorption, bacterial balance, metabolism, and yeast. Some labs also offer a parasitology component with the CDSA test that evaluates for parasites using microscopic examination and EIA testing (Enzyme Immunoassays). The same problem ensues with antibody testing. Yeast is a normal finding in the stool and the amount that’s found can vary greatly from patient to patient.
c. GI Effects Profile Using DNA Analysis is used to identify hidden parasites and levels of pathogenic and beneficial bacteria and yeast. The same critique applies as with previous testing – everyone has yeast and there is no particular amount that defines whether it is too much for you.

3. Urinary Arabinitol Test
D-arabinitol is a common metabolite of Candida detected by gas chromatography and mass spectrometry. It can be tested in blood serum, saliva, vaginal fluid, and urine samples. It can help to make the diagnosis of Candida overgrowth, but it’s also not a Yes or No test either. The diagnosis of yeast overgrowth depends on the amount of arabinitol present.

4. β-Glucan Assay. β-D-Glucan is a major structural component of fungal cell walls and can be quantified by reacting it with a particular coagulation enzyme. It can be used as a secondary test for confirming the diagnosis of Candida overgrowth.

5. Candida Cultures
Swabs from sites of oral thrush, skin lesions, vaginal mucosa, urine samples, and stool samples can identify Candida albicans, but not the level of overgrowth. Most labs that test for yeast overgrowth perform drug susceptibility testing for Candida if it is present in moderate or high amounts.

6. Fungal Blood Culture is what allopathic medicine requires to confirm a diagnosis of systemic yeast infecting the blood stream, but in this book, I’m not talking about a blood infection of yeast. I’m talking about intestinal YOS where the toxins from yeast flood the body, not the yeast itself.

7. Live Cell Analysis
I’ve taken a short course in live cell blood analysis and talked to practitioners about their experience with Candida using this method. When questioned about finding Candida in the blood that they examine, they say they can see “evidence of fungus”, not actual
Candida buds or threads. However, in Chapter 3, I discuss studies where Candida has made its way into the blood stream. I think there can be varying degrees of Candida in the blood, but a healthy immune system will not allow it to flourish.

**SO YOU HAVE YEAST!**

People with YOS are often investigated for and diagnosed with serious illnesses like the ones listed above in this chapter under Misdiagnosed. They are also given drug treatments for those conditions with little success and frequently with worsening of their condition. Already made toxic with yeast’s 178 chemical antigens, taking medications for YOS symptoms often makes things worse. A vicious cycle of symptoms and inappropriate treatments along with unhealthy habits and lifestyle choices continue to support YOS, often to chronic proportions.

I’m not saying that doctors are intentionally misdiagnosing their patients and treating them with unnecessary drugs. They are just doing what we all learned in medical school: diagnose disease and treat disease symptoms with drugs. In my clinical case stories, I share my experience of working with patients who have been unsuccessfully treated for serious illnesses only to find that their actual problem was an overgrowth of yeast.

It shouldn’t come as any surprise that yeast infection (and therefore YOS) is more prevalent in women than men. That’s why many doctors think only women have problems with yeast. Vaginal yeast infections are often the only time women consider the problem of yeast. In fact, most of my patients have no idea that their yeast vaginitis is a result of YOS. Men are also subject to YOS, but the only visible expression may be a rash on the penis, groin, or feet. See Chapter 10 for information on treating yeast and fungus in men.

I know from my previous clinic practice that about 80 percent of my patients had some degree of YOS. Because YOS isn’t a phenomenon that gets research funding, the incidence of people dealing with this problem is largely unknown. However, most sources agree that between 75 and 80 percent of adult women will have a vaginal infection at some point in their life, and nearly 50 percent will have more than one
vaginal infection. See Chapter 9 for more specific information on treating yeast and fungus in women.

Statistics on fungal infections like jock itch that plagues men indicate that up to 40 percent of men have some sort of fungal invasion before they hit 70, and after that, the numbers tend to rise.

As you will see in Dr. Crook’s Candida Questionnaire, there are dozens of symptoms related to YOS. In the following questionnaire there are 14 questions about your health history, then 23 major symptoms and 33 minor symptoms related to YOS. The maximum possible score is 562. Women’s scores can run higher than men’s because there are seven items that apply exclusively to women, while only two apply exclusively to men. The questionnaire can be printed up and filled out. Make several copies so you can fill out the form every few months to follow your healing progress.

When you fill out your Questionnaire the second time and all subsequent times, just keep track of the numbers in the B and C Sections. Section A is your past medical history, which won’t change.
CANDIDA QUESTIONNAIRE AND SCORE SHEET

After reading Chapters 1 and 2 and answering The Seven Questions, you may already have determined that you have Candida overgrowth. For you, the hard part is over. For those of you who can’t decide, the Candida Questionnaire will uncover all possible signs and symptoms of yeast and give you a score that’s indicative of your YOS problem.

Questions in Section A focus on your Medical History – factors that promote the growth of Candida albicans and that frequently are found in people with yeast-related health problems.

In Section B, you’ll find a list of 23 Symptoms that are often present in patients with Candida-related health problems.

Section C consists of 33 General Symptoms that are sometimes seen in people with Candida-related problems – yet they also may be found in people with other disorders.

Filling out and scoring this questionnaire should help you (and your health care practitioner) evaluate the possible role Candida albicans contributes to your health problems.

Section A: Medical History

<table>
<thead>
<tr>
<th>Question</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Have you taken tetracyclines or other antibiotics for acne for 1 month (or longer)?</td>
<td>35</td>
</tr>
<tr>
<td>2. Have you at any time in your life taken broad-spectrum antibiotics or other antibacterial medication for respiratory, urinary, or other infections for two months or longer, or in shorter courses four or more times in a one-year period?</td>
<td>35</td>
</tr>
<tr>
<td>3. Have you taken a broad-spectrum antibiotic drug – even in a single dose?</td>
<td>6</td>
</tr>
<tr>
<td>4. Have you, at any time in your life, been bothered by</td>
<td></td>
</tr>
</tbody>
</table>
persistent prostatitis, vaginitis, or other problems affecting your reproductive organs?
25

5. Are you bothered by memory or concentration problems – do you sometimes feel spaced out?
20

6. Do you feel ‘‘sick all over’’, yet, in spite of visits to many different physicians, the causes haven’t been found?
20

7. Have you been pregnant...
Two or more times?
5
One time?
3

8. Have you taken birth control pills...
For more than two years?
15
For six months to two years?
8

9. Have you taken steroids orally, by injection or inhalation…
For more than two weeks?
15
two weeks or less?
6

Moderate to severe symptoms?
20
Mild symptoms?
5

11. Does tobacco smoke really bother you?
10

12. Are your symptoms worse on damp, muggy days or in moldy places?
20
13. Have you had athlete’s foot, ring worm, ‘‘jock itch’’ or other chronic fungous infections of the skin or nails? Have such infections been...

Severe or persistent? 20
Mild to moderate? 10

14. Do you crave sugar? 10

TOTAL SCORE, Section A

Section B: Major Symptoms
For each of your symptoms, enter the appropriate figure in the Point Score column:

If a symptom is occasional or mild ............................. 3 points
If a symptom is frequent and/or moderately severe ....... 6 points
If a symptom is severe and/or disabling ....................... 9 points

Add total score and record it at the end of this section.

Point Score

1. Fatigue or lethargy

2. Feeling of being ‘‘drained’’

3. Depression or manic depression

4. Numbness, burning or tingling

5. Headache

6. Muscle aches
7. Muscle weakness or paralysis

8. Pain and/or swelling in joints

9. Abdominal pain

10. Constipation and/or diarrhea

11. Bloating, belching, or intestinal gas

12. Troublesome vaginal burning, itching, or discharge

13. Prostatitis

14. Impotence

15. Loss of sexual desire or feeling

16. Endometriosis or infertility

17. Cramps and/or other menstrual irregularities

18. Premenstrual tension

19. Attacks of anxiety or crying

20. Cold hands or feet, low body temperature

21. Hypothyroidism

22. Shaking or irritable when hungry
23. Cystitis or interstitial cystitis

TOTAL SCORE, Section B

Section C: Other Symptoms

For each of your symptoms, enter the appropriate figure in the Point Score column:

If a symptom is occasional or mild ........................................ 1 point
If a symptom is frequent and/or moderately severe ........ 2 points
If a symptom is severe and/or disabling ....................... 3 points

Add total score and record it at the end of this section.

1. Drowsiness, including inappropriate drowsiness

2. Irritability

3. Incoordination

4. Frequent mood swings

5. Insomnia

6. Dizziness/loss of balance

7. Pressure above ears . . . feeling of head swelling

8. Sinus problems . . . tenderness of cheekbones or forehead

9. Tendency to bruise easily
10. Eczema, itching eyes

11. Psoriasis

12. Chronic hives (urticaria)

13. Indigestion or heartburn

14. Sensitivity to milk, wheat, corn, or other common foods

15. Mucus in stools

16. Rectal itching

17. Dry mouth or throat

18. Mouth rashes, including ‘‘white’’ tongue

19. Bad breath

20. Foot, hair, or body odor not relieved by washing

21. Nasal congestion or postnasal drip

**Scoring Your Long Candida Questionnaire**

The maximum possible score is 562.
The maximum score for your history is 236.
The maximum score for your symptoms is 326.
Yeast-connected health problems are almost certainly present in women with scores more than 180, and in men with scores more than 140.
Yeast-connected health problems are probably present in women with scores more than 120, and in men with scores more than 90.
Yeast-connected health problems are possibly present in women with scores more than 60, and in men with scores more than 40.
With scores of less than 60 in women and 40 in men, yeast is less apt to be causing health problems.
SECTION TWO: YEAST BALANCE PROGRAM

CHAPTER 5: THE YEAST RESET DIET

Click to “What to Avoid and What to Eat” in this chapter for lists of friendly foods and not so friendly foods. When you know what foods are in your future, you can read the whole chapter for the details of how they are going to help you get control of your yeast.

The average Western diet that most of us grew up on is a magnet for yeast. We eat processed food devoid of fiber and laced with sugar. Animals pumped full of antibiotics, hormones and other drugs pass on those chemicals to the meat and dairy products we consume. Hybridized wheat contains ten times the gluten of wheat grown 100 years ago. Most people don’t eat traditional fermented foods that help balance friendly flora in the gut.

The increased mucus we feel in our throat, nose, and sinuses after a dish of ice cream, a donut, or candy eventually coats all the mucus membranes throughout the body when we eat these foods. This mucus layer forms the best environmental habitat for yeast to grow and must be eliminated to bring yeast into balance.

Most yeast-free diets, including the one in this book, are based on Dr. William Crook’s original advice. The diet avoids wheat, dairy, and sugar, eliminating all the simple sugars that feed yeast in the intestines. I’ve expanded the diet to be gluten-free as well.

It is a high protein diet with lots of vegetables and limited fruit. Atkins, Sugar Busters, The Paleo Diet, and The South Beach Diet all avoid grains, dairy, and sugar to some extent, which lends to their success, but none of them acknowledge that they are shifting the balance of yeast organisms in the gut.

Even The Specific Carbohydrate Diet (SCD) for colitis and Crohn’s is a yeast-free diet. It is designed to strictly avoid any simple sugars that feed bacteria in the intestines. When I wrote the IBS Cookbook for Dummies, I contacted the SCD people and told them their diet was not only controlling bacteria but controlling yeast as well.

With the various diets I mentioned, a lot of people are unconsciously eating a yeast-free diet, but because they don’t include the other steps (probiotics and antifungals),
the diets aren’t as successful as they could be. In other words, the *Yeast ReSet Diet* and *Yeast ReSet Detox* not only balances yeast, but also helps with weight loss, energy, flexibility, and focus.

**NOTE:** Please be aware that if you eat more than 20g of protein at any one meal, the excess turns to sugar by a process called gluconeogenesis. This is very important in diets that tend to be high protein: *Yeast ReSet Diet*, Paleo diet, and Ketogenic diet.

Let’s review what I’ve been saying about yeast and gain some inspiration from Cicily, who overcame the yeast scourge in her life.

**Cicily’s Story**
Why have we become a nation of passive eaters, gaining weight at the drop of a hat is a complex question with complex answers. The following story may help sort out some of the complexity.

I just got off the phone with Cicily, a friend I haven’t talked to in a long while. I was surprised to hear that she was on blood pressure medication and being offered a statin drug for high cholesterol. I knew Cicily was overweight and has been for years; she was always meaning to go on a diet. I thought before going on medication she would have investigated more traditional options of diet and supplements and tried to lose weight. I wondered what was going on.

I was surprised because Cicily was always so vivacious and energetic and is also a health professional trained in the healing arts. A red head with a beaming smile, Cicily is a person who seems to know everyone in the traditional medicine field and loves to make introductions.

For all her knowledge and experience, I assumed she knew what to do to stay healthy. Instead, Cicily said she had been in an “English muffin and sugar-induced comatose state” for the past several years! She added that, like so many people, she was also paralyzed by all the conflicting information about what constitutes an optimal diet. Soy is good, soy is bad; low fat, high fat, low carb, high carb - it was all so overwhelming.
that Cicily said she just gave up. Being on a blood pressure drug and facing the possibility of taking another drug for cholesterol was finally waking her up.

She told me she was “committed to a major weight loss objective” but didn’t quite know where to start. Knowing that weight and yeast are so connected, I asked Cicily for some more information, asking the Seven Questions that relate directly to YOS. I found out that Cicily had taken several months of antibiotics the previous year for a tooth abscess. She said the smell of damp moldy places drives her crazy – literally. She gets very irritable and irritated in those environments. She craves sugar and feels very drained to the point of exhaustion. Interestingly enough, Cicily is not troubled by constant vaginal infections, which so many people think are the hallmark of an overgrowth of yeast. When I got to the question about itchy burning eyes Cicily almost said no, but then remembered that she recently started using eye drops because her eyes seemed dry and tired.

**Blame the Yeast**

Cicily asked me what I was getting at. I told her that from her answers she likely had YOS, which was driving her sugar cravings and causing her inability to lose weight. Excess sugar feeds yeast and also causes weight gain, which by itself elevates blood pressure. I told Cicily to consider that the body only has about 1-2 teaspoons of sugar in the blood stream at any one time and there are 10 teaspoons in a can of soda. Sugar loading from soda, donuts, and desserts make for excess sugar that also causes inflammation in the body, both of which are factors in cholesterol elevation and heart disease as well as the obvious weight gain. I told Cicily that many of her symptoms were due to yeast!

“Cicily,” I said, “Stop blaming yourself; it’s not you that is craving sugar and making you fall off your diet all the time, it’s yeast!” It may seem simplistic, but having something else to blame allows people to stop blaming themselves and puts another perspective on the whole sugar craving and weight gain picture.

Cicily said she knew about Candida albicans, had read Dr. Crook’s books, and treated her patients for it, but never thought she could have it. But, she said, it was obvious from her history of antibiotic use and her symptoms that she really did. I think
that was when she used the word denial. She said that being a health practitioner, you ride
the extremes. You either imagine you have everything or feel nothing can touch you.
Cicily then said it had always bothered her that patients were so often turned away from
their doctor’s office when they tried to get treatment for yeast that was more than just
vaginitis but not a full blown blood infection with yeast that causes a fever and usually
happens in people who are in hospital. She said that’s the problem with this type of in-
between yeast: regular doctors don’t know that it exists and don’t know what to do with
it.

I told Cicily that the medical definition of yeast as either infecting the skin and
mucus membranes of the mouth or vagina or infecting the blood was far too limited.
Neither definition fit most of the woman I used to see in my practice or the clients of my
telephone consulting practice. The third category is simply called YOS. YOS is stimulated
by sugar leading to invasive yeast and leaky gut, yeast allergy with burning and itching,
and reactions due to the 178 toxic chemical antigens it produces.

“You can see the big picture when I talk about blaming yeast,” I said. She
groaned an affirmation. I continued. “In the past fifty years we have bombarded the
delicate ecological environment of our intestines with drugs and foods that invisibly but
absolutely encourage YOS.”

Getting back to Cicily’s problem, I told her the practical aspect to blaming yeast,
because when you identify yeast as part of the problem and begin to treat yeast and the
leaky gut that it creates, your program becomes much more than just a diet. With more
tools to work with, you have a greater chance of success.

**FOOD CRAVINGS**

It’s 3 o’clock in the afternoon and your internal clock knows the time; you are heading to
the vending machine or the cupboard for your afternoon candy bar, soda, or pastry. These
sweet treats offer a happy place for yeast to flourish and it doesn’t take many days of
sugary confections before the yeast in your body (remember, we all have yeast) start to
proliferate.

Of course, you know this: when you start eating sugary treats or drinking soda,
you can’t stop – it’s impossible to just have one. But what you may not know is that it is
not necessarily your brain or your stomach that is craving the sugary treat. As I mentioned above in Cicily’s story, the yeast population is craving sugar so that it can continue to grow and multiply in your body. So, if you are craving sugar like never before and feel powerless to combat the cravings and feel like you have no willpower to fight those cravings, then you are dealing with an overgrowth of sugar-craving yeast! It’s actually not your fault – it’s the yeast!

Until you get your yeast under control, you are going to have a heck of a time using your brain and your willpower to combat the cravings of a growing organism that’s invading your body. You need to stop feeding the yeast. Think of your yeast as having its own insatiable yeast craving brain that overrides your willpower! For those of you who remember Star Trek, think of them as The Borg.

Food cravings are at one end of the spectrum of a yeast-feeding diet, and I would suggest that anyone with food cravings is likely to have an overgrowth of yeast. Of course, people crave different comfort foods for emotional reasons – thus the phrase “emotional eating.”

Emotional eating, whether it’s from stress or boredom, which includes loading on sugary carbs and sodas, contributes to YOS. It is difficult for most people to distinguish whether the brain is craving sweets for emotional comfort or whether the yeast is craving sweets for its own world domination! But if you are craving sweets, just realize it’s the yeast that is urging you onward.

You Are What You Eat

“You are what you eat” is not just a quaint phrase; it’s shockingly accurate. If you eat junk, your body becomes a toxic waste dump. If you eat sugar, you feed all the ravenous creatures in your gut that are looking for a quick meal.

The reason why most yeast treatment programs don’t work is because they are catering to your demands to make things as simple as possible. You want to take a pill and get rid of this scourge, but Yeast ReSet works because you follow a combined approach of starving yeast, replacing your good bacteria with probiotics, detoxing, and taking natural antifungals. I’ll put it all together for you: the diet, the pills, the powders, and the liquids so you can get back to enjoying your life.
The foods you eat and the supplements you use in the treatment chapter are the same for everyone. What’s different is how long some people may take to ease into the program and the length of time you follow the treatment. That length of time will depend on your Candida Questionnaire Scores. You will assess and update your program every week by repeating the Candida Questionnaire. When your scores drop sufficiently, you can cut back on parts of the treatment, but be ready to apply the full treatment if your symptoms return and your scores increase. Basically, the more yeast you have, the more slowly you may want to begin, to avoid yeast die off.

**Eating for Health**

I want you to think of this program not as a diet – who wants to do something that has the word “die” in it, anyway – but as a way of nourishing yourself, instead of feeding yeast. Quite simply, if you have YOS, you are forfeiting part of every meal you eat to those critters. Instead, you’re going to learn how to properly feed your own health. You’ll soon start feeling so much better and have so much more energy and focus that will give you the incentive to develop and maintain long-term good eating habits. Try to remember that this program is about depriving yeast of sugars and nourishing you with yeast-free foods.

The yeast-free eating program is the same for everyone. The main rule to follow is to eat more foods that nourish your body and, at least for a time, eat no foods that feed yeast and cause it to flourish.

**If You Feed It, It Will Grow.**

You may already be rolling your eyes as you look at the sticky bun on your kitchen counter that’s on its way to the trash bin. Yes, that will be the last one you’ll have for a while. Consider the ingredients in a cinnamon bun – white flour, sugar, raisins and yeast. I want you to think about that tasty treat and know that your overflowing population of yeast made you buy that pastry, candy, or cheesecake because they want to be fed.

I know it sounds crazy, especially if you’ve battled food cravings throughout your life. But please, like I said to Cecily in the story above: consider the possibility that the voice in your head that prompts you to eat baked goods in the middle of the night is the voice of your arch nemesis, Insatiable Yeast. Imagine the possibility of calming and
quieting the voice of this voracious organism and making way for the voice of your own natural hunger signals.

I know we’ve talked about this before, but I’m repeating myself here because patients have told me how helpful it is to know that it’s not them — it’s the yeast, and how important it is to start thinking in terms of dropping those foods because they mainly feed yeast. Candida is like a houseguest that hangs around as long as you feed it. Get rid of the treats, and you can get rid of your unwelcome guests.

**STEP ONE: Organizing**

Before making any dietary changes and eliminating all the bad things from your kitchen cupboards, I want you to fill up your fridge, cupboards, and pantry with alluring foods that feed and nourish you. Clearing out sugar and carb treats can be disheartening if you don’t have suitable replacements immediately on hand, so look over the list of what you can eat and make a trip to your grocery store or market.

Don’t forget that my ReStructure meal replacement/protein powder passes the yeast-free test and can be taken once or twice a day as a meal or a snack.

I also recommend getting healthy snacks from an online grocery store called VitaCost. Wherever possible, I want you to purchase organic foods, including vegetables, meats, and non-gluten whole grains. During the next few weeks, it’s important to eat as much pure, unprocessed food as possible.

**Get Your Family on Board**

You might want to have a family meeting to let everyone know that you are gearing up to change your food choices. Ideally, everyone in your family should follow the program at the same time. It is important your family knows that this is a necessary program for you to be doing right now and that you need their support in keeping yeast-feeding food out of your line of vision.

I suggest easing into the food program by introducing organic meats to replace some of the deli meats that your family’s been eating. Also, substitute soaked and roasted nuts and seeds in place of sugary snacks. *The Transition Diet* is a helpful guide.
If you want your family to come on board with the program and you are the main food preparer, then make a game of sneaking in yeast-free snack substitutes. Rather than the whole family switching their diet, it’s probably more realistic that you will gradually slip yeast-free dishes into the menu and nobody will notice.

Adults may have a hard time breaking sugar cravings, but the younger the family member, the shorter time they’ve had to develop the sugar (or cake, or soda) habit.

Just like my first suggestion to stock up on foods that yeast don’t eat, start offering more options to your family that meet the criteria of the food that you want to be eating more of.

**Start Clearing Out The Yeast-Feeding Foods**

When you and your family have had time to adjust to adding new foods to your diet, or whenever you feel prepared with a bountiful fridge and pantry, then it’s time to discard the yeast-feeding foods. If you are in a household that won’t part with its sugary treats, then I suggest you claim a cupboard and a section of the fridge for your own yeast-free bounty. The gradual approach is best, because if you empty your cupboards entirely and there is nothing left to eat, you end up grabbing fast food because you’re just plain starving!

**Summary: Tips for creating an environment that will support your success.**

- Have yeast-free foods on hand before you throw out yeast-feeding foods.
- Get the foods that you’ll be avoiding out of your line of vision.
- Always have yeast-free foods in stock at home, in your car, at work, in your backpack or purse - wherever you typically and habitually eat, and especially when you travel.
- Don’t allow yourself to get too hungry. This is not a calorie-restricting diet, so you will have plenty of tasty food choices. It’s low on carbs but high on healthy fats.
- Read the labels on items on your shelves and in the cupboards and fridge.

Remember: Many condiments can be yeast feeders like ketchup, pickles, mustard,
etc., because of the added ingredients. Did you know ketchup contains more sugar than most sweet treats?

**STEP TWO: Calculate Your Questionnaire Score and Start Journaling**

Fill out the Candida Questionnaire and add up your scores. Make a note of the date and time in your *ReSet Food Journal* and write down your scores. Your food journal can be on paper, on your computer, or on your smart phone – I’m sure you can find a diet diary or diet journal app! If not, I’ll create one!

The first time you fill out the questionnaire, take note of the *Total Score*, then in the future, just score Sections B and C, which I call your *Symptom Score*. Section A is your history and helps you decide where to begin your treatment protocol, and that’s not going to change. But Sections B and C will help you follow your symptoms as you begin to improve on the diet.

You will take the same questionnaire every week on the same day. This is the best way to mark your progress as you go through the *Yeast ReSet Protocol*.

As you read this book and get ready to start the program, keep your *ReSet Food Journal* close at hand. Journaling is an important step. Often we lose sight of the morsels that we snack on and therefore lose sight of how much we’re actually feeding the yeast.

A *ReSet Food Journal* helps you to identify times of the day when you are more likely to eat for reasons other than nutrition. It’s important because you want to know what’s driving your eating habits besides yeast.

What’s going on emotionally when you eat? Write down the time of day, everything you eat at each meal and for snacks, and how you feel when you’re eating. Also, write down how you felt about eating what you ate. This isn’t about calorie counting! You’ll gain new insights into your eating behavior that will determine your success in this program. You will be able to differentiate the voice of yeast craving sugar, emotional eating, and actual hunger. Don’t be surprised if you naturally begin dropping yeast-promoting foods as you consciously realize what you are eating.

Also note that most initial hunger pangs, where the walls of the empty stomach rub together, are really dehydration, so you can often curb what you think is hunger with your sea salted water and really feel the difference. By becoming aware of what you’re
eating and drinking, you immediately start to gain more control over your eating behavior.

Remember, the higher your Candida Questionnaire score, the more yeast you may have and the slower you may have to go. Diving suddenly into too strict a diet might cause a lot of yeast die off that can frustrate you and make you drop the program. Pretend you have all the time in the world and that you can’t fail.
# RESET FOOD JOURNAL

<table>
<thead>
<tr>
<th>Time Of Day</th>
<th>Food</th>
<th>Feelings Before</th>
<th>Was I Hungry?</th>
<th>Feelings After</th>
<th>Was I Feeding Yeast?</th>
<th>Was I Feeding Myself?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
STEP THREE: Add Yeast-Free Foods
Here’s where the Yeast ReSet Diet really begins. Add yeast-free foods to your current diet. These foods, listed below in this chapter, will nourish you instead of feeding yeast. I want you to add these foods to launch yourself into the Yeast ReSet Protocol, even before you start eliminating the yeast feeding foods. Your body will start to feel more nourished, and for most people, it makes the elimination of yeast-feeding foods less shocking to your mind and body because you naturally drop the junk for the good stuff.

- Start by eating more vegetables
- Experiment with eating organic, antibiotic-free meats
- Enjoy gluten-free, yeast-free bread alternatives

Be kind to yourself during this transition time. You are experimenting with new foods and creating new habits. You can spend the week adding more nutritional foods to your diet before moving on to Step Four.

Make note of everything you eat in your ReSet Food Journal, including your feelings before and after eating. You may be surprised at the changes in how you feel with health promoting foods compared to how you feel after eating sugary, yeasty foods. It might feel unexciting to add a new vegetable to a meal, but very few people feel unwell after doing so, compared to the hangover you may have after eating a few donuts or a bag of candy.

STEP FOUR: Yeast Free Diet
Eliminate yeast, sugar, and alcohol from your diet in the first few days. The sugar I’m talking about here is the sugar you add to cereals or coffee, or straight sugar products like candy bars or sodas. We’ll get to the other types of sugar soon enough when you scan labels for all that hidden sugar that helps sell products.

In your ReSet Food Journal, write down your feelings during this stage since you might begin to feel some deprivation when you drop sugar from your diet. If you are feeling deprived, upset, or frustrated while eliminating sugar, please make sure you are taking ReMag and ReMyte and drinking your sea salted water. This might be a good time for you to add my methylated-vitamin B formula, ReAline, to help detox the sugar.
ReAline also contains two sulfur amino acids that help open up the sulfation detox pathways of the liver. One of the amino acids, l-methionine, is a precursor to the body’s major detox chemical, glutathione. The methyl groups in the B vitamins open up the support for detox methylation pathways of the liver.

If you are feeling a bit lightheaded or shaky the first few days, it’s likely sugar withdrawal as you begin starving the yeast of its food source. Think of the yeast as a child having a temper tantrum in a candy store. They really, really want the candy but can’t get it. By continuing to indulge your yeast even with small amounts of sugar, you are encouraging more of its outbursts and therefore more sugar cravings. If you feel like your yeast is having a tantrum, take more ReMag.

Next, eliminate the yeast-feeding foods from your diet – fructose and lactose. I’ve said it many times, yeast love sugar, so that’s what you have to remove from your diet. You’ve already eliminated table sugar. Next to go are fruit sugars (fructose), dairy sugar (lactose), and even the sweet starchy vegetables. We also eliminate gluten products at this stage because most gluten grains are simply chains of glucose molecules that break down readily into simple sugars.

For a complete list, read the section “Foods That Feed Candida” and refrain from eating those foods for 3 weeks. Having already eliminated sugar and yeast, this step should be easier as you’ve already begun starving the yeast. Also, continue your ReSet Food Journal.

You may have already eliminated alcohol because it makes you feel ill, but yeast love alcohol and they may have gotten you addicted to it. Treating your yeast will take away those alcohol cravings.

Why The Staggered Start To The Program?
Actually, it’s so it won’t be so staggering for you! It’s also to drive home the importance of a yeast-free diet. At the same time, we know that the diet isn’t the cure, so we want to balance diet, probiotic support, and antifungal treatment in this program for the best results.

The focus of the Yeast Reset Protocol is to help you create and build new eating habits that support balancing your yeast. What I’ve outlined here is a natural way to ease
into the eating plan and ignite your appetite for foods that nourish you. If you add healthy
foods that satisfy your actual hunger, the voice of the yeast’s cravings diminish when you
start eliminating the foods that feed it.

**Yeast Die-Off**

Another reason for the staggered start is to reduce your reaction to yeast die-off. Die-off
is also called a Herxheimer’s reaction, named for a doctor in the early days of syphilis
treatment who recognized the worsening of symptoms before patients got better on
treatment!

Die-off happens when you starve or kill any organism (bacteria, parasites or
yeast) in the body too fast and all its toxic end products flood the body. Remember the
alcohol and acetaldehyde I talked about in Chapter 3. These die-off byproducts can
produce headaches, sore throat, skin rashes, itchy skin, nausea, muscle pain, joint pain,
fatigue, slight fever, bloating, diarrhea, constipation, depression, swollen glands, and
vaginal discharge.

Many people report experiences with a yeast free diet and say that they felt so
sick during the die-off that they just quit the diet. One woman described her die-off
symptoms: itchy scalp, vision problems, mood swings, emotional liability, and negative
thinking. Another found herself yelling at her kids. Another was sweating, had
palpitations, felt cold and anxious, had trouble sleeping, and felt short of breath.

The list of die-off symptoms is as long as the list of YOS symptoms – and those
symptoms are usually specific to the individual. That’s why I want you to avoid die-off.

You don’t have to feel worse at all. I’m inviting you to assume that you will *not*
have a Herxheimer reaction. My aim is to help you avoid feeling worse before you feel
better. But if you have had chronic overgrowth of Candida for some time, you may
experience some of this yuckiness, which you should interpret as being on the right track,
and for which you are taking ReAline and extra bentonite!

In Chapter 6, I’ll talk more about die-off and give you the details of the *Yeast
ReSet Protocol* and the *Yeast ReSet Formula* that will help eliminate yeast safely.
Psyllium seed powder and bentonite are two of the ingredients in the *Yeast ReSet
Formula*. They absorb yeast toxins as the yeast are dying off. Bentonite can be used alone
in the beginning stages of the yeast-free diet if you are having die-off symptoms from simply starving the yeast. That will all be explained at the beginning of Chapter 6.

This means you don’t have to wave your Herxheimer reactions as a badge of honor to prove your faithfulness to the diet or to show that you’re on the road to getting better. Why suffer if you don’t have to?
THE TRANSITION DIET
If a shift from a junk food diet to a yeast free diet looks like too much of a leap, this Transition Diet will gently guide you to the light!

<table>
<thead>
<tr>
<th>Present Diet</th>
<th>Transition Diet</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cold cuts, hot dogs</td>
<td>Organic chicken,</td>
</tr>
<tr>
<td>fried chicken,</td>
<td>free range beef, lamb</td>
</tr>
<tr>
<td>fried fish, pork</td>
<td>veggie burger</td>
</tr>
<tr>
<td>Sugar, molasses, candy, refined sugar desserts</td>
<td>Stevia, Just Like Sugar</td>
</tr>
<tr>
<td>Milk, cheese, cream, butter</td>
<td>Rice milk, nut milk,</td>
</tr>
<tr>
<td></td>
<td>homemade yoghurt</td>
</tr>
<tr>
<td>Tropical/sub-tropical fruits, artificial juices,</td>
<td>Organic apples, pears</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Soft drinks, diet drinks</td>
<td>Spring water, filtered water</td>
</tr>
<tr>
<td>Hydrogenated oils, palm coconut</td>
<td>Organic butter,</td>
</tr>
<tr>
<td>oil, light olive oil, lard, oil</td>
<td>oil, sesame oil, flax</td>
</tr>
<tr>
<td>GMO corn oil, canola</td>
<td>extra virgin olive oil,</td>
</tr>
<tr>
<td>oil, generic vegetable oil</td>
<td>ghee</td>
</tr>
<tr>
<td>Refined white flour</td>
<td>Gluten-free grains and pasta</td>
</tr>
</tbody>
</table>
bread, crackers, bagels, 
tortillas, pizza, cookies, 
cakes, muffins, pasta, 
pretzels, Danish

GMO corn chips, potato 
chips, 
chips, other fried chips

brown rice

Baked blue corn

air-popped popcorn,

rice cakes, seeds, sprouted

nuts
THE YEAST RESET EATING PLAN

Avoiding sugar, wheat, and dairy were the basic food restrictions in the original yeast-free diet. However, in the last two decades, hybridization of wheat has created such high gluten grains that many people react unfavorably to wheat (including spelt, kamut, and triticale) and the other gluten grains (rye and barley). Therefore, I’ve expanded the diet to exclude all gluten grains to eliminate the direct intestinal irritation that gluten causes, which is worse in someone who already has a leaky gut.

Oatmeal is often put on the list of gluten grains, but it really shouldn’t be. It’s on the list because oats are often processed in facilities that also process wheat and barley. Therefore, people who are sensitive to a few molecules of gluten also avoid oats packaged in these facilities.

Below are lists of foods to avoid and foods to eat. It’s pretty much all you need to know, but I’ll go into more details below the lists, expanding the dos and don’ts. Then, I’ll describe the best way to implement your diet.

I’m not a recipe person – like most things in my life, I cook by intuition and make it up as I go along! So, happily, I will introduce you to a dear friend, Barb Schiltz RN, MSc, Nutrition, who is a Recipe Genius. You will find her fabulous recipes in Chapter 11, and an invitation to consult with her if you need some fine-tuning of your yeast-free diet.

What to Avoid

- Alcohol
- All sugars, even honey, molasses, maple syrup, and chocolate
- All junk food and processed food (products made with white sugar and white flour, soda, and high fructose corn syrup-flavored drinks)
- All fruits (for at least the first 3 weeks of the diet, then you might experiment with apples and pears, but keep avoiding dried fruit and fruit juices)

What to Eat

1. Eat a wide variety of vegetables daily. Always include greens such as kale, collards, spinach, and curly leaf lettuce.
2. Limit starchy vegetables to 1-2 times a week, such as red skinned potatoes, winter squash, corn on the cob, and Lima beans.
3. Avoid fruit for the first three weeks, and then choose apples and pears.
4. Include only non-gluten whole grains such as brown rice, millet, amaranth, quinoa, and buckwheat.
5. Fish, shellfish, organic chicken, organic meat, turkey, and organic eggs should be eaten once a day for protein.
6. If you are a vegetarian, enjoy beans, tofu, tempeh, soaked nuts and seeds, and legumes as your source of protein.
7. Eat nuts and seeds, but soak them for easier digestion.
8. Use fresh and dried herbs in your cooking and include lots of garlic. Don’t keep dried herbs around for more than 6-8 months in case they go moldy. I keep my dried herbs in the freezer.
9. Use organic, cold-pressed oils for cooking. Extra virgin olive oil, coconut oil, ghee (clarified butter), and sesame oil.
10. Use organic butter in moderation.
11. Use whole grain, gluten-free breads and pasta only.
12. For sweeteners, use Stevia and xylitol.
13. Drink natural spring, distilled, or filtered water only.
14. For beverages, enjoy organic herbal teas, especially antifungal herb like Horopito and Pau d’Arco; make a detox drink with lemon or lime, stevia, cayenne, and ginger.
16. Use natural raw, unheated nut and seed butters.
17. Use a high quality, mineral-rich sea salt or Braggs Aminos for seasoning foods.
18. Cook from scratch as much as possible using fresh (organic if possible) foods from a local farmer’s market or CSA (Community Supported Agriculture).
19. Rotate foods so you aren’t eating the same thing every day.

**Foods You Can Eat Every Day**

**Yummy Daily Vegetables** (Organic)
( Unlimited Servings)
Asparagus  Lettuce (all varieties)
Avocado  Mustard greens
Bean sprouts  Okra
Beet greens  Onions
Bell peppers  Parsley
Broccoli  Peppers
Brussels sprouts  Radishes
Cabbage  Sauerkraut
Cauliflower  Seaweed
Celery  Shallots
Collard greens  Snow peas
Cucumber  Soybeans (organic only)
Daikon  Spaghetti squash
Dandelion greens  Spinach
Eggplant  String beans
Endive  Summer squash
Garlic (raw)  Swiss chard
Green beans  Tomatoes, fresh
Kale  Turnip
Kimchi  Watercress
Kohlrabi  Zucchini
Leeks

More About Vegetables
Did you even know that so many vegetables existed? We get so ho-hum with vegetables that we just seem to buy the same ones all the time. Now you can expand your vegetable territory and find new ways to enjoy them. Vegetables are loaded with vitamins, minerals, antioxidants, chlorophyll, and tons of fiber.

I personally love putting my homemade salad dressing on steamed vegetables and making them even more delicious. I also use my Blendtec high-speed blender to make delicious green drinks that keep all the fiber instead of juicing it away.
Food You Can Eat Every Day (Organic, Wild)

Meat, Dairy, Seafood, Eggs

Beef, lean cuts  Salmon
Butter (in moderation)  Sardines
Chicken  Shellfish: shrimp, lobster, crab
Cod  Tofu in small amounts
Eggs  Tuna
Lamb  Turkey
Mackerel  Veal
Other fresh or frozen fish  Wild game
Pork, lean cuts

Vegetarian Protein Options

Avocado  Lentils
Beans  Nuts
Chia seeds  Seeds (sunflower, pumpkin)
Eggs  Tempeh
Gluten grain substitutes: quinoa, amaranth, buckwheat, millet, and wild rice  Whey protein powder
Yogurt

Not everyone can or should eat a high protein, animal-based diet, nor should you feel you have to be a vegetarian in order to maintain your health. Only 4 percent of the entire U.S. population is vegetarian and it has always amazed me that such a small population holds such a sway over the natural health scene.

When I first started reading about nutrition and diets four decades ago, there weren’t that many books on the subject. You either ate what your mother made or you were called a health nut because you ate “rabbit food”, wheat germ, and brewer’s yeast. Since a good portion of those books were about vegetarianism, I’ve certainly tried the
diet – many times – including macrobiotics and found with each attempt that I, personally, require animal protein for good health.

**More About Meat and Fish**

Human hormone imbalance and antibiotic resistance can result from consuming products from antibiotic- and hormone-treated animals. It’s a fact that commercially raised beef and chicken are injected or fed antibiotics and hormones to accelerate growth and to try to keep infection at bay while living in crowded, unhygienic conditions. You may not even know that your beef and chicken are treated in this way. Foods are not labeled to indicate these adulterants.

Hormones and antibiotics ingested every day in the diet add to the potential for Candida to flourish. For general health and to help eliminate the sources of Candida overgrowth, I urge you to consume grass-fed, antibiotic- and hormone-free organic beef, lamb, bison, goat, chicken, turkey, eggs, and other animal products. There are many farms that provide hormone- and antibiotic-free beef and chicken. Health food stores, organic farmers, and organizations like CSAs (Community Supported Agriculture) provide safe, organic options for consumers. I also recommend eating wild game while on The Yeast ReSet Protocol since it is naturally free of harmful additives.

Wild-caught, cold-water fish such as salmon are the least contaminated with mercury. Most mass marketed fish, especially frozen fish filets, are raised on fish farms, where they are doused with antibiotics and fed chemicals to keep them alive in an unnatural environment. There is also a potential problem associated with eating too much fish because of mercury contamination from polluted ocean water.

**Food You Can Eat Every Day (Organic)**

**Nuts and Seeds**

- Almonds
- Brazil nuts
- Cashews
- Filberts
- Pecans
- Pumpkin Seeds
Nuts and Seeds should be soaked in grapefruit seed extract to eliminate the potential mold problem. Soaking also makes these foods much more digestible.

**Soaking Directions:**

- Rinse nuts and seeds several times with water.
- Cover nuts or seeds with water and add 2 drops of grapefruit seed extract.
- For every cup of soaking water, add $\frac{1}{2}$ tsp. sea salt.
- Stir and let stand in the fridge for at least 8 hours or overnight.
- Drain off water and rinse once more before eating.

Flaxseeds are a different kettle of seeds. They should be stored in the freezer and ground immediately before being eaten raw. You can also soak them. Soaking softens them to a gelatinous goop for thickening recipes and drinks. The Raw Food crowd loves this property of soaked flaxseed. Some sources caution people from eating more than 2 tablespoons of flaxseeds per day. Like it or not, flaxseeds contain tiny amounts of linamarin and lotaustralin, two cyanogenic glycosides that the body metabolizes into cyanide.

**Oils, cold-pressed and unrefined**

<table>
<thead>
<tr>
<th>Coconut</th>
<th>Soy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Olive</td>
<td>Sunflower</td>
</tr>
<tr>
<td>Safflower</td>
<td>Walnut</td>
</tr>
</tbody>
</table>

**Foods You Can Eat Once or Twice a Week**

We’re moving out of the category of foods you can eat every day to ones you can only eat once or twice a week because they have more potential to feed your yeast.

(One Serving Several Days Apart)

**Starchy Vegetables** (Organic)  Carrots

| Beets | Corn |

Carolyn Dean MD ND 115
Parsnips       Rutabaga
Rutabaga       Sweet potato
Sweet potato   Turnips
Turnips        Yam

Starchy vegetables are sweet and the sweetness can feed yeast. That’s why we limit them but don’t fanatically ban them.

**Dairy Products Once or Twice a Week** (Organic)
(Only if tolerated)
Eat these sparingly since many people have food sensitivities to the casein protein in dairy products. If your symptoms persist, eliminate them completely.

Yogurt
Cheese

Yogurt is essentially a lactose free dairy product because the lactose has been removed during the fermentation process. However, casein still exists in yogurt and some people are allergic to this milk protein.

**Lactose-Free Cheese**
Here is a list of lactose-free cheeses that do not feed yeast. After yogurt, this is the list to follow if you have determined by your *ReSet Food Journal* that you can tolerate these dairy products.

Brick cheese       Havarti
Cheddar            Manchego
Colby              Provolone
Dry-curd cottage cheese Swiss
Gruyere
Whole Grains Once or Twice a Week (Choose Non-GMO grains (Organic))
(Only if tolerated)

Amaranth
Buckwheat
Corn (This grain is so incredibly common in our diet that many people are becoming allergic to it. It may be wise to limit its use to popcorn as a snack and not the milled grain.)
Millet
Oats
Quinoa
Rice, Brown
Teff (A gluten-free grain that is native to northern Ethiopia.)

I recommend avoiding GMO grain because of research showing intestinal irritation and inflammation caused by GMO foods.

What About Fruit?
Most people are used to seeing fruit listed just below vegetables, but fruit equals fructose, which is a simple sugar that feeds yeast. I ask people on a yeast-free diet to avoid fruit entirely for at least three weeks to really starve Candida. Even after the three weeks, it’s important to continue to avoid dried fruit, fruit juice, and sodas. A can of soda has about 10 teaspoons of sugar, and the chemicals in artificially sweetened soda are even more toxic.

The fruit you can have you may not think of as fruit at all. You can have lemon juice, lime juice, fresh coconut, and avocado. Then, after three weeks, you can add fresh or frozen organic blueberries – but only if you are sure there is no mold on them. Two other fruits that are relatively low in fruit sugar are apples and pears. In Chapter 11, you will see unsweetened applesauce in the ingredient list of a couple of recipes. I ask people to only eat two pieces of fruit per day, eating them alone and chewing thoroughly so that they are well absorbed high up in the small intestine, which means no undigested fruit (fructose) makes it to the lower small intestine and large intestine where the yeast are waiting to be fed. The fruits highest in sugars are grapes, melons, and dried fruits.
Can I Eat Fermented Foods or Cultured Vegetables?

In Chapter 6, I talk about the Prescript Assist Probiotics I’ve selected to complete the Yeast ReSet Protocol. Throughout the book I mention the natural probiotic, yogurt, a fermented dairy product, which is full of healthy, beneficial bacteria. The yogurt container label should say that live organisms are present; it should be free from added sugars and made from whole milk.

There are many other fermented foods that can help your digestion by replenishing your gut’s healthy bacteria. In traditional cultures, before probiotics supplements came along, fermented foods were, and still are, a staple. Fermented foods like sauerkraut and kimchi are traditional, but many people are putting just about any vegetable to the test in homemade cultured vegetable recipes. Raw, unfiltered organic apple cider vinegar is a fermented product that some people swear by but others have difficulty with. That is partly why, if you make your own fermented foods, it’s best to use brine and not vinegar.

A folk remedy called Kombucha Tea is a fermented product grown from Kombucha Mushrooms. However, some people react to it and don’t do well on it. The offending elements could be the sugar or the tea that are used in the fermentation process, although the sugar should be digested in the process.

Some people cannot tolerate any of these fermented foods (whether for food sensitivities or taste preference). For example, once, after making sauerkraut, I ate about ¼ cup and experienced intestinal upset. For me, it was just too much. So, I cut back to 1-2 tablespoons per day in my salad and have worked up from that and my gut is fine. If you can tolerate these foods, they may be a tasty addition to your diet while they’re adding beneficial bacteria to your system.

I draw the line when I hear authors or practitioners giving blanket statements that “No one should eat fermented foods,” or the opposite, “We must all eat fermented foods.” Neither statement is entirely accurate. Everyone has their own individual reaction to these foods and nobody can tell you what your body will or won’t tolerate. You have to do your own personal experiments.
Another aspect of food tolerance is obviously that as your gut heals on the *Yeast ReSet Protocol*, you should be able to tolerate more and more foods, but I must warn you that you can’t go back to a junk food diet and expect to stay healthy!

**Food Portions**

How Much Food Should I Eat?

Two Easy Methods of Measurement

1. **Use Body Parts To Measure Food**
   a. One Handful equals a serving of carbs
   b. One Palm-ful equals a serving of protein
   c. One Thumb-ful equals a serving of fat

   Eat six servings per day of each food type.

2. **Use Your Ideal Weight In Pounds to Measure Food Intake**
   a. Your ideal weight in pounds equals the number of carb grams per day
   b. Half of that number equals protein grams.
   c. Half of that number equals fat grams.

For example:

A female, 5 foot 6 inches, small boned with a BMI of 20. A good weight is 120 pounds.
   a. Weight in pounds = 120 grams of carbs per day
   b. 1/2 of that = 60 grams of protein per day
   c. 1/2 of that = 30 grams of fat per day

The ratio is about 50% carbs/25% protein/25% fat. It’s the combination and balance that are important.

**Blood Sugar Control**

1. Carbohydrates (carbs) are for quick energy, for 1-2 hours. Sugar only lasts 1/2 hour.
2. Protein sustains blood sugar for 2-3 hours.
3. Fats sustain blood sugar for 3-4 hours.

That’s why you feel full after a fatty meal. When you mix fats with carbs, the fat slows down the carb release. But you have to have some food from each group at most meals. Going strictly high carb, high protein, or high fat sets up a metabolic imbalance.

FOODS THAT FEED CANDIDA
I’ve given you the foods that you can eat. Now I’ll focus on the ones you can’t eat – like fast food and junk food. Actually, these are not even foods, and everything about them feeds yeast. The condiments, the sugary ketchup, the pickle, and the bun are all a feast for yeast. The accompanying soda with 10 teaspoons of sugar and the ice cream desserts are all yeast foods. Candida eats sugars in all forms: glucose, fructose (from fruit), lactose (from dairy), processed meats and condiments, cakes, cookies, candies, melons, mushrooms, and leftovers that develop mold within 24 hours!

If it feeds yeast, you have to eliminate it from your diet entirely for at least three weeks. Starving the yeast is the most important step getting back your normal appetite that is free of cravings. So, to be clear, the following is a list of foods you must eliminate and some foods that I would like you to eliminate for reasons I’ll tell you about later.

Where Sugars Hide
People ask me all the time about substances that they think might be sugar but don’t know for sure. Some of these names are being used to hide sugar in products. You can often find several sugars in one product. By separating out the sugars into many different items, the manufacturer covers up the fact that sugar may be the number one ingredient on the list.

My policy is to avoid it if you can’t identify it. I’ve compiled a list of 97 sugar products below. I prepared this list for an article I wrote called “The Scary Truth About Sugar” which was printed in Natural Health Magazine. I’ll put this list on 2 pages that you can print out and use to scare your friends.
## THE 97 KINDS OF SUGAR

<table>
<thead>
<tr>
<th>Amasake</th>
<th>Inversol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agave syrup</td>
<td>Invert sugar</td>
</tr>
<tr>
<td>Apple sugar</td>
<td>Isomalt</td>
</tr>
<tr>
<td>Barbados sugar</td>
<td>Karo syrups</td>
</tr>
<tr>
<td>Bark sugar</td>
<td>Lactose</td>
</tr>
<tr>
<td>Barley malt</td>
<td>Levulose</td>
</tr>
<tr>
<td>Barley malt syrup</td>
<td>&quot;Light&quot; sugar</td>
</tr>
<tr>
<td>Beet sugar</td>
<td>&quot;Lite&quot; sugar</td>
</tr>
<tr>
<td>Brown rice syrup</td>
<td>Malitol</td>
</tr>
<tr>
<td>Brown sugar</td>
<td>Malt dextrin</td>
</tr>
<tr>
<td>Cane juice</td>
<td>Malted barley</td>
</tr>
<tr>
<td>Cane sugar</td>
<td>Maltodextrins</td>
</tr>
<tr>
<td>Caramelized foods</td>
<td>Maltodextrose</td>
</tr>
<tr>
<td>Carbitol</td>
<td>Maltose</td>
</tr>
<tr>
<td>Carmel coloring</td>
<td>Malts</td>
</tr>
<tr>
<td>Carmel sugars</td>
<td>Mannitol</td>
</tr>
<tr>
<td>Concentrated fruit juice</td>
<td>Mannose</td>
</tr>
<tr>
<td>Corn sweetener</td>
<td>Maple syrup</td>
</tr>
<tr>
<td>Corn syrup</td>
<td>Microcrystalline cellulose</td>
</tr>
<tr>
<td>Date sugar</td>
<td>Molasses</td>
</tr>
<tr>
<td>Demerara sugar</td>
<td>Monoglycerides</td>
</tr>
<tr>
<td>Dextrin</td>
<td>Monosaccarides</td>
</tr>
<tr>
<td>Dextrose</td>
<td>Nectars</td>
</tr>
<tr>
<td>Diglycerides</td>
<td>Neotame</td>
</tr>
<tr>
<td>Disaccharides</td>
<td>Pentose</td>
</tr>
<tr>
<td>D-tagalose</td>
<td>Polydextrose</td>
</tr>
<tr>
<td>Evaporated cane juice</td>
<td>Polyglycerides</td>
</tr>
<tr>
<td>Florida crystals</td>
<td>Powdered sugar</td>
</tr>
<tr>
<td>Fructooligosaccharides (FOS)</td>
<td>Raisin juice</td>
</tr>
<tr>
<td>Fructose</td>
<td>Raisin syrup</td>
</tr>
<tr>
<td>Fruit juice concentrate</td>
<td>Raw sugar</td>
</tr>
<tr>
<td>-------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Galactose</td>
<td>Ribose rice syrup</td>
</tr>
<tr>
<td>Glucitol</td>
<td>Rice malt</td>
</tr>
<tr>
<td>Glucoamine</td>
<td>Rice sugar</td>
</tr>
<tr>
<td>Gluconolactone</td>
<td>Rice sweeteners</td>
</tr>
<tr>
<td>Glucose</td>
<td>Rice syrup solids</td>
</tr>
<tr>
<td>Glucose polymers</td>
<td>Saccharides</td>
</tr>
<tr>
<td>Glucose syrup</td>
<td>Sorbitol</td>
</tr>
<tr>
<td>Glycerides</td>
<td>Sorghum</td>
</tr>
<tr>
<td>Glycerine</td>
<td>Sucanet</td>
</tr>
<tr>
<td>Glycerol</td>
<td>Sucrose</td>
</tr>
<tr>
<td>Glycogen</td>
<td>Sugar cane</td>
</tr>
<tr>
<td>Glycol</td>
<td>Treacle</td>
</tr>
<tr>
<td>Golden syrup</td>
<td>Trisaccharides</td>
</tr>
<tr>
<td>Hexitol</td>
<td>Turbinado sugar</td>
</tr>
<tr>
<td>High-fructose corn syrup</td>
<td>Unrefined sugar</td>
</tr>
<tr>
<td>Honey</td>
<td>White sugar</td>
</tr>
<tr>
<td>Icing sugar</td>
<td>Xylitol</td>
</tr>
<tr>
<td></td>
<td>Xylose</td>
</tr>
</tbody>
</table>
Foods that Contain Sugar
You can find many of the above sugars on the labels of processed food products. Remember sugar-cured or honey-cured means saturated with sugar! Condiments are the biggest offenders and people love them because they tickle their taste buds, but they also feed yeast.

Bacon
Barbeque sauce
Condiments
Corned beef
Ham
Hot dogs
Ketchup
Mayonnaise
Mustard
Pickled foods
Pickles
Salad dressings
Sauces
Sausage
Vinegars (added sugars)

Malted Products Contain Sugar
Malt is a term for germinated cereal grains that have been soaked in water then dried in a kiln. The malting process changes the grain’s starches into sugars. Malt is a component in beer, whiskey, malt vinegar, malted shakes, and flavored drinks like Ovaltine.

Snack Foods Containing Sugar and/or Gluten
Breads
Cakes
Cookies
Cupcakes
Muffins
Pastry
Pie
Scones

Dried Fruit
Apricots
Dates
Figs
Prunes
Raisins
Drinks

Beer
Wine
Soda

Fruit juice
Tea

Explaining the Foods to Avoid

The bottom line is that sugar in all its forms feeds yeast. Of course, some forms of sugar like maple syrup and honey are healthier than refined white sugar, but that isn’t the point. This isn’t about replacing refined sugar with another version of sugar – it’s about eliminating sugar in all forms until your YOS is under control. Candida eats sugar in all forms and will proliferate whether it is raw natural sugar or icing on the cake!

To beat this topic with a big stick, avoiding sugar means avoiding the following:

* Sugar with all its names and in all its forms: See all 97 forms of sugar above. Remember, even organic sugar is still sugar!
* Sugars that end in -ose: dextrose, fructose, maltose, glucose, lactose, sucrose
* Syrups that are really sugar: maple syrup, rice syrup, corn syrup, golden syrup, agave syrup
* Stuff that tastes just like sugar: honey, molasses, treacle, fruit juice concentrate, OK… so no sugar! Therefore, no foods with added sugar!
* Condiments, sauces, vinegars, and pickled foods: barbeque sauce, pickles, ketchup, mustard, mayonnaise, salad dressings all have added sugar.
* Processed pickled foods and smoked meats contain sugars, so you must eliminate: bacon, ham, sausage, hot dogs, corned beef.
* Foods that act like sugar in your body – starchy, high carbohydrate foods

Baked goods

They all contain sugar, wheat, gluten, and often yeast. So eliminate:

Cakes, cookies, pie, pastry, breads, muffins, cupcakes, scones
Most Cheeses
We avoid dairy because of its milk sugar, but some cheeses are very low in lactose and can be eaten on this diet. The main lactose-free cheeses are: Brick cheese, Cheddar, Colby, Cottage cheese dry-curd, Gruyère, Havarti, Manchego, Provolone, and Swiss. But that doesn’t mean you can eat them freely. It takes 5 quarts of milk to make one pound of cheese, so we’re talking about a very concentrated source of protein, including casein protein that can be very mucus-forming. Yeast love that mucus!

Drinks
Avoid beer (it’s made from sugar and yeast), wine, and sodas. Fruit juice is very high in fruit sugar and the juice-making process often uses sub-par, moldy fruit. Some teas, even those that are healthy and organic, may be processed in a way that accelerates mold growth. Avoid diet sodas made with aspartame, which is a chemical poison that has almost 100 side effects.

Don’t Mess with Moldy Food
Just because you think a food is healthy doesn’t mean it’s right for the Yeast ReSet Protocol. Avoid the following list of foods because they feed yeast and tend to be moldy. Mold is a close cousin to yeast and can aggravate YOS.

1. Melons, watermelon, cantaloupe and honeydews
2. Dried fruit is very high in concentrated fructose sugars and often coated with table sugar (sucrose). Avoid raisins, prunes, dates, apricots, figs, and anything you’ve dried in a dehydrator like apples, pears, pineapple, mango, etc.
3. Leftovers begin to deteriorate almost immediately and shouldn’t be consumed while you’re on the Yeast ReSet Protocol. If you are preparing a large yeast-free meal, freeze the leftovers immediately.
4. Nuts are stored in giant bins and a few bad seeds can become moldy and infect the whole bin. Nuts and seeds sold in bulk food bins are especially prone to mold (but as I mentioned above, you can safely clean your nuts by soaking in grapefruit seed extract to remove the mold factor).
5. Mushrooms may not be the problem we once thought. It’s only if they are moldy that they can cross-react with yeast. So wash them thoroughly before eating; cooking them will make sure there is no mold.

**Giving up Gluten**

I would also like you to avoid gluten for at least a few months while you’re doing the *Yeast ReSet Protocol*. Gluten acts like a glue that sticks undigested food particles, intestinal mucus, and intestinal organisms together, and I believe that it is at least partly responsible for yeast adhering to your stomach and intestines. Patients who’ve chosen the gluten-free route reported faster recovery from *YOS*.

Gluten has become a huge topic in health circles over the past few years. As I mentioned earlier, that hybridization of wheat to make a variety that can withstand cold and heat and chemicals also elevated the levels of gluten. This is far from the nourishing wheat of our ancient ancestors or the wheat described in the Bible. Modern day wheat is adulterated and is being rejected by our bodies.

Gluten has a direct inflammatory action on the small intestine and many people find that once they remove gluten grains and foods from their diet, they feel much better whether or not they have *YOS*.

**STEP FIVE: Reintroducing Foods - The Experiment**

The following laments are common when people try to follow a yeast-free diet without the right nutrient support:

“I have fallen off the rails – was doing well, felt like I had gone forward 10 steps and now I’ve taken 15 backwards.

“I ate something I shouldn’t have and I’m in so much pain!! I feel like a helium balloon, I have so much gas and need to burp constantly. I’m so uncomfortable and distressed. Can you please help me re-focus?”
“This weekend I binged on some sugar – terrible, I know!! But the positive from it was that I didn’t get a stomach ache or many adverse effects from eating it so I guess that means the yeast treatment is working.”

I immediately wrote back and said, “It's a positive sign but not an invitation to eat more sugar!”

I want you to have a look at Step Five now to see where the diet loops back to being less restrictive. You won’t implement it until you’ve completed the Eating and Treating parts of the Yeast ReSet Protocol. This step is about reintroducing foods back into your diet after you have successfully reduced your Candida Questionnaire Score for Sections B and C down to less than 50.

Slowly reintroducing foods back into your diet is how you maintain your yeast balance. Remember, you are in control and you have the ability to make choices now that you have calmed, or even eliminated the voice of the yeast. You are back in charge and it is essential that you do take charge at this point of your program.

You’ll need to record your food “experiments” in your ReSet Food Journal and be rigorous during this phase of the program. You’re the one with that plate of bread, cheese, or fruit, so it’s up to you. Even if it still feels like deprivation, you’ll be glad you were diligent about slowly adding foods back into your diet and recording how you react to them to make sure you don’t fall back into YOS again.

**FOOD ELIMINATION AND CHALLENGE**

Food elimination and challenge is standard practice in food allergy management and we can incorporate it here in managing your yeast. You’ve been avoiding several groups of foods for many weeks. You’ve made notes in your ReSet Food Journal about how you feel physically and emotionally, but you may not know exactly what foods had been connected to your YOS symptoms.

Now’s the time to see which foods have an obvious impact on your physical and mental wellbeing. You will also see which foods you can incorporate back into your diet.
without suffering any side effects. That’s the key, eating what you want but making sure your mind and body don’t suffer!

The process is very simple to describe but requires some effort to put into practice. You’ve eliminated several food groups (sugar, gluten, dairy) that may have been the cause of some of your health problems. You likely also eliminated common food allergens like wheat, dairy, sugar, soy, and corn.

**WARNING:** Do not challenge foods to which you know you are highly allergic.

In my experience, most people want to test sugar first, and of course, this is up to you, but I would recommend testing other foods first. Let me warn you that if there are any residual colonies of yeast waiting for a sugary treat, they can take hold and launch you into a sugar-craving binge. Please choose to maximize your benefits by prolonging your experimentation by testing sugar last. This part of your *ReSet Food Journal* focuses on physical food findings – but if you also find yourself getting irritable, sad, or moody, jot that down too.
When you decide to reintroduce foods and test your response to them, I suggest starting the experiment on a weekend, or a day when you don’t have too many outside obligations. For example, if your previous yeast associated symptoms were IBS related, then the reintroduction of offending foods might land you in the bathroom.

When I experimented with reintroducing wheat into my diet after six weeks, I was shocked at how instant my adverse reaction was. My intestines turned into a symphony of strange sounds with intestinal gas, bloating, and pain. My sinuses got very stuffy and my brain felt fogged and unfocused. Take care of yourself during this reintroduction step.

Here are some guidelines for conducting this experiment:

- Only test one food at a time. If you test wheat and how it affects you, choose a wheat food like crackers that has minimal ingredients.
- Sugar is best tested by eating a handful of hard candies.
- Do not test combinations of foods until you know that each ingredient is safe. For example, bread is a complex food with ingredients like wheat, yeast, sugars, etc. You may react to bread but be OK with the individual ingredients.

**How Often Can I Have A Certain Food?**

You and your *ReSet Food Journal* are in charge of timing. Your body is the gauge to knowing how often you can have a formerly forbidden food. A rotation of 3 days works for most people. For example, if you try a gluten grain on a Monday and feel OK and then have it again on Tuesday and Wednesday, you might find that you have a reaction, and this could mean your yeast are being activated. Instead, if you have gluten on Monday and have no adverse reaction, wait until Thursday to have it again. More people are avoiding gluten grains, which fortunately makes it very easy to find non-gluten products.

Eating gluten every day potentially brings undigested molecules into the bloodstream through a yeast-overloaded leaky gut and can cause allergies to develop as gluten antibodies build up. However, eating gluten grains once every 3 days allows your body to eliminate those antibodies so that they don’t build up. Gluten can cause damage to...
intestinal villae in susceptible people. As mentioned earlier, if you already have a leaky gut, gluten further irritates your intestines.

Be careful of denial. There’s no place for it in this experiment. The phrase “it can’t hurt to have another” is the one that launches yeast-feeding frenzies. Remember, if you have ANY cravings for sugary, carby treats, that is the yeast talking. As a rule of thumb, if you choose to eat any of these yeast-feeding foods, leave at least three days in between.
CHAPTER 6: YEAST RESET PROTOCOL

The focus of this book is the treatment YOS, but the Yeast ReSet Protocol will also help you recover from Leaky Gut and SIBO, which I talk about in Chapter 3.

This Yeast ReSet Protocol chapter should answer all your questions – be sure to use the search function, but if you can’t find exactly what you are looking for, please email Customer Service at support@RnAReSet.com. If someone on the other end of the email, or chat, or phone can’t answer your question, they will send off to me and I’ll do my best to help you fine-tune your Yeast ReSet Protocol.

The Yeast ReSet Protocol encompasses the Yeast ReSet Diet, Prescript Assist Probiotics, and the Yeast ReSet Detox (Bentonite clay, Psyllium seed powder, Antifungal). You can click to your Yeast ReSet Detox if you want to dive into it right away. It’s the recipe that I’ve given to my patients, clients, and customers for decades.

THE YEAST RESET PROTOCOL

* Yeast ReSet Diet
* Prescript Assist Probiotics*
* Yeast ReSet Detox (Bentonite clay, Psyllium seed powder, Antifungal).
*Total Body ReSet Formulas

Many people who find out about the Yeast ReSet Protocol and want to get their yeast under control are already taking my Total Body ReSet (TBR) formulas and are becoming healthier and less toxic as a result. They are well supported with minerals, methylated B Vitamins, detox factors, protein powder, and my RnA Drops that help grow perfect cells.

If you are not already on these formulas, I apologize if this seems like too many new products and too much to contemplate. However, just consider that you have probably tried to treat your YOS before and have come up short. You probably have a whole cupboard full of supplements but we know that the Total Body ReSet formulas work so well and so synergistically that they can help you reduce the number of other supplements that you have been taking.
Think of it this way – you are taking lots of supplements yet you still feel very ill, so they really aren’t working for you. But when you take the TBR formulas, you will see their benefits very quickly and find you can wean off many other supplements and drugs.

I’ve been treating yeast for over 35 years and it’s often the case that when you add the TBR formulas, you finally have the proper resources and energy to balance your yeast.

It’s also true that on the TBR formulas, as your immune system becomes activated, it can attack yeast and signs of yeast die-off appear – rashes, coated tongue, gas, and bloating. That’s when I recommend adding the Yeast ReSet Protocol.

Here is one interesting story from a 40-year old customer, who I’ll call Anita.

Anita emailed Customer Service and said:

I have been on the products for almost a month now and if anything, I have been WORSE! I have had fatigue and brain fog for 10 years that has been increasingly getting worse over the years to the point in the last 4-5 years I have been very low-functioning and had to move back home. I suspect I could have adrenal issues and thyroid stuff going on. We also found a mold problem here where I live last year that could be affecting me as well. I also have chronic back pain and my hair is falling out.

Mid Sept of 2016, I started a strict healing diet, basically vegan, though I still eat meat once or twice a week. I don’t eat gluten/wheat (hardly any grains at all), no dairy, no eggs, no sugar, no corn, no soy, no pork. Basically my diet is very plant-based with lots of raw and cooked veggies, especially baked potatoes and sweet potatoes and beans. I eat lots of fruit/healthy snacks throughout the day to keep my blood sugar up to help my adrenals. But if anything, 8 months into this diet I am feeling WORSE! Am I still detoxing or what’s going on?

Can you spot what is going on with Anita? She’s obviously got YOS and has probably had it for decades. Mold makes yeast worse because it cross-reacts with yeast toxins, so that aggravated her condition. Yeast toxins and mineral deficiency can cause low thyroid, so she needs ReMyte. Magnesium deficiency and stress create adrenal fatigue, so she needs ReMag and sea-salted drinking water.
When Anita changed her diet, she made the mistake many newbie vegetarians and vegans do and began eating lots of fruit and very sweet vegetables like sweet potatoes, potatoes, and beans, which just fed her yeast even more. Then, when she began the TBR, her immune system perked up and started to kill off some of her yeast, giving her die-off symptoms that aggravated her Total Body Meltdown. She kept feeding the yeast at the same time that her body was mounting an attack against it.

With this information and instructions to follow the Yeast ReSet Protocol along with the Total Body ReSet, Anita will gradually improve from her many years of yeast overgrowth that led her to a Total Body Meltdown.

Combining Total Body ReSet & Yeast ReSet

An RnA ReSet customer was stricken with neurologic symptoms likely caused by Cipro toxicity and aggravated by her Hepatitis C. She was only being offered prednisone for relief. I reminded her about yeast overgrowth lurking in the background from all the antibiotics and prednisone she had taken in the past. She was reluctant to go to the trouble of doing a yeast detox and didn’t think it would help because she had tried to treat her yeast in the past without much success.

I commiserated with her that when you are suffering so many symptoms on so many levels it’s hard to face even more diet restrictions and the yeast detox drink, but I encouraged her to dig in and do it. I also told her that since she was already on the Total Body ReSet that her results would be much better. Now she’s glad she did because on the eve of publishing this book she sent me the following enthusiastic report:

I avoided taking Prednisone that my doctor recommended for my neuropathy, which is actually getting better now! But I am very excited about having normal digestion without diarrhea!!! This will be the 3rd good week.

I am very convinced it is Candida, and looking back at my history, I feel like I am almost a poster child. It seems like I’ve experienced all the things that would cause yeast overgrowth. I have a history of mold exposure, IV antibiotics for Lyme for 2 months, and now after listening to you on You Tube, I discovered
that Prozac, taken for about 10 or 15 years, also has fluoride!! Plus my diet and the stress I have been through over the years have definitely contributed.

I am very grateful to you for leading me in the right direction, because I was almost feeling like I was dying a few months ago. It makes me realize what an important issue Candida is, and when it’s untreated it can possible lead to death from other illnesses. I forgot to mention that another doctor put me on nasal Nystatin due to my mold history. I took that for 9 months about 2 years ago.

I called the other day and spoke to Customer Service about a dandruff issue (Candida in the scalp) and steroid creams. It also caused a facial rash around the hairline. This has been really bad the last few years and I think it has caused some hair loss. I have seen 4 dermatologists, who all put me on Clobetasol, a steroid cream, and it did clear up for awhile. Customer service suggested using clay, which I did try, and it was OK, but very messy. I was also using apple cider vinegar as you recommended in your *Future Health Now Encyclopedia*. Then I heard on your show to use tea tree oil and olive oil, and I think that has been the best.

My scalp and face are peeling skin since using that, which I think is OK. The large pieces (some a 1/2 inch long) almost look like plastic wrap, and I guess I wonder if it is bio-film from fungus? I have avoided the steroid creams, although I know they can quickly help rashes. I do hope I can defeat this scalp and hair loss issue.

I am very grateful for your life-saving work.

**Total Body ReSet – The Groundwork**

*ReAline, ReStructure, RnA Drops, ReMag, ReMyte.* For your convenience, we have bundled all 5 of these formulas together into one package called the **Total Body ReSet**, available exclusively at [RnAReSet.com](http://www.RnAReSet.com).

**1. Water Intake Guidelines**

While waiting for your ReSet Formulas to arrive, begin hydrating your body by increasing your water intake and adding sea salt or Himalayan salt.
Water Intake Guidelines: Drink ½ your body weight (in pounds) in ounces of water. If you weigh 150 lbs., you will drink 75 ounces per day.

Sea salt or Himalayan salt: Add ¼ – ½ tsp. to every quart of drinking water – to one of those bottles, you will later add ReMag and ReMyte.

2. ReAline®

When the products arrive, begin ReAline capsules to assist in detoxing/taking out the trash.

Dosage: 1 per day with or without meals for 1 week, then take 1 capsule twice per day.
Note: If you are already taking ReMag, don’t worry, just continue to take it as you begin adding the other formulas.

ReAline is Nature’s Detoxifier. It’s a combination of two sulfur-based amino acids (L-methionine and L-taurine) that provide sulfur for the liver’s sulfation detox pathways. L-methionine is the precursor to glutathione, the body’s most powerful antioxidant. Glutathione assists the detoxification of mercury and other heavy metals. L-taurine supports heart health, breaks down cortisol, and enhances GABA.

Four methylated B’s and Betaine HCL provide methyl groups to assist liver methylation detox pathways. Taking these precursors in ReAline to help enhance the body’s own detox systems is much more gentle than IV chelation or bowel and liver purges, which force the body to detox when it may not be the best timing. With the right precursors, the body chooses when to detox.

The B vitamins are essential to support our nervous system. This became even more obvious when we found deficient B12, B6, and folate in the autism spectrum and in the elderly. But there is much more to learn about the B’s. They are cofactors in hundreds of biochemical processes. The B vitamins work together, helping cells burn fats and glucose for energy, promoting cell growth and division, maintaining healthy skin and muscle tone, supporting and increasing the rate of metabolism, and enhancing immune and nervous system function, which includes easing stress and improving mood probably
triggered by an increased production of serotonin. Their ability to help reduce anxiety, depression, and PMS is enhanced with the use of magnesium.

Most B vitamins are synthetic and doctors are forced to recommend higher and higher doses to try to get some reaction. However, the food-based and methylated B’s in ReAline are in the active form that the body requires. To acquire the B vitamins that are not included in ReAline, use lots of Nutritional Yeast on your organic popcorn!

L-Methionine has 4 major roles in the ReAline formula. It is a building block in the manufacture of all our proteins, including structural, contractile, blood proteins, antibodies, hormones, and enzymes. L-methionine is a methyl donor, needed for the production of neurotransmitters; a sulfur donor; and a precursor in the synthesis of other amino acids. As mentioned above, L-methionine as a methyl donor, and as a precursor to glutathione, has the ability to inhibit toxic metals from crossing the blood-brain barrier. Methionine is a critical component of tissue development, growth, and repair for all humans at any age.

L-Taurine is a precursor to GABA. It reduces elevated levels of cortisol in the body, helps burn fat, improves insulin sensitivity, increases testosterone production, acts as an antioxidant, enhances heart and brain function, and improves sleep. It also lends sulfur molecules to the liver for its sulfation detox pathways.

Even though sulfur is the third most common mineral in the body (after calcium and phosphorous), sulfur’s importance is not commonly acknowledged. However, it is a key component in balanced DNA and protein replication. Sulfur is important for the production of mucous and for detoxification. Obtaining sulfur from methionine and taurine is more metabolically sound than taking sulfur supplements because the body can gauge how much it requires in any given moment.

The B vitamins in ReAline are methylated, so you may ask whether or not you can take methylated B’s if you have a MTHFR gene mutation. The MTHFR field has gotten so complex that I have to tell individuals who, as they must do with many other supplements, have to try ReAline and see how they feel on it. As for MTHFR mutation itself, I think it’s probably the result of epigenetic factors that turn the gene mutations on or off. Treating yeast overgrowth and taking the Total Body ReSet formulas can neutralize many of those negative epigenetic factors.
3. **ReStructure™** You can also start to take ReStructure as soon as it arrives. It comes in a 22-serving canister or very convenient individual serving packets, which are awesome to take traveling. Simply shake one scoop or one packet of ReStructure into 8 ounces of the liquid of your choice and drink to your health. I swallow my ReAline capsules with my ReStructure drink. For more information, read the free eBook, *ReStructure – A Completement Formula To ReSet Your Body*.

ReStructure is a protein powder for athletes and for Paleo Diet followers. It’s also a Meal Replacement for losing weight and controlling blood sugars for hypoglycemia, prediabetes, or diabetes. And it’s the perfect meal while on your yeast-free diet.

ReStructure is a 3rd Generation Meal Replacement Shake that I’ve been enjoying since it was first formulated in the early 1990s. It’s another multitasking product that works synergistically with the other Total Body ReSet Formulas.

ReStructure is a high-protein meal replacement, but it’s not just protein. The protein portion of ReStructure is primarily whey with the addition of pea protein and rice protein (bran and germ) with an extra boost of lysine. Fiber is supplied by our pea powder and tapioca. The fats remaining in the concentrated whey as well as flaxseed and marine algae oil, provide the essential fatty acids to round out the formula.

Our “secret ingredient,” concentrated, dehydrated RnA Drops, makes ReStructure the most unique meal replacement you will ever find. The RnA powder has probiotic and prebiotics properties along with organic agave inulin.

4. **RnA Drops** Begin supporting cell replication by using the RnA Drops on Day One as well.

Dosage: 1 drop under the tongue twice a day for the first week. Add 1-2 drops every week, until you reach 15 drops twice a day, which is the recommended daily dose. Take RnA Drops 15 minutes away from food or drink.

RnA Drops are made from germinated barley seeds. We call them Nature's Perfect Nutrient. On the [RnA ReSet website](https://www.RnAReSet.com) you can read about my experience with the
D-Cell, a living water purifier made from soaking grains. Since 1995, I have tried to replicate the D-Cell. It wasn’t until I began to work with iON in 2009 that I was instructed on how to make something much more consistent and powerful than the D-Cell. The result is the iCell, which is the living ingredient in the RnA Drops.

5. ReMag®

After 4 days of ReAline, ReStructure and RnA Drops, add ReMag, starting with ¼ tsp. per day in a quart of water and sipping it through the day. Every 2 days, add another ¼ tsp. Work up to a therapeutic dose of 2-3 tsp. a day if you are trying to overcome a health condition, if you are on medications, or if you otherwise have magnesium deficiency symptoms.

Note: If you are already taking ReMag, don’t worry, just skip to #6 and begin adding ReMyte.

For more information, read the free eBook, Invisible Minerals: Part I – ReMag.

I’ve been a proponent of magnesium for many years. It’s required for 700-800 enzyme systems in the body and plays a role in countering every disease, including YOS.

I’ve mentioned many times that YOS is an inflammatory condition. Magnesium treats acidic inflammation as an alkaline buffer and as a powerful antioxidant. Studies show that magnesium reduces the levels of inflammatory factors like C-Reactive Protein (CRP), Tumor Necrosis Factor-a (TNFa), and Interleukin-6 (IL6).

I’ve gotten many reports from people doing well on a yeast free diet who tell me if they run out of magnesium their YOS symptoms return. Magnesium is required in order to break down and eliminate acetaldehyde, a powerful and nasty yeast toxin. Magnesium deficiency can also cause dysregulation in the Hypothalamus-Pituitary-Adrenal axis, which is already struggling from yeast toxins blocking hormone receptors. Magnesium deficiency affecting the HPA axis causes excessive production of cortisol, which feeds yeast. Magnesium deficiency results in decreased elimination of toxins among many other imbalances.
Weight gain is strongly associated with YOS. Magnesium is a vital nutrient for adiponectin production. Adiponectin is a protein-based hormone produced naturally by the body to regulate lipids and glucose. It has direct control over insulin metabolism. Magnesium up-regulates 24 genes and down-regulates 36 other genes that have a function in balancing weight gain.

A key feature of magnesium is that it enables your body to handle the stimulation of the sympathetic nervous system. This allows your body to tolerate the stimulation of both brown and white adipose tissue, which is vital to the metabolism of fat cells.

People with leaky gut don’t absorb nutrients fully through an impaired GI tract; however, ReMag doesn’t require an intact gut for proper absorption. People who are afraid to take oral magnesium or any kind can begin by using transdermal ReMag and taking Epsom salts baths and then graduate to oral ReMag when you are ready. You can read more about ReMag in my free eBook, *Invisible Minerals Part I – ReMag*.

6. ReMyte®

After a week of slowly building up ReMag, add ¼ tsp. of ReMyte into the same quart of water and sip it through the day. Every 2 days, add another ¼ tsp. Work up to 1½ - 2 tsp.

For more information, read the free eBook, *Invisible Minerals: Part II – ReMyte & ReCalcia*.

When I realized the effectiveness of ReMag with its stabilized ions and pico-meter sizing, I asked my chemist and manufacturer to work on an electrolyte multiple mineral. We created a formula containing 12 minerals in perfect proportions for cellular function. Nine of those minerals support thyroid function and help produce thyroid hormone. Every day we get reports from customers who tell us that they have been able to wean off their thyroid hormones after taking ReMyte for several months.

ReMyte enhances the proper functioning of all the systems of the body, including the immune system, hormonal system, and nervous system. All the ReMyte minerals are ionic conductors of electrical current in the body. They dissolve in the blood and travel
throughout the body, acting as cofactors in the thousands of enzymatic processes occurring every millisecond. These minerals, along with ReMag and sea salt in your drinking water, regulate, effect, and affect metabolism at every level hydrating and mineralizing your cells for efficient function. You can read more about ReMag in my free eBook, Invisible Minerals Part II – ReMyte.

You may add ReCalcia to your program if you don’t eat any dairy products and your diet does not provide you with 600 mg of calcium per day. The dosage is 300mg per tsp.

By starting with the ReAline detox, preparing your cells with RnA Drops, feeding your body fully-absorbable protein in ReStructure, and building your magnesium and mineral dose slowly, you will have a wonderfully supportive experience doing the Total Body ReSet!

YEAST RESET PROTOCOL
1. Yeast ReSet Diet – Chapter 4
2. Prescript Assist Probiotics*
3. Yeast ReSet Detox
   a. Bentonite Clay
   b. Psyllium Seed Powder
   c. Yeast Reset Antifungals

* Prescript Assist Probiotics can be started a week before or at the same time as you begin the detox. Unlike other probiotics, Prescript Assist can be taken with or without food, but take it at least one hour away from your Yeast ReSet Detox recipe.

Dosage: Begin with one per day at bedtime. Week Two, take two per day. Take 2 per day for 3 months, at which point you can test how you feel on only 1 per day. But if you feel gas, bloating, or intestinal distress return, go back to 3 per day.
3. Yeast Reset Detox

Measure each product into an empty shaker cup and add 4 oz. of water.

1. Bentonite clay - 1-3 tsp.
2. Psyllium seed powder - 1-3 tsp. (substitute 2-6 tsp. Aloe gel* if “allergic” to psyllium)
3. Antifungal – rotate these four choices, using a different one each week.
   a. Garlic cloves – minced 1-3
   b. Or Grapefruit seed extract – 5-15 drops twice a day
   c. Or Oregano oil – 2-6 drops twice a day
   d. Or Caprylic acid – the contents of 1-3 capsules of caprylic acid (400mg) Or Caproyl liquid contains 1-3 tsp (1 Tbsp. contains 1,400 mg caprylic acid). Caprylic acid may be less expensive than Caproyl.
4. For taste, add 1-2 drops of peppermint oil or orange oil. Otherwise the drink leaves you with a slight aftertaste of dirt because of the clay!

   * Aloe gel substitute in a dosage of 2 Tbsp. instead of 1 Tbsp. of psyllium seed powder to maintain the right consistency.

   Get used to the psyllium and bentonite before you add an antifungal. You have 4 to choose from, which allows you to rotate the different products so that the yeast doesn’t develop a resistance to them. Take a different antifungal each week.

Dosage: Take one dose first thing in the morning and one dose last thing at night on an empty stomach. Do not eat or take supplements for at least one hour after.

Treatment Timing: After you add the antifungals, I advise taking the Yeast ReSet Detox formulas for 3 weeks on and 1 week off. If you develop symptoms during your week off and if your numbers are still high on the Candida Questionnaire, simply continue the Yeast ReSet Detox following the same timing – 3 weeks on and 1 week off. Some people have to follow the Detox for several months. Once you develop a routine for taking the detox recipe, it won’t be a burden.

There are a lot of choices to make with your Yeast ReSet Detox, like how much of each product to take and how long to continue the detox, but your constant guide should
be how you feel. You want to create a balance between feeling increasingly better and causing yeast die-off symptoms.

Most people continue to do periodic Yeast Reset Detox, either seasonally or after vacations, holidays, or any general debauchery!

NOTE: The average dose for each of the three Yeast ReSet Formula ingredients is 1Tbsp. mixed in water. But, please start with 1 tsp. or each and work up to 1 Tbsp., (which is 3 tsp) over the course of 7-10 days. You may find that 2 tsp. of each product is just right for you and 3 tsp. is a bit too much. Part of being on this program is for you to gauge what makes you feel best. I don’t think it’s necessary for you to feel worse during your yeast detox, and I’m sure you agree!

Antifungal Foods, Herbs, and Teas
You might feel these antifungal foods, herbs, and teas should be in Chapter 5, the Yeast ReSet Diet; however, I think they should be in the treatment chapter because antifungal foods, herbs, and teas can act medicinally and cause die-off symptoms, especially in someone with severe YOS. Yeasts have been invading and evading humans for eons and the mere whiff of starvation sends them into a frenzy of sugar and carb cravings, so just remember, it’s the yeast that’s making you crave and eat that sugar, not you! A self-preservation feature of some foods and herbs is having antifungal properties that keep animals from eating them before they’re had a chance to reproduce! We can benefit from this natural protection.

Food:
Apple cider vinegar
Almonds
Daikon (large white radish)
Ghee (clarified butter with water and solids removed)
Lemons and limes
Onions
Seaweed
Seeds (pumpkin, sunflower, sesame)
Vegetables high in isothiocyanates, the sulphur- and nitrogen-containing compounds that attack yeast: Broccoli, Brussels sprouts, Cabbage, Cauliflower, Arugula, Radishes

**Herbs & Spices:** Aloe Vera juice, Barberry, Black walnut, Calendula, Cayenne, Cedar, Chamomile, Chaparral, Cinnamon bark, Cloves, Coriander, Cumin Fennel, Frankincense, Garlic, Ginger, Golden seal, Lavender, Lemongrass, Licorice, Myrrh, Neem, Olive leaf, Oregano, Pau d’arco, Peppermint, Rosemary, Sage, Spilanthes, Turmeric, Usnea

**Teas:** Many of the above herbs can be taken as teas, but the one that I think is most medicinal is Pau d’arco/Teehebo/La Pacho. This herb with three names comes from the inner bark of a tree that grows in Brazil that has remarkable antifungal properties.

**Brewing Herb Tea**
Use 1 teaspoon dried herb per cup of water. When infusing fresh herbs, use 2 to 3 times more than dried herbs. Pour hot water over the herb in a closed container and leave to steep for 5-20 minutes. The longer the brewing time the more bitter the taste, but the more powerful the properties as more alkaloid chemicals are coaxed out of the herb. If you make more than a cup, don’t strain out the herbs but store in a glass jar in the fridge. The tea will become even more potent.

**The Slow Approach to Yeast Detox**
Below is a description of the Yeast Detox ingredients and how to slowly incorporate them to avoid die-off. But first, let’s deal with the question: What is die-off?

**Die-Off or Herxheimer Reaction**
I talked about this reaction earlier in the chapter but I want to remind you that as they are killed, yeast organisms release substances that are toxic to the body. If this process occurs more quickly than the toxins can be cleared from the bloodstream and eliminated by the body, a temporary toxic or allergic-type reaction can occur. The technical name for this experience is a Herxheimer reaction; it is more commonly referred to as "die-off.”
Usually die-off lasts only a few hours, though it can last several days. It can usually be controlled almost entirely by the amount of Yeast ReSet Detox formula you use and how often you take it. Signs of a healing reaction can be many and varied but generally involve such discomfort as aching, bloating, dizziness, nausea, and overall "goopy sick" feeling, or a worsening of original symptoms. Fortunately, die off is generally short in duration, and although uncomfortable, is at least a confirmation of the presence of Candida and that something is shifting – for the better.

1. Bentonite Clay
Bentonite clay magnetically attracts intestinal toxins and eliminates them in the stool. It’s bound inside the gel created by psyllium, which sweeps into all the crevices of the intestines, mopping up toxins.

The most beneficial aspect of bentonite clay is that it keeps yeast toxins from being absorbed through the intestinal lining and into the blood stream. This product alone can diminish headaches, fatigue, joint pain, and nausea, among other symptoms. In fact, I recommend bentonite by itself for people who experience die-off symptoms daily and who find it almost impossible to go on a yeast diet because of die-off.

If you’ve already begun the Yeast ReSet Diet, and Prescript Assist Probiotics, the next step should be the Yeast ReSet Detox (Bentonite, Psyllium, Antifungals). But what if you are already having too much die-off on the Yeast ReSet Diet?

If that’s the case, you need to immediately add bentonite clay. If your Candida Questionnaire Total Score is over 200, you already know that yeast are going to rebel when you starve them. Or you may dread doing the Yeast ReSet Diet since you’ve had yeast die-off reactions before. The solution is to begin to take bentonite clay even before you begin the diet. The dosage is 1 tsp.-1 Tbsp., taken one to three times a day in 4-8 oz. of water on an empty stomach at least 1 hour before eating. You don’t want it absorbing nutrients from the good food that you are now eating. You can take the bentonite clay one to three times a day judging by how you feel as it helps absorb yeast toxins.

Getting The Lead Out
In the past several years there has been some controversy about bentonite clay harboring measurable levels of lead. An April 2017 post on the popular website Wellness Mama gives a very thorough report that says we don’t have to worry. I’ll excerpt some comments but you can read the whole article for more information.

The lead scare in bentonite and many other products is part of the excessively strict Proposition 65 (Safe Drinking Water and Toxic Enforcement Act) in California, which requires hundreds of potentially harmful chemicals to be labeled. Under their designation of potential harm we would be banned from eating most vegetables!

The Prop 65 “no significant risk” level for lead is 15 micrograms (mcg) per day. People are warned not to ingest lead above that level. However, here are examples of the levels of lead in a typical serving of several foods cited on Wellness Mama.

- Fresh collard greens: 30 micrograms of lead (50x higher than prop 65)
- Dry roasted mixed nuts: 20 mcg of lead
- Brussels sprouts: 15 mcg of lead
- Sweet potatoes: 16 mcg of lead
- Spinach: 15 mcg of lead

Wellness Mama says that the amount of lead present in the average amount of bentonite clay used is less than half of the lead found in spinach. Lead is dangerous, even in tiny amounts but only if it is able to build up in the body. This does not occur with the trace amounts of lead in clays like bentonite or in a good diet because lead preferentially binds to other elements like copper and zinc and is eliminated from the body. Also, taking balanced levels of magnesium (600 mg ReMag) and calcium (600 mg ReCalcia) keep lead from depositing in your bones.

I don’t want you to take anything that’s harmful and I know there are people who will argue that any amount of lead is unsafe in any form. I say that we can support our bodies to be healthy and keep us safe. If you are on ReMyte, you will have your copper and zinc to bind lead. If you take ReMag and ReCalcia, you will protect your bones from lead. If you avoid bentonite because of what you have heard about lead then you will have to avoid most foods as well. Since that doesn’t make any sense, keep on taking your Total Body ReSet formulas and cultivate a healthy body where lead is not welcome.
2. Psyllium Seed Powder

Continue to build your formula adding psyllium seed powder. Take one or two doses a day of the psyllium along with bentonite. You can begin with 1 tsp. and work up to 1 Tbsp. As discussed above, mix psyllium and bentonite together in 4 ounces of water, shake quickly, and drink fast. If you let the mixture sit, it will turn into a gel. After you swallow it down, follow with another 8-10 ounces of water for a total of 12-14 ounces. Take the first dose when you wake up in the morning, one hour away from food and supplements, and the second dose last thing at night, at least an hour away from food or supplements. If you find you still have some toxic symptoms, you can take another dose or two of bentonite alone, at least one hour away from food.

The gel produced when psyllium is mixed with water is the key to delivering bentonite and the antifungal directly to the intestines where Candida makes its home.

Psyllium Seed Powder versus Husks

The seeds of the Plantago ovata plant are the origin of psyllium seed powder and psyllium seed husks. The powder is made by grinding the husks down to a much finer consistency so that the gel is thicker and has a less grainy texture. I recommend the powder because the gel has a much better consistency for binding with bentonite and the antifungal. The husks are usually less expensive, but you have to take more of the husks to get the same gel effect as the powder, so in the long run, the powder is a better choice.

NOTE: I just did an experiment to compare husks and powder. I put 20 oz. of husks into my Blendtec high speed blender and after 1 minute of processing, I ended up with 12 oz. of fine powder. You can do the math on what that means in terms of cost savings if you blend your own powder from husks vs. just buying the powder. Three tsp. (1 Tbsp.) of psyllium husk is roughly equal to 2 tsp. of psyllium powder.

Psyllium husk has 5 grams of fiber per 1 Tbsp. serving and psyllium powder has 5 grams of fiber per 2 tsp. One dose of psyllium provides 20 percent of the recommended fiber on a 2,000-calorie-per-day diet.
The fiber found in psyllium swells up when it comes in contact with liquids, creating a soft, fibrous gel. When used in the Yeast ReSet Detox, the psyllium binds bentonite and the antifungal in the gel matrix bringing those ingredients directly to the walls of the intestines where they kill off yeast, hoover up yeast toxins, and like a fibrous broom, sweep everything out.

Even if you don’t have YOS, psyllium’s insoluble fiber lends bulk to the intestines to help with symptoms of gas, bloating, diarrhea, and/or constipation. Psyllium provides an enormous surface area that sweeps through the intestines pushing out debris and mechanically trapping toxins. Don’t underestimate the power of psyllium. It’s a non-toxic fiber that helps increase your colon transit time and eliminates constipation. It replaces the necessary fiber that you lose when you avoid gluten grains on the Yeast ReSet Diet.

Both psyllium powder and husks need to be mixed with enough water, as directed above. Not taking enough water can cause constipation as well as pain in your digestive tract as the fiber can harden and be difficult to pass. Follow the water intake guidelines above to ensure you stay properly hydrated. Because psyllium can affect certain medications, be sure and take your medications at least an hour away.

After three weeks of psyllium and bentonite, your yeast-free diet should no longer be causing die-off because all the yeast toxins are being absorbed. Then it’s time to introduce the Antifungals, but first, Prescript Assist Probiotics.

3. Prescript Assist Probiotics

Many people are already taking probiotics. My recommendation is for a soil-based probiotic called Prescript Assist, so when you finish your current probiotic, then you can switch. As noted above, if you haven’t taken any probiotics, you can add them at any point in the beginning of your Yeast ReSet program.

Probiotics replace the good bacteria in the intestines. Most probiotics on the market are bifidobacteria and lactobacillus. That’s because they are the main inhabitants of eliminated stool and therefore the most researched probiotics. Interestingly, samples taken from the intestines during colonscopy and endoscopy show that bifido and lacto are not the most active intestinal bacteria or the ones that actually help alleviate a wide
variety of health problems. However, it’s going to take years to turn the juggernaut that is probiotic research away from their current lacto and bifido focus.

That’s why I want to inform you that the human gut requires a proper balance and a wide variety of soil-based probiotics to experience good health. Soil-based organisms (SBO) have been widely studied and have a positive effect in a wide variety of human conditions such as Candida, diarrhea, dermatitis, H. pylori, IBS, IBD, leaky gut, GERD, and viral infections.

Here’s my personal experience: I’ve been taking probiotics on and off for decades and I’ve never once noticed that they did anything for my mild IBS and choppy, frequent stools. However, several years ago, after taking two Prescript Assist SBO capsules eight hours apart, my next bowel movement was completely different from the thousands I’ve had before. I had no gas, no stool odor, and the stool was well formed and sunk like a log. I was amazed. Really amazed. Since then, I’ve been recommending Prescript Assist as the most effective probiotic to both treat and prevent bowel flora imbalance.

Prescript Assist Probiotics consist of a proprietary blend of soil-based organisms. Unlike most other probiotics, Prescript Assist Probiotics are not weak and fragile. They don’t have to be refrigerated and can be taken on a full or empty stomach at any time of the day. The stability of Prescript Assist comes from the durable seed-like structure that surrounds the bacteria, thus safeguarding them from light, heat and pressure. Routine testing shows that Prescript Assist retains more than 95 percent of its potency two years after the date of manufacture, even when stored at 98°F. The shelf life of Prescript Assist is 4 years.

The unique seed-like structure encasing the probiotic bacteria in Prescript Assist protects them against degradation by stomach acid, which destroys most probiotic formulas. Protected Prescript Assist bacteria remain intact until they reach their target destination, which is your intestines, where they become active and multiply.

The broad-spectrum formula contains 29 different strains of beneficial microflora, which means it better reflects the great microbial diversity of the intestines versus typical probiotic products that mostly feature lactobacillus and bifidus bacteria. Prescript Assist supplies its 29 strains of beneficial microflora with a food source once they reach the GI
tract. This natural food source includes leonardite, a prebiotic composition of humic and fulvic acids, a source of pure organic carbon molecules.

The efficacy of Prescript Assist is verified by a peer-reviewed, double-blind, placebo-controlled human clinical trials, including a one-year follow-up study. I turned away from lacto and bifido probiotics when it became obvious they weren’t working because the recommended dosage of lacto and bifido probiotics has risen dramatically since I first went into practice, from several million to 250 billion. If they aren’t working, the solution is to just use more. I see the same mentality in antibiotic or supplement dosage where the dosage amounts have been steadily increasing because they just aren’t working. What is important is the biodiversity and synergism of the Prescript Assist soil-based formula where the whole community of organisms is much stronger than the sum of its parts.

**Benefits Of Soil-Based Probiotics**

As I mentioned earlier, I thought probiotics acted mainly as a physical guard against yeast and produced a few vitamins. With the recent flurry of probiotic research, their benefits have been growing by leaps and bounds.

- Reduce or eliminate allergies – inhaled and food
- Protect the brain from brain fog, irritability and depression
- Utilize carbohydrates and fat
- Reduce cholesterol
- Assist detoxification
- Prevent constipation, diarrhea, flatulence, and abdominal bloating
- Signal hunger or fullness
- Eliminate sinus infections
- Boost immune function
- Decrease body-wide inflammation
- Help absorb nutrients
• Protect your intestines from IBS and inflammatory bowel disease
• Produce neurotransmitters
• Eliminate and prevent skin rashes, boils and hives
• Increase tolerance to dairy products
• Protect the bladder from urinary tract infections
• Help make vitamins
• Assist in weight loss
• Control yeast overgrowth

Many of the benefits of probiotics can be due to their ability to counteract the growth of yeast in the intestines, yet most lists don’t acknowledge that fact. Some practitioners, seduced by the new microbiome research, say that all we need is lacto and bifido probiotics. However, instead of constantly having to take more and more probiotics, the better plan is to take Prescript Assist Probiotics and do a Yeast ReSet Detox.

4. YEAST RESET ANTIFUNGALS
The following are well-known antifungal remedies that you can rotate in your treatment of YOS so that the yeast organisms don’t develop a resistance to any one of them. I’m not going to spend time describing all their antifungal properties; I will leave it to you to do your own research if you want to know more.
• Garlic
• Grapefruit seed extract
• Oregano oil
• Caprylic acid – made from coconut oil

NOTE: Oregano is from the Lamiaceae family plants, which include basil, hyssop, lavender, marjoram, mint, and sage. If you have experienced allergy to any of these herbs in the past, be aware that you may react to oregano oil.

Finding Good Herbal Products
Try to obtain organic herbs. You can purchase them in your local health food store or online at Vitacost.com.

**What About Silver?**
Silver as an anti-infective agent comes in many forms. You can even make your own colloidal silver. However, I’m not convinced about the safety of making your own colloidal silver. I mostly recommend Sovereign Silver, or Silver Hydrosol by Natural Immunogenics, a company that pioneered an unprecedented form of colloidal silver in 1999. They are the leading experts in silver technology with scientific research to back up their products. They also have an excellent customer service staff that can help you with the proper application of their products. I specifically recommend their silver in the treatment of prostatitis, which is below in Chapter 10.

I haven’t used Silver for the treatment of yeast, but it might be helpful for SIBO. It is a good product that can be uses as a substitute for antibiotics for common infections.

**Yeast ReSet Detoxes the Liver**
The three ingredients together create a gel broom that sweeps the natural antifungal along the intestinal wall killing yeast in its path. The bentonite clay absorbs toxins and minimizes the Herxheimer or die-off effect of the billions of yeast that are being killed. The *Yeast ReSet Detox* does more than flush out and kill yeast. Psyllium fiber and bentonite clay don’t just remove toxins from the intestines; they help detox the liver as well. As the intestinal toxins diminish, the liver is able to dump more of its toxins. Many practitioners think their patients need to do a separate liver detox. I don’t agree. I think pushing the liver to detox before it is ready can backfire by releasing toxins that are harbored in the liver. So, I go about liver detox very gently by pulling toxic bile from the intestines.

Briefly, here’s what happens: when drugs, yeast toxins, or bacterial toxins find their way into the blood stream, they are usually intercepted by liver enzymes as the blood passes through the liver. The liver then binds these toxins up with bile. However, bile is naturally recycled in the intestines. A nice bonus if your bile is pure, but if it’s loaded with toxins, those toxins just get more concentrated as the bile is reabsorbed back
to the liver. The fiber in Psyllium binds bile and drags it out completely with your bowel movements, so Yeast ReSet Detox has the added bonus of being a gentle liver flush.

**ENZYMES AND HYDROCHLORIC ACID**

Pancreatic enzymes and hydrochloric acid can help with gas and bloating. But before you spend money on another supplement, take some simple advice:

* Don’t load your mouth with food; give it room to be coated with saliva to aid digestion.
* Chew your food well, about 30 times per mouthful until the food is liquid.
* Do not drink water, especially ice water, with your meals; it dilutes your stomach acid and hardens fats and oils in your food.
* Eat slowly and under as little stress as possible.
* Do not eat until you are full. Loading your stomach leaves little room for digestion.

Natural remedies that help digestion include raw foods. That’s right, a food that is raw, that hasn’t been processed or heated, contains natural enzymes that assist in its own digestion. If you chew that food well, you release those enzymes to do their work.

Apple cider vinegar (organic) is a folk remedy that has stood the test of time. The butyric and acetic acids in ACV seem to stimulate stomach acid to help digest food, relieve bloating, assist in detoxification as they balance your pH and act as a prebiotic for friendly intestinal bacteria. Dilute one Tbsp. with about 12 ounces of room-temperature water and drink in the morning, or drink 2-3 ounces before meals.

**Hydrochloric Acid (HCL)**

When it comes to taking supplemental digestive aids, HCL is probably more important than pancreatic enzymes. HCL in the stomach is crucial for activating stomach pepsin, breaking down our food, making minerals more bioavailable, and killing parasites. It’s depleted by stress, OTC antacids, and proton pump inhibitors. Contrary to medical opinion, heartburn, reflux, and GERD are caused by low stomach acid.

In my naturopathic training we learned to give increasing amounts of HCL to diagnose and treat low stomach acid. You begin with one tablet or capsule at the end of a protein meal and each subsequent meal, add a tablet. Usually you should not have to go above 6 tablets before you get a slight burning in your stomach. That’s when you know
you don't need quite that much and you cut back by 1 pill. Keep taking that amount for
each protein meal until you get a burning sensation again, at which point you cut back by
one pill. After several months, you may not require any HCL to digest your meals. This
means your HCL has been activated and is stimulating your pepsin to work normally and
effectively.

### Anti-Fungal Drugs

I’m not advising the use of antifungal drugs, but it’s only wise to know that they exist and
to be aware of their side effects.

<table>
<thead>
<tr>
<th>Nystatin (Nilstat, Mycostatin)</th>
<th>Ketoconazole (Nizoral)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fluconazole (Diflucan)</td>
<td>Itraconazole (Sporanox)</td>
</tr>
</tbody>
</table>

### Nystatin

When I was in private practice, I used to prescribe Nystatin in powder form without any
binders, fillers, or additives. I found it quite effective when used along with diet and
probiotics. Nystatin was first isolated from Streptomyces noursei in 1950. Its focus is on
the GI tract where yeast live and very little is absorbed into the blood stream. The
standard dose is 500,000 to 1 million units, four times daily. Each tablet is 500,000 units,
or ⅛ teaspoon of the powder.

Unfortunately, when most doctors prescribe it, they don’t emphasize the
importance of diet and probiotics. When they do prescribe it, they use Nystatin liquid that
is laced with sugar or tablets that are coated with dye and sugar. Just what your yeast is
looking for – more sugar!

### Azole Antifungals

The next 3 drugs are all of the same family with similar mechanism of action and a
similar list of side effects. I’m listing them to familiarize you with the only tools that
most doctors have to treat YOS. The drugs are not specific for Candida albicans but we
also know that Candida has developed resistance to Ketoconazole.

### Ketoconazole (Nizoral)
On July 26, 2013, the FDA issued a warning about ketoconazole (Nizoral). The FDA stated that oral forms of that drug should never be used as first-line therapy for any type of fungal infection because of the risk of severe, acute liver toxicity and interactions with other drugs. The drug interactions occurred because ketoconazole inhibits the CYP3A4 enzyme, which metabolizes drugs and increases the chemical reaction rate of hormones. With these enzyme functions curtailed, other drugs can become toxic and even fatal. Adrenal insufficiency can occur, and endocrinologic abnormalities observed include gynecomastia in men and menstrual irregularities in women.

Based on the same evidence, the European counterpart to the FDA pulled the oral form of ketoconazole off the market, but it remains in use in the U.S. If your doctor hasn’t read the warnings, you may still be prescribed this very toxic drug. The FDA approved it in 1981 and it took all this time to do something about the mounting death toll.

**Itraconazole (Sporanox)**

Sporanox was developed in 1984; it is less toxic than Nizoral but still has a similar list of side effects:

<table>
<thead>
<tr>
<th>Elevated liver enzymes</th>
<th>Loss of appetite</th>
</tr>
</thead>
<tbody>
<tr>
<td>Congestive heart failure</td>
<td>Jaundice</td>
</tr>
<tr>
<td>Liver failure, sometimes fatal</td>
<td>Itching</td>
</tr>
<tr>
<td>Nausea</td>
<td>Dark urine</td>
</tr>
<tr>
<td>Vomiting</td>
<td>Pale stool</td>
</tr>
<tr>
<td>Abdominal pain</td>
<td>Headache</td>
</tr>
<tr>
<td>Fatigue</td>
<td></td>
</tr>
</tbody>
</table>

**Fluconazole (Diflucan)**

Diflucan was first marketed in 1990. In the last five years of my private practice in Toronto, I was seeing so many people with YOS that I was approached by a drug company to run clinical trials on this new antifungal. They offered me $1,000 per patient to do the trial. I refused because I’d already heard that Diflucan was showing a wide range of side effects.
It wasn’t until years later that I learned Diflucan is a fluoride drug with two fluorine atoms per molecule of Diflucan. Fluorine is very toxic and one of its actions is to bind irrevocably with your body’s magnesium leading to magnesium deficiency and the inability of magnesium to perform its 700-800 enzyme reactions in the body.

Working with ADHD and autistic children, I’ve noticed an increase in the use of Diflucan for these children as doctors become aware that the children suffer from YOS, not realizing that while trying to eradicate one problem they are creating another.

Here are some of the side effects of Fluconazole:

<table>
<thead>
<tr>
<th>Mild stomach pain</th>
<th>Jaundice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diarrhea</td>
<td>Fever</td>
</tr>
<tr>
<td>Upset stomach</td>
<td>Chills</td>
</tr>
<tr>
<td>Headache</td>
<td>Body aches</td>
</tr>
<tr>
<td>Dizziness</td>
<td>Flu symptoms</td>
</tr>
<tr>
<td>Unusual or unpleasant taste in your mouth</td>
<td>Severe blistering</td>
</tr>
<tr>
<td>Nausea</td>
<td>Peeling</td>
</tr>
<tr>
<td>Upper stomach pain</td>
<td>Red skin rash</td>
</tr>
<tr>
<td>Itching</td>
<td>Easy bruising or bleeding</td>
</tr>
<tr>
<td>Loss of appetite</td>
<td>Unusual weakness</td>
</tr>
<tr>
<td>Dark urine</td>
<td>Seizure (convulsions)</td>
</tr>
<tr>
<td>Clay-colored stools</td>
<td>Birth defects in children born to pregnant women taking the drug</td>
</tr>
</tbody>
</table>

**TREATING SIBO**

The *Yeast ReSet Protocol* will help treat SIBO – the antifungals you rotate do have some antibacterial properties. However, if the *Protocol* doesn’t get rid of your symptoms entirely, you can the following one of these antibacterial combinations, but keep using your *Prescript Assist Probiotics* and periodically do your *Yeast ReSet Detox*. 

Carolyn Dean MD ND 155
1. A combination of Dysbiocide and FC Cidal, both from Biotics. Dosage for each:
   2 capsules, twice a day. For sensitive people, start with one capsule a day of one
   of them and increase slowly.

2. A combination Candibactin-AR and Candibactin-BR from Metagenics. Dosage
   for each: 2 capsules, twice a day. For sensitive people, start with one capsule a
day of one of them and increase slowly.

An industry study was done using the above products for SIBO and published in the
journal *Global Advances in Health and Medicine*. The results showed that these herbal
therapies are at least as effective as rifaximin for resolution of SIBO as shown by
lactulose breath testing. Herbals also appeared to be as effective as triple antibiotic
therapy for SIBO rescue therapy for rifaximin non-responders.

The actual numbers showed the herbals to be 12% more effective than rifaximin
(46% vs. 34%), at normalizing breath hydrogen tests in patients with SIBO. These
numbers show that the “cure” rate was a maximum of 46%, which means 54% failed
treatment. That’s why just using antibiotics or just using herbal antibacterials does not
result in a cure, and why I recommend my protocols first and perhaps the herbal
antibiotics if necessary down the road.

**WHAT ABOUT PARASITES?**

By definition, parasites are opportunists that hitch a ride on a vulnerable host. *YOS* makes
the immune system vulnerable and distracted, often leaving parasites to have their way in
a leaky, irritated gut. I’m not comfortable with treating parasites without a fresh stool
sample. However, it’s nearly impossible to find a clinic or hospital that performs this vital
testing. Testing stool that’s been put in a test tube with a preservative often produces false
negative results, which means the parasites are there but nobody can see them.

Unfortunately, there are no comprehensive blood antibody tests for all the parasites that
can infect humans.

When I was in private practice, I told patients that humans should be “dewormed”
like our pets. At that time I recommended various herbal combinations, but since it’s
almost impossible to guarantee the purity of herbal products, I personally use
diatomaceous earth periodically along with my bentonite and psyllium, just like I periodically use an antifungal.

**Diatomaceous Earth**

Ninety-two percent of diatomaceous earth (DE) is made up of silica, which in DE is a miracle of detoxing technology. DE is composed of powdered fossilized shells. In water DE expands to hundreds of times its dry surface area and is capable of absorbing toxins many times its original weight.

DE and bentonite, as noted in the chart below, both harbor intense negative charges and are able to adsorb and absorb most toxins, free radicals, pesticides, drugs, endotoxins, and heavy metals. Bentonite adsorbs bacteria associated with diarrhea, yielding fast results. DE has been shown to adsorb intestinal influenza virus and relieve symptoms. DE also absorbs many bacteria, some very large viruses, all parasitic protozoa, fungi including Candida albicans, and worms.

It’s also an intestinal detox and liver detox. The fiber treats bowel irregularity and pulls out toxins. The silica absorbs toxins from your liver, from harmful bacteria, and from yeast.

Bentonite and DE both possess significant electro-physical similarities, making their attributes overlap. Bentonite has an incredibly large surface area and greater capacity for water absorption than DE. DE has anti-parasitic and anti-yeast properties and treats worms. Therefore, I recommend using both products.

Research food-grade DE and decide whether or not you want to add it to your protocol. I only take a half-teaspoon twice a week. But if I thought I was infected with parasites, I’d get a stool test and take more.
<table>
<thead>
<tr>
<th>QUALITY</th>
<th>BENTONITE</th>
<th>DIATOMACEOUS EARTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>smallest indivisible particle</td>
<td>playing card shape; 1 micron (1/1000 millimetre) in length;</td>
<td>convex coffin shape (frustule);</td>
</tr>
<tr>
<td></td>
<td>front/back surfaces highly negatively charged, edges positive</td>
<td>10 microns in length;</td>
</tr>
<tr>
<td></td>
<td>{DOMINANT negative charge}</td>
<td>negatively charged;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>lattice of 1-micron pores throughout;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>very hard frustules with sharp edges</td>
</tr>
<tr>
<td>Surface area</td>
<td>over 700 sq. metres/g in suspension</td>
<td>36 square metres per gram</td>
</tr>
<tr>
<td>pH</td>
<td>8.5 to 10.5</td>
<td>8.0</td>
</tr>
<tr>
<td>ad/absorptive commercial uses</td>
<td>Clarifying agent for wine, beer, oils, vinegar, and fruit juices. Used in water purification.</td>
<td>Porosity lends itself to filtration of fish tanks &amp; swimming pools. Purification of drinking water, beer, wine &amp; honey without altering taste/nutrition.</td>
</tr>
<tr>
<td>water absorption</td>
<td>15x its volume</td>
<td>1.1 times its weight</td>
</tr>
<tr>
<td>ad/absorptive uses in Humans</td>
<td>Because of intense negative charges, ad/bsorb most toxins, free radicals,</td>
<td>Absorbs all microbes larger than the 1 micron pores (many bacteria, some very large viruses, all parasitic protozoa, fungi including Candida albicans)</td>
</tr>
<tr>
<td></td>
<td>pesticides, drugs, endotoxins and heavy metals.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Adsorbs bacteria associated with diarrhea, yielding fast results. Shown to adsorb intestinal influenza virus and relieve symptoms.</td>
<td></td>
</tr>
<tr>
<td>systemic absorption</td>
<td>None</td>
<td>Negligible</td>
</tr>
<tr>
<td>Anthelmintic</td>
<td>No</td>
<td>Cuts up intestinal worms with sharp edges &amp; causes their expulsion.</td>
</tr>
<tr>
<td>mechanical colon cleanser</td>
<td>Cleansing restricted to adsorption.</td>
<td>On its own, scrubs the intestinal wall of mucus and impacted fecal matter due to its hardness &amp; sharp edges.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Synergistically active when pressed up against intestinal wall by Psyllium gel, which already is scrubbing the walls with its own seed fragments.</td>
</tr>
</tbody>
</table>
Chapter 7: LIVING A YEAST-FREE LIFE

In the book I coauthored with Dr. William Crook, *The Yeast Connection and Women’s Health*, we included the 6-Step Plan that Dr. Crook initiated with his first book, *The Yeast Connection*. These steps, beyond diet, probiotics, and antifungals, will help you fine-tune your *Yeast ReSet* and reach your balance point. You may, of course, incorporate all these steps from the beginning of your *Yeast ReSet Protocol*. Items 1 and 2 have already been covered. I will outline 3-6 in this chapter.

1. Healthy Diet – Chapter 5
2. Antifungals and Nutritional Supplements – Chapter 6
3. Avoid Chemical Exposure – Chapter 7
4. Movement – Chapter 7
5. Balance Your Emotions – Chapter 7
6. Health Care Professional – Chapter 7

**AVOID CHEMICAL EXPOSURE**

People with *YOS* have sensitized their mucus membranes to chemicals as the yeast pokes holes in these sensitive areas. I spoke about leaky gut in Chapter 3, but leaky sinus and leaky nasal mucosa membranes are also created by yeast. An irritated and leaky gut allows toxic chemicals to be absorbed through the GI tract into the blood. Leaky sinuses allow the same to happen when you inhale toxic fumes and microscopic particulate matter from cigarette smoke, car exhaust, gasoline, mold, perfume, and even laundry products.

Being sensitive to one chemical often triggers a whole list of offenders as the immune system is forced to deal with increasing levels of foreign chemicals. It’s also possible that becoming sensitized to a chemical can bring on allergic reactions to plant pollens and animal fur, hair, and dander.
To think you are “allergic to everything” can be very disheartening. But, if the tendency to allergy is created by YOS, you can look forward to eliminating your allergies as your yeast comes under control.

Below, you will see that the main symptoms of chemical sensitivities can also be symptoms of yeast. They include the following:

- Depression
- Dizziness
- Fatigue
- Fuzzy or foggy thinking
- Headaches, head pressure
- Muscle and joint aches
- Respiratory symptoms, including symptoms of asthma
- Runny nose and eyes
- Sinus infections or sinus drainage or postnasal drip

Chemical exposure is not something you can easily avoid altogether. Even if you are in a sealed up room, the outgassing of rugs, furniture, appliances, paint, and office equipment can build up to measurable levels. But, you can try and limit your exposure and be sure to air out stuffy rooms to help take the pressure off your immune system. You can review the following list of chemical contacts and take steps to minimize your exposure.

- Aerosol spray
- Air fresheners
- Auto fumes
- Buildings sealed without the ability to open windows
- Carpet, upholstery, curtains treated with chemicals
- Cleaning products
- Electromagnetic radiation from computers, televisions, etc.
- Fingernail polish and remover
- Fertilizers
- Fumes from copiers, office equipment
- Fumes from dry cleaning solvents
- Gas vs. electric stove or heating unit
- Glues
- Insecticides
- Mercury amalgams and other dental composites
- Molds in schools, office buildings, homes, apartments
- Newsprint
• Paint, paint removers, and varnishes
• Particleboard made with formaldehyde
• Perfumes and scented cosmetic products
• Pesticides
• Synthetic clothes
• Tobacco smoke

Proactive Steps To Reduce Chemical Exposure
• Remove as many chemicals from your house as possible following the above list.
• Walk outside every day and breathe fresh air.
• Open your windows and air out your house and office daily. Remarkably, outside air is often less contaminated than indoor air, even taking into consideration the dangers of air pollution.
• Avoid toxic cleaning products. Use baking soda, unscented soap, vinegar, lemon juice, or food grade hydrogen peroxide for cleaning.
• Use unscented personal care products: cosmetics, deodorants, soaps, and laundry detergents.
• Dry clean as few items as possible (air them out before wearing) or use an “organic” dry cleaner.
• Buy and eat organic foods and products as much as possible.
• Use saunas; sweating helps your body clear toxins.
• Take baths with clay and magnesium flakes.

MOVEMENT
Even the simple exercise of walking helps your blood circulation and pumps fresh air into your lungs. Your lymphatic circulation depends on regular movement and exercise to push toxins out of the body. When doing the Yeast ReSet Protocol, increase your exercise to improve the ability of your blood and lymph to clear toxins that are being created as your yeast die off.

You can walk, swim, stretch, and do simple resistance exercises. The important part is to listen to your own body. Experiment. See what feels good to you. I take an early
morning walk before the sun rises over the mountain behind my house. I do stretching throughout the day and have an afternoon swim either at the pool or at the beach.

Above all, get oxygen into your body; don’t take it in a pill form, get exercise.

BALANCE YOUR EMOTIONS
I’ll give you Dr. Crook’s advice later, but first, here are 4 pieces of advice I give people to help break the hidden links with illness and grief.

1. Affirmation: A Small Property
This affirmation is taken from a lecture by Gilbert Renaud, ND – my Total Biology teacher. It so aptly describes the majority of patients, clients, and customers who approach me for relief of their symptoms. Paying attention to the physical body is not enough in our complex, stress-filled society; we have to delve further into the mind and spirit.

“I was a small property ravaged by a storm. The fine weather has returned. The forest and the river have become calm. The house is vibrant and shines in the sun. And above all, the field is returning to its order, health and beauty. Thank you my diseased and depleted organs, for I know you have done all this to save my whole being. And thanks to myself for doing my healing.”

Repeat 10 times in the morning (before getting up), around lunchtime 10 times, and 10 times at night (just before falling asleep) Repeat in a calm and relaxing atmosphere, with eyes closed or in the dark. Verbalize with consciousness. Take the time to visualize and identify each symbol as clearly as possible. Write down any dreams that you remember!

2. General Affirmation: I am filled with love and understanding.

3. Breaking Links: To break the links to past illness and associations that hamper, listen to the Italian opera song “Time to Say Goodbye.”
4. **The Link Breaker: Walnut – Bach Flower Remedy**

“I break all links that hinder my growth.”

**Dosage:** 5-10 drops three times a day

---

**Emotional Vitamins**

Dr. Crook talked about the emotional vitamins that we require to balance our lives. He listed them as Love, Encouragement, Praise, Touch, Hugs, and Laughter.

These "nutrients" strengthen your immune system and play an important role in your health. Simply communicating with others who share your experience will give you comfort in knowing you’re not alone. I do not suggest you talk to people about what’s wrong with you, but what’s right with you. Reinforcing the positive things in your life with your words brings more positivity to you. Talking to a friend or being in a support group continually repeating what’s wrong and what you don’t want just brings more of that into your existence.

Change can be challenging and stir up lots of negative emotions. You'll run into resistance and frustration. You probably already have – many times. Remember, these blocks are normal. The benefit of dealing with them? Better health. So don't be surprised or quit when you hit a bump. Just note which stage of change you're in and keep moving.

Part of acknowledging and taking care of your emotions is taking time for yourself. All of us need our “alone time.” Of course, it's very difficult to find quiet time for yourself in a busy life. But this reflective time is vital when you have a chronic condition like YOS. Here are a few ideas to squeeze stress relievers into your day:

- Take a 15-minute, early morning walk all by yourself. Smell the flowers. Listen to the birds. Talk to the angels. Give a happy wave to the garbage man and postman. You’ll not only de-stress, but you’ll get a head start on your all-important exercise regimen.
- Get up 15 minutes earlier than the rest of your family and spend a few minutes in meditation. Read an inspiring poem or sip a cup of herbal tea. The key is to do that one thing and nothing else.
• Take a midday break. You can even make it part of your lunch hour. Do some deep breathing exercises, close your eyes for five minutes, or have a carefree chat with a friend, which is in itself a great stress reliever!

• Adopt an "attitude of gratitude". Before you go to bed at night, think of five things for which you are grateful. It might be something as simple as the smile on a child’s face or a small gift, or something big, like your health or the abundance that’s allowed you a roof over your head. This exercise goes a long way toward banishing tossing and turning in the middle of the night.

You might at first wonder what all this has to do with yeast. It turns out that stress and the hormonal cascade that it creates also create yeast! Let me set the stage with information from a Scottish MD, Dr. Malcolm Kendrick, author of *The Great Cholesterol Con*, who says that stress is the cause of the very serious condition of heart disease, and that modern medicine is ignoring it! Kendrick says, “Everyone has always known that stress kills. The medical profession, which has a horrible aversion to accepting that there is any connection between the mind and the body, has tried to crush this ‘knowledge’ using western scientific methodology as its weapon of choice, ‘We can’t measure stress, so it doesn’t exist.’”

However, stress can be quantified by measuring the hormones produced by the HPA (hypothalamus, pituitary, adrenal) axis. Kendrick and a few researchers say that stressful overstimulation of the HPA axis creates all the messed-up biochemistry that causes arteries to clog up and hearts to fail. When you look at cortisol, one byproduct of stress, and what it does to the body when it runs rampant, the association becomes clear. And, as I’ve already said, cortisol is a hormone responsible for allowing yeast to grow out of control.

I think it’s important for us to understand the stress cycle as it occurs in the body. An activated sympathetic nervous system, reacting to stress, is in a ‘catabolic’ (break down) state in which the body burns up its energy stores (especially magnesium) to be ready for fight or flight (or during exercise). Its opposite, an activated parasympathetic nervous system, is epitomized by raised insulin levels, representing an ‘anabolic’ (build up) state, in which we eat, digest, store energy, and then sleep. But the stressed parasympathetic nervous system is disrupted by magnesium deficiency. You can’t sleep...
properly unless you have enough magnesium, and the stressed sympathetic nervous system is burning off magnesium. The underlying reason why the HPA axis can’t support itself and crashes is because of magnesium deficiency!

In his book, Kendrick surmises what happens when these two antagonistic systems are triggered at the same time. He says, “I reasoned that if you were stressed, and then tried to eat, your metabolism would be thrown into confusion. You would be commanding the neurohormonal system to activate catabolism and anabolism simultaneously. This would mean high levels of adrenaline and cortisol, battling against high levels of insulin. Adipose tissue would be under instructions to both absorb and pump out fats into the bloodstream. At the same time, the liver would be trying to store, and release, glucose. With food inside them, your guts would be automatically switched to ‘absorption’. But the sympathetic system would be fighting to direct blood away from the guts to the muscles. Wherever you looked, a fight for metabolic supremacy would be going on.” Inability to digest food due to this battle results in incompletely broken-down food molecules that are absorbed through a leaky gut and produce food allergy reactions in the body.

Kendrick continues, “Perhaps the most important battle would be for control of blood-sugar levels, a battle ending up with ‘spikes’ of blood sugar as insulin tried, and most likely failed, to overcome the effects of the stress hormones surging about in the bloodstream. In short, I thought that eating under stress was likely to be pretty damned unhealthy. Equally, taking time over meals, and relaxing while doing so, was likely to be pretty damned healthy.”

Kendrick says lots of stress that produces lots of cortisol explains all aspects of the Metabolic Syndrome – high BP, insulin resistance, diabetes, obesity, and elevated lipids. He could also include YOS! Like most allopathic doctors, he’s content with pointing the finger and giving the evidence in the form of abnormal blood levels of hormones. However, our genius body would not have an HPA system that was destined to crash. So what’s the reason for it crashing? I say it’s crashing mostly because of magnesium and mineral deficiency that modern medicine completely ignores and Kendrick also ignores.
We most often hear about the cortisol connection to abdominal obesity, but elevated cortisol also:

- Triggers the liver to release its stores of glucose (from glycogen).
- Stimulates the metabolism of triglyceride stores in adipose tissue, leading to an increase in free fatty acids (FFAs) in the blood.
- Triglyceride metabolism also releases glycerol, which travels directly to the liver, where it is converted to glucose.
- Activates breakdown of muscle protein into amino acids (the amino acids then travel to the liver, where they are converted into glucose).
- Acts as a direct antagonist to the actions of insulin at most sites in the body.
- Stimulates subcutaneous adipose tissue to release fat, thus making it shrink in size.

Stimulates visceral fat to do the exact opposite, i.e. absorb and store fats, leading to an increase in visceral fat mass.

- Consequently: Raised VLDL level • Low HDL level • Raised LDL level • Raised blood pressure • Raised fibrinogen levels (clotting factor) • Raised PAI-1 level (clotting factor) • Raised Von Willibrand level (clotting factor) • Raised Lp(a) level (clotting factor); all lead to atherosclerotic plaque growth, and an increased risk of heart disease.

I love the fact that Dr. Kendrick uses science to debunk the cholesterol myth and I think it’s amazing that he concludes stress causes heart disease. In my Magnesium Miracle book, I mention stress and its relationship to magnesium deficiency almost 100 times. Unfortunately, Kendrick misses the fact that stress becomes toxic if and when you don’t have therapeutic levels of magnesium. Kendrick thinks he’s made a huge breakthrough by identifying a weakened HPA system as the basis of heart disease. Because of his limited view of the body and lack of knowledge of nutrient biochemistry, he is willing to believe that our genius body is stupid enough to create a faulty HPA system, but it’s our lack of magnesium that creates the problem in the first place.

Kendrick focuses on cortisol as a cause of heart disease more than adrenaline, but the elevated levels of adrenaline, which are also produced under stress, trigger tachycardia, arrhythmia, and anxiety. Adrenaline surges caused by stress are eliminated by therapeutic levels of magnesium.
Stress is a killer, but it doesn’t have to be; that’s why the above stress-releasing exercises are important along with magnesium and Yeast Detox. A healthy, balanced body requires daily replenishing with a fresh supply of energy. Magnesium can give you the physical energy packets and the mental energy as well. Add the above suggestions to help feed you physically, emotionally, and spiritually. You will have your own ideas about what you need. Use your intuition to expand the list we’ve started.

**HEALTH CARE PRACTITIONER**

Your doctor does not need to be experienced in treating yeast-related conditions. Most doctors don’t even know about YOS or magnesium deficiency. But it’s good to have a doctor for those times when you require testing or the occasional prescription. It’s important to find someone who is compassionate and caring, who listens to you, who is willing to trust your intuition, and with whom you can work as a team to determine what is right for you. Try taking this book and my magnesium book to an interested physician and forge a working relationship.

**Susan’s Story**

Susan, like many modern women, was juggling multiple roles – a wife, a mother of two, and working as a freelance writer. It was obvious when she first came to see me that Susan had little time for herself. She was a few minutes late for her appointment and dashed in looking frazzled and bedraggled. When we sat down together in my office, she was in a rush to tell her story.

I told Susan we had an hour-long appointment and to take a few deep breaths. I got the impression these were the first ones she had taken all day. Susan relaxed visibly and actually looked down at her mismatched sweater and blouse buttons out of sequence. She groaned and apologized for her disheveled state. She said that while working at home as a writer saved her hours of travel, sometimes she forgot there was a real world out there.

That, she said, was all going to change. Her goal with me was to lose the thirty extra pounds that she was carrying, and she was convinced that would change everything. Susan was overweight and pale, maybe from working indoors all day, but there was also
a pasty, puffy quality to her complexion. I could find no evidence of the rosy glow of life shining from her skin and no sparkle in her eyes. She looked defeated but still defiant. When she said it was all going to change, I could see she was determined, and I bonded with that spark in her and I made my own pact to support her as much as I was able.

From a very early age, I’ve had the ability to see and bond with the inner beauty of a person. On the hospital wards in medical school, one particularly bitter doctor gave me the strangest backhanded compliment when he said, “I bet you could find some nice to say about anybody,” when I gave a glowing report about our most curmudgeonly patient. When the inner beauty in a person is unveiled and acknowledged, they can accomplish anything.

As Susan’s story unfolded, one I was very familiar with, I was confident that she would go through the caterpillar/beast to butterfly/beauty transformation that I had seen in so many of my patients. She would become a completely new person as we worked together. I shared with Susan the metaphor and described how her voracious appetite much like the caterpillar's and all the weight and lethargy could be transformed into a beautiful butterfly. Her eyes gleamed with the possibility and I could feel the earth moving just a fraction.

The person before me now was talking about having low periods; she didn’t think she was depressed, but her doctor recommended antidepressants, which she refused. There it was again, that defiance, that determination to take responsibility for her health and not rely on medication. That stirring of possibility and determination is the most important ingredient in a recipe for change.

Susan may have avoided antidepressants, but medication was something she was all too familiar with, having taken antibiotics frequently for sinus infections in the past three years, the birth control pill for ten years, and cortisone inhalers periodically for allergic asthma. She said her weight problem really kicked in after her sinus infections began.

Susan listed off her other symptoms mechanically. She suffered frequent headaches and colds and had symptoms of irritable bowel syndrome and drop-dead fatigue by the end of the day. When I asked about vaginitis, she said she had that occasionally after intercourse, but she tossed off a slightly sarcastic comment about who
has the time or energy for that anyway. I didn’t push her to elaborate, but noted low libido on my chart.

Because I gave her time to talk, Susan warmed up and apologized for her attitude and said she wasn’t always this cynical. She used to be an extremely outgoing person but had become antisocial and almost a recluse. She could no longer eat out with friends because she was afraid of eating something that would make her sick, and she just didn’t want to just sit there and complain about how bad she felt.

I did a complete work up on Susan. Her physical exam did not turn up anything untoward. She was thirty-five pounds over an optimal weight for her height, but apart from a pasty complexion, overall puffiness, and fluid retention, there were few outward signs of all her inner distress. A vaginal swab was sent off to the lab marked specifically to culture for yeast, and along with routine blood work, I sent blood and saliva to a special lab to test for yeast, abnormal bacteria, and food allergies.

Susan lost ten pounds in the first two weeks and the other twenty-five over the following three months. As an added bonus, because we focused on treating not just her weight but also the reason for it – yeast and all its spinoffs – her sinus infections, headaches, and bowel symptoms all went away. Susan found the beautiful, vibrant person that had always been lurking in the background, chained down by yeast.

The balance point with you and your yeast is so individualized that it’s impossible to make a specific recommendation. That point is achieved when your Candida Questionnaire scores are low and you are feeling well. However, you still must be vigilant to the possibility that yeast can be part of your life again. You still must be vigilant about avoiding non-foods like sugar and processed foods that give your body no nourishment.

The balance point is the realization that your body wants to stay healthy and will do so if you keep giving it the right building blocks with proper diet, exercise, and attitude.
SECTION THREE: TREATING CHILDREN, WOMEN, AND MEN

CHAPTER 8: CHILDREN WITH YEAST

Perhaps doctors and parents assume that it’s normal for an infant to have thrush and diaper rash. But if you know about YOS, then you realize thrush and diaper rash can herald a lifetime of yeast.

BORN WITH YEAST

One day, in my general practice, a mother brought in her eight-month old baby boy, Andrew. In his short lifespan, he had already been on ten courses of antibiotics! It began within a few days of birth when the hospital pediatrician saw redness and swelling in his ear, which explained his constant crying. Liquid antibiotics were given for a week and things seemed to settle down, but then during the next week, symptoms returned. The doctor was consulted and saw the redness and ear discharge and ordered more antibiotics. This happened month after month.

Early on, the boy’s mother, Sara, a nurse, recognized a yeasty smell from the discharge. But when she told the doctors, they didn’t seem to listen, and just kept treating him for a bacterial ear infection. Finally, his mother came to my office because she heard that I specialized in yeast. It turned out that she had a yeast infection when she gave birth to her son in a normal vaginal delivery. When I examined her son, he smelled yeasty and had a white coated tongue and a chronic diaper rash. He was pale, weak, and underweight for his age. His mother and I agreed that he probably became infected with yeast during delivery, but that he was already in a weakened state, having been bathed in yeast toxins for 9 months in the womb.

Many adults suffering with YOS can trace the origins back to childhood. Keeping children free of YOS is the purpose of this chapter. I believe that by addressing YOS first and ideally through prevention, you can stop your child from having Candida-associated symptoms in adulthood.
Childhood Symptoms Associated with YOS

- Thrush
- Persistent diaper rash
- Irritability
- Colic
- ADD/ADHD
- Cravings for sweets
- Hives, rashes, eczema
- Ear infections, itching

- A chronic cough
- Heartburn or reflux
- Several courses of antibiotics
- If you had chronic yeast infections or YOS symptoms the year before you became pregnant or during your pregnancy.

Let’s take a more detailed look at how children can develop YOS with the following list made specifically for children. You saw an extended version of this list in Chapter 1 with 35 steps in the downward spiral, but I think it’s crucial to understand how insidiously yeast develops in our children and how we need to guard against it.

- Diaper rash caused by yeast is treated with cortisone creams, which encourage further growth of the yeast.
- Ear infections whether viral, bacterial, or fungal are treated with antibiotics.
- Colds, flus, coughs, and pneumonia are all treated with antibiotics.
- Infections may become chronic and require multiple courses of antibiotics, leading to colic and irritable bowel symptoms (gas, bloating, constipation, and/or diarrhea), leaky gut and absorption of incompletely digested food molecules and yeast toxins, leading to widespread allergic and toxic reactions.
- Anesthetics used in surgery to place tubes in the ears add another toxin to a further weakening immune system.
- Allergies develop with an inability to digest milk due to an irritated and inflamed bowel (leaky gut), which leads to frequent changes of formula and further irritation.
- Gas and bloating can result from hard-to-digest soy formula.
- Eczema, aggravated by food sensitivity and yeast toxins, is suppressed with cortisone creams, which can promote yeast growth.
- More allergies to foods develop, especially yeast, wheat, and dairy, arising from incompletely digested food molecules being absorbed through a leaky gut.
- Asthma, developing from yeast toxins and nutrient deficiencies (such as magnesium) is treated with medications including cortisone inhalers, which can promote yeast growth.
- Multiple colds and flu continue to be treated with many courses of antibiotics and annual flu vaccines (containing mercury preservative).
- Cravings for sweets can be caused by YOS and may cause or aggravate hyperactive behavior in children.
- Dental cavities lead to multiple mercury amalgam fillings. About 50% of dentists still use mercury fillings, although more are moving to composite fillings for children. Toxic mercury vapor may be inhaled, absorbed, or disrupt enzymes in the brain, kidneys, and liver.
- Allergic reactions are treated with allergy shots, antihistamines, and cortisone sprays, which promote further yeast growth.
- Many adolescents take long-term oral antibiotics for acne. Chronic acne is often a reaction to sugar, wheat, and dairy.
- Many teens and young adults develop mononucleosis, and up to 20 percent never feel quite as healthy again.
- Girls may have vaginal yeast infections and discharge from a very young age, accompanied by severe itching and irritation. Due to embarrassment, they often don’t tell anyone their symptoms. When they begin their menstrual cycles the increased estrogen causes more YOS and more vaginitis.
- Burning pain on urination may be due to yeast infection but is often treated as a bladder infection with antibiotics, which cause more YOS.
- Yeast toxins can throw menstrual cycles off balance by blocking hormonal receptor sites. The standard treatment is to put these young girls on birth control pills which is not only a contributor to infertility but causes more YOS and vaginitis.
THE S.A.D. CHILDREN’S DIET
According to the Center for Disease Control in the United States, 17 percent of children and adolescents are obese; triple the number of a generation ago. That’s because they are eating S.A.D., the Standard American Diet. If they continue eating that way, they join the 70 percent of the adult population who are overweight and obese.

In simple terms, children are becoming obese by eating a diet that supports YOS. Many parents tell me that they feel guilty depriving their child of sugar and sweets. There is also the sad fact that parents are under tremendous pressure to support their family and don’t have time to either make food from scratch or “police” what their children eat. But when I draw the association between sugar and yeast and the symptoms that children can suffer, most parents understand the gravity of the situation. Kids understand it too, because they are feeling crummy and want to feel better, which they will do within a few short weeks of starting a yeast-free program.

Julie’s Story
I had a telephone consultation several years ago with Jennifer about the declining health of her two sons. Jennifer wrote a book about her experience with changing her children’s diet, but I no longer see the book on Amazon. So, I’ll give you her story and helpful diet suggestions.

In the spring of 2006, my youngest son, Brian, was eight months old and was diagnosed with RSV (respiratory syncytial virus). The week before, Chris, my older son, who was then 2 ½, had been sick. I’m fairly certain he also had RSV, though he was never officially diagnosed.

In a nutshell, RSV is a very strong respiratory virus. Before the doctor confirmed that my son had RSV, he prescribed antibiotics and we started using them. When he got the results, he called me and told me that there was no need to continue the antibiotics because they would not help with the RSV.
Over the next two and a half years, both boys had recurrent bouts of both bronchiolitis and walking pneumonia. They were given Zithromax (an antibiotic) and Albuterol breathing treatments over and over. Whenever they got any kind of sickness, flu, croup, a cold, whatever, it went straight to their lungs and turned into either bronchiolitis or pneumonia and would get worse and worse. It seemed as though they never got over anything on their own without drugs.

In January of 2008, they got sick one week after they started back to school. I decided to take them out of school/daycare so they could have some time where they weren’t sick. This entailed hiring a full-time nanny. Being at home seemed to help some; however, they still got sick, just not quite as often.

But I knew taking them out of school wasn’t a permanent solution. I felt like we were hermits and I hated that they couldn’t be with their friends and go places freely and without worry of getting sick. They did not return to school until August that year. And again, they got sick only one week after school started. I was devastated. I thought for sure the break would have helped them be stronger.

In October, after they had again been on antibiotics two more times in three months, I took them to the doctor because they were once again sick and it was in their lungs and bronchial tubes. He told me that he wanted to put them on steroids for the entire winter. I broke down in tears. I could not imagine putting my three- and five-year-old boys on steroids. It felt so wrong.

He gave me the prescription and I filled it and started giving it to them. But I felt horrible. I knew somewhere deep down that it was not the answer, and after about three days, I refused to give it to them anymore. I said to myself, “There must be a better way.”

The next morning I called a naturopathic doctor who is also an M.D. Her name is Dr. Carolyn Dean, MD, ND. After a two-hour consultation with her about my
children and myself she said, “They pretty much no longer have their own immune system. About 60-70% of your immune system is in your gut. If you take antibiotics over and over, your body cannot replenish the good flora that is in your gut and you will have yeast overgrowth. This yeast overgrowth keeps your body from being able to fight off colds, diseases, whatever. The fact that they had RSV means that whatever is fighting against their little bodies goes to the weakest spot, which is their lungs or bronchial tubes, and settles there.”

It was like I was waking from a long dark sleep. There was an actual reason for all of this! However, as she was talking, I got very scared. I was hoping there was a way to fix the problem but thought maybe I’d really hurt my kids for the long term by doing what their doctor had suggested for those three years.

And then she said, “It won’t be easy, but it is fixable. The first thing you have to do is to change your diet. You have to get rid of the yeast so that your kids immune systems will begin to replenish and they will be able to fight off whatever they come across.”

I let out a sigh of relief. Change our diet? That would be easy, compared to the lack of sleep from late night breathing treatments and the time and money we’d spent on doctor visits and medicine over the last three years.

Then she said, “You will need to go on an anti-candida diet. That means you are going to starve the yeast. Yeast eats sugar, wheat, and dairy.” And my thoughts came to a screeching halt. How in the world would we eat? What would we eat? Were there enough foods that had none of those things in it to get meals on the table for kids?

She said, “I’ll send you a list of foods you can eat and foods to avoid. In addition, I think it would be best for you to avoid gluten. That means that you should only eat certain grains. I’ll include them on the list.”
I thanked her and said, “You know my youngest, who is three, almost only eats wheat and dairy. He will eat macaroni and cheese, pizza, quesadillas, and grilled cheese sandwiches all the time. It’s hard for me to get him to eat much of anything else. And my older son eats tons of fruit. This is not going to be easy.”

She said, “Unfortunately those are both accurate signs of them having yeast overgrowth. The yeast is literally controlling their appetites. It is starving for those things and makes your kids crave them. The fruit is not good, it is full of sugar, the body doesn’t recognize sugar in fruit any different than white sugar as far as yeast is concerned.”

I was starting to get a little worried that I wasn’t going to be able to feed my kids. She sent me the list and I scanned down it. As I did, I realized there wasn’t much on it that we ate very often. I’d thought we ate pretty well; we hardly ever ate candy, always used whole wheat bread, ate lots of fruits, some veggies, and had a variety of foods. And none of us was over weight. But this list was not at all the majority of our food. And, as I scanned through the ‘not so good list’, I realized we ate a LOT of sugar, wheat, and dairy.

There were meats listed, but it said that they could not be cured. That meant no bacon, and no lunchmeat or hot dogs. Oh boy. There were grains and vegetables I’d never heard of. I was more than a little worried I couldn’t pull the diet off. However, the alternative didn’t feel right either. There was no way I was going to put the boys on steroids without even trying to make this alternate solution work.

While I was pushing my shopping cart down the aisle of the grocery store, the reality of the change hit hard. I could only figure out meat and vegetables. It seemed like EVERY food that was packaged had sugar wheat and dairy in it. So, for the next two weeks, my kids cried and screamed at the table when it came time for meals, and I felt like I was starving them.
During that time, I made a commitment to my family to make this diet work. When I did, I knew I was going to have to learn a lot about food and what was in most prepared products. I spent hours, weeks, and months reading labels, going to health food stores and putting together these recipes. My greatest joy is that the boys will now willingly eat and actually ask for many of these truly nutritious meals.

The first three months, we followed the diet 100% of the time. I think that it was important to flush the yeast out of our systems as much as possible in the beginning. We even took our own food to birthday parties and hardly ever ate out in restaurants. The results were quick and strong; the boys did not get sick anymore, not one time. In addition, after five days, I started sleeping through the night. I hadn’t done that in over five years. I also lost about 8 or 10 pounds and we all became more regular, which was a relief because my older son had had an extreme case of constipation with a 103 degree fever where he went to the emergency room twice the month before we started the diet.

After those first three months, I started to add in a few of the things that were borderline, such as peeled granny smith apples, blueberries, and grapefruit. Dr. Dean had told me these fruits had the least amount of sugar in them and would have the lowest effect of yeast growth. I also started adding in a very small amount of corn products, though I was careful to only buy things that were organic and non-GMO, as so much of the corn produced in the U.S. is genetically modified.

After six months or so, we started eating out some and even going off the diet completely for a meal or two each week. But for the most part when we did that we would still be selective about our choices. We would order whole-wheat buns on our hamburgers, whole-wheat crust on our pizzas, and ask for less cheese. At
this point I really began to feel that I could make knowledgeable choices about food and keep the kids healthy.

In the three years since we started this diet, both boys have been healthier than they ever were in their lives. Each has only been on antibiotics one time; each has missed only one day of school (and they go year round). And even though they do get colds and other sicknesses, they fight them off, and the symptoms seem to be milder than what other kids are experiencing. Finally, they very rarely get sick. So it was all worth it. Now, the diet is just a habit. It is not any more difficult than the way we were eating before. So thank you, Carolyn, for changing our lives permanently.

When I tell people about our experience they quite often ask me why we still eat the food on the diet when we don’t get sick anymore. My response is, “Why not? It’s a healthy way to live.” However, we do not eat exactly this diet 100% of the time anymore. We probably follow it 80% of the time, except when we are sick, and then we make sure to avoid sugar, wheat, and dairy completely. It works for us.

I’ve included Julie’s menu list that she created for her kids in Chapter 11. It will give you lots of great ideas.

**Conditions Associated with YOS**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asthma</td>
<td>Constipation</td>
</tr>
<tr>
<td>Bronchiolitis</td>
<td>Croup</td>
</tr>
<tr>
<td>Bronchitis</td>
<td>Diarrhea</td>
</tr>
<tr>
<td>Chronic antibiotic use</td>
<td>Eczema</td>
</tr>
<tr>
<td>Chronic colds</td>
<td>Fatigue</td>
</tr>
<tr>
<td>Chronic coughs</td>
<td>Irritability</td>
</tr>
<tr>
<td>Chronic ear infections</td>
<td>Pneumonia</td>
</tr>
<tr>
<td>Chronic flus</td>
<td>Tonsillitis</td>
</tr>
</tbody>
</table>

Carolyn Dean MD ND
Most doctors prescribe antibiotics for children’s throat, lung, and ear infections, even though they know 90% of such infections are viral. I was shocked when Julie told me her pediatrician was going to put her children on corticosteroids all winter to try and avoid their recurrent lung infections. Prolonged steroids would only have increased their YOS that they had already developed from several courses of antibiotics these children had taken in the past year.

Unfortunately, medical school doesn’t teach doctors about natural therapies for common illnesses that children suffer. Instead, they are loaded up with antibiotics that add to their YOS problems. To that end, I refer you to my books *Future Health Now Encyclopedia* and *Remedies for Children’s Common Ailments* so you can have alternative at your fingertips.

**Why Kids Get Yeast**

Unfortunately, if you have a vaginal yeast infection when you give birth, your newborn can acquire that infection. If you have YOS during pregnancy (see the chapter on women) and eat a diet that supports the growth of yeast, then your child is also consuming that diet through the womb.

The treatment I recommended for Andrew earlier in this chapter included his mother, Sara, as well. She was breast-feeding and yeast and yeast toxins from her skin were getting into his mouth with every feeding. Even if a child is not breastfeeding, I always treat the mother, just because of skin-to-skin transmission of yeast in susceptible children. I treat the father too, if we can cajole him into giving up yeast-feeding foods and drinks! It does help when the whole household goes on the yeast-free diet.

The treatment for children who are no longer breastfeeding is the *Yeast ReSet Diet* and *Prescript Assist Probiotics*. Teenagers can usually do the complete *Yeast ReSet Protocol*.

**FINE-TUNING SPECIFIC YEAST SYMPTOMS**

**Oral thrush**
Many children are born with thrush and it shows up as a white coating on the tongue and back of the throat. A child may have difficulty swallowing and be fussy and irritable. The medical treatments consist of painting the child’s mouth with Gentian Violet or using an antifungal prescription called Nystatin emulsion. The Gentian Violet turns the mouth purple and the Nystatin is in a sugar base, which only serves to feed yeast. Therefore, I recommend using Prescript Assist Probiotics. Open a capsule and put the contents onto a clean dish. Dip a clean finger in the powder and put your finger in the infant’s mouth. Do that several times so that the mucus membranes of the mouth are coated with the probiotics. A nursing mother can dampen her nipples, open a capsule of Prescript Assist, and apply the probiotics before a feeding.

**Thrush Tips**

- For infants: clean pacifiers, bottle nipples, etc., with an anti-fungal natural soap like grapefruit seed extract.
- A child with thrush who is breastfeeding can pass yeast back to her mother’s breasts, causing mastitis. See Chapter 9 for the treatment of mastitis.

**Diaper Rash**

Yeast thrives in damp, clammy areas, and if diaper rash is present, the sensitive skin is prone to the invasion of yeast. Cortisone creams make yeast worse and thin the skin, causing stretch marks.

- Never leave a wet diaper on your baby.
- Let your baby “air dry” as much as possible.

**Your Child’s Behavior and Yeast**

What if your child’s behavior and attention problems are linked to YOS? There is an undeniable connection between YOS and adult feelings of lethargy, depression, foggy thinking, and lack of concentration. A child can be whiny, irritable, cranky, and easily distracted. A child at school experiencing these symptoms will be labeled learning disabled, ADD, ADHD, hyperactive, inattentive, and even autistic.
Some physicians who work with autistic children have made a connection between symptoms and behaviors associated with autism and how they correspond to symptoms associated with YOS. When I was in medical school, I don’t even remember being taught about autism. Now the CDC says 1 in 88 children suffer from this condition, and more and more parents are concerned about it and how to prevent or treat it naturally.

Children can be very sensitive to YOS and the resulting toxicity associated with yeast, a child’s immune system could be compromised. Symptoms like mental fogginess, inability to focus, hyperactivity, aggression, and digestive problems are associated with YOS as well as with ADHD and autism.

A first step in helping your ADHD or autistic child is to remove sugar and yeast-feeding foods from his or her diet.

**Here’s Janice’s story.**

When I started a treatment plan for a bad case of yeast, I refused to create different menus for me and for my kids and so we ate the same things. I didn’t tell them what I was serving and there were very few complaints. Everybody ate the same lunches and I chose the gluten-free path. It didn’t take long to get into the new routine, and it wasn’t long before I felt better, but I was surprised when I noticed differences in my kids.

Kevin, who’s 11, was starting to have a hard time in school, and the last school report stated a concern that he was not paying attention and he was not grasping math. My daughter, Brit, was 13 at the time and acting like a “typical teenager”: irritating, irritated, and irritable. She bickered constantly with her brother and often slumped into moody bouts and occasional crying jags.

Within a week of the yeast-free, gluten-free, and sugar-free diet, they stopped bickering. Brit’s mood swings calmed and Kevin didn’t complain that he couldn’t get his math homework done. It’s no coincidence that both kids became calmer and happier. I know it can be difficult to maintain a gluten- and sugar-free diet forever, but I’m going to do the Experiment soon and add some foods back into their diet and see how they do.

**Don’t Mix Antibiotics and Sugary Treats**
When I had my tonsils out at age 6, the treatment was antibiotics to combat the possibility of infection along with cold and soothing bowls of ice cream. At 10 years old, I had strep throat and another big dose of antibiotics washed down with glass after glass of sugar-sweetened ginger ale. Probiotics, even yogurt, were nowhere to be seen, and there launched my own relationship with YOS. I had countless earaches, ear infections, and a perforated eardrum, as well as the requisite antibiotics.

**Know Your Antibiotics**
Not all ailments are infections and therefore do not need, and may be aggravated by, antibiotic treatment or drug treatment. The following are common sense ways to keep your baby healthy without drugs, taken from my *Future Health Now Encyclopedia*. I’ve given my whole list – only leaving out the treatment of head lice!

**Infant Tips**
- Most babies thrive on demand feeding, not scheduled feeding.
- Feed your baby in a more vertical than horizontal position. This keeps milk from being sucked into the Eustachian tubes and prevents ear infections.
- For cracked nipples, apply vitamin E oil (mixed tocopherols and tocotrienols) from capsules: if your baby gets some during a feeding it is beneficial, unlike most other creams or ointments.
- Proper nipple positioning in the baby’s mouth helps prevent cracked nipples. Call your local La Leche League for valuable assistance with breast-feeding.
- Babies swallow air when feeding and need to be burped.
- Turn babies frequently as they lie in their crib; they can’t turn over themselves.
- The best position to prevent sudden infant death syndrome (SIDS) is on the back.
- Cavities can be caused by giving bottles of natural juices at bedtime. The extremely high fruit sugar content drills holes in the teeth. It can also feed yeast. Never use anything but water in a bottle being used as a soother.
- Constipation occurs when switching from breast to bottle or when introducing solids. The formula may be too high in solutes and may need to be diluted, or it may be a reaction to processed dairy or gluten. Try avoiding these foods for two
to three weeks to see if it makes a difference. Increase water feeding. Stress and tension in or between the parents can translate into tension in the child, which can manifest as constipation. Magnesium deficiency can be a cause of constipation and small amounts of magnesium can be safely given to children. The dosage is 6mg per pound of body weight. A 50-pound child could take 300 mg daily in divided doses. Magnesium citrate powder can be mixed in dilute juice or comes in various flavors.

- For colic in breast-fed babies, especially if your baby burped or hiccupped in the womb, watch what you eat. Your baby may be reacting to something in your diet. Cut out strong-tasting foods first, then eliminate dairy and gluten.
  - To treat colic in gentle, usually happy babies who need to be held, rocked, and moved all the time, try homeopathic Pulsatilla.
  - To treat colic in whiny, irritated, and irritating babies who seem as frustrated as you feel, try Chamomilla.
  - **Dosage:** Use the 6X or 12X potency, one dose melted in 1 teaspoon of water several times a day.

- Diarrhea is defined as more than four very loose, odorous, runny stools a day. Stop milk and dairy products and use water feedings for twenty-four hours. Make sure enough water is given to prevent dehydration. Then try normal feeding. If your baby is already drinking juices, use 2 ounces of apple juice with 1/4 teaspoon carob powder and 2 ounces of water.

- For diaper rash, leave the diaper off for extended periods; vitamin E ointment or zinc ointment are healing and soothing. Talc or cornstarch are not necessary and can cause allergic reactions. Avoid talc entirely because of its aluminum content. Some diaper rash may be due to an overgrowth of Candida or yeast. On passing through the birth canal, your baby can get a mouthful of yeast, which begins to overgrow in the intestines. If your baby has also had antibiotics early in life, this causes *YOS*. The treatment for *YOS* in babies includes treating the breastfeeding mother for yeast and giving the baby a probiotic powder designed for infants. Natural antifungals, such as very dilute garlic oil, wild oregano oil, or tea tree oil,
Fever in an infant can be quite frightening.

- **NOTE**: At 103°F and higher, consult your doctor immediately. A baby’s temperature can rise very rapidly. It is important to have therapies at hand to treat the fever. However, if nothing helps immediately, go to a doctor or the emergency room for a diagnosis because of threat of seizure. Fever is usually due to a viral infection, but it can be due to a bacterial ear infection, pneumonia, or meningitis. A viral infection will run its course, but the others will need an antibiotic. A sign of meningitis or encephalitis is pain on touching the chin to the neck – but that can also occur if there are severely swollen neck lymph nodes. Dehydration can set in quite rapidly with infants. Be sure that your baby is producing urine. If not, dehydration has occurred and this alone can drive up the temperature.

- To reduce a mild fever of 99° to 102.5°F, do the following:
  - Yarrow: Use dilute herb tea or in a bath. A lukewarm bath itself will help reduce the fever and aid hydration.
  - Belladonna: 12X, one dose every fifteen minutes.
  - Aconite: 12X, one dose every fifteen minutes.

- Ensure that your child is not constipated. A gentle enema or suppository may be necessary. You may want to consult your pediatrician before attempting this measure.

- Identify teething as a cause of fever.

- There are warnings about giving aspirin or Tylenol (acetaminophen) to babies with a fever. This should be done only under a doctor’s supervision.
  - Don’t use aspirin for babies; they can be allergic and aspirin is linked to Reye’s syndrome.
  - Don’t use alcohol baths – the fumes can be toxic to a baby’s brain.
  - Don’t panic.
• Spitting up is quite common in babies; it is not vomiting. It can be from eating too fast, if you are stressed while feeding the child, or from food intolerance. Projectile vomiting is exactly as it sounds and it’s serious; it should be investigated because it can mean a blockage in the baby’s upper gastrointestinal tract.

• Teething accompanied by fussiness, drooling, and even slight fevers: For irritability and crying, use Chamomilla 12X, one dose three times a day. For hot, sore gums, rub the powder from a crushed calcium tablet on the gums. For late teething, use homeopathic Calc. carb. 12X, one dose three times a day. The herbs marshmallow root and licorice root in the form of thick sticks can be chewed on and will soothe the gums as well as help the teeth break through. Be aware that the plastic used in children’s toys and teething rings may contain harmful xenoestrogens.
CHAPTER 9: WOMEN WITH YEAST

Women suffer more YOS and suffer more from YOS than men. For one thing, we have more mucus membrane surfaces than men, and it’s on this membrane that yeast organisms find a happy home. Then there is the fact that women simply go to the doctor more often than men. We go with menstrual problems, for the birth control pill, during pregnancy, and then for perimenopause and menopause symptoms. Any time you see a doctor and describe a physical complaint, chances are you will end up with a prescription.

Realize that if you are in the doctor’s office for a well-baby check up and your doctor simply asks how you are, he can bill your insurance for even the shortest interaction. Women seek help for health conditions from their doctor, whereas men have a tendency to ignore physical symptoms or self medicate with alcohol. Denial may be actually saving them from greater problems!

Here’s another reason. Women develop urinary tract infections (UTIs) way more often than men (about 40-50 times more) because women’s urethras are so close to the anus, not at the end of a penis. UTIs are always treated with antibiotics. When women take antibiotics, they can develop yeast vaginitis that may be misdiagnosed and treated with more antibiotics. Then there are the common cold and flu, which are often mistreated with unnecessary drugs.

The female hormones, estrogen and progesterone, are said to be the main reason why men and women differ in many respects. But YOS is also related to progesterone, which is elevated in the second half of the menstrual cycle. Progesterone increases the amount of glycogen (a starch, easily converted to sugar) in the vaginal tissues, which provides an ideal growth medium for yeast. Progesterone levels also become elevated during pregnancy. It’s not just progesterone that encourages yeast overgrowth; estrogen, estrogen in the BCP, and estrogen in hormone replacement therapy are also pro-yeast.

Vaginitis

If you have chronic yeast vaginitis, the Yeast ReSet Protocol should be followed as well as local treatment, which I will outline below.
The vagina is protected by a moist mucus membrane and produces a normal discharge that shifts and changes through the month. This vaginal discharge is so unique that it can be analyzed day-by-day to determine fertility and for birth control. Abnormalities in the discharge are usually due to an infection, which can interfere your ability to determine if you are in a fertile or non-fertile phase of your cycle.

The three main kinds of vaginitis are candidiasis, bacterial vaginosis, and trichomoniasis. You can have a combination of vaginal infections at any one time. Infectious vaginitis accounts for 90% of all cases in reproductive age women.

Vaginal yeast infection usually causes a watery, white, cottage cheese-like discharge. The discharge is irritating to the vagina and the surrounding skin, with an acidic pH 4.0-4.5. When most people hear about yeast infections they think of vaginitis, not the intestinal YOS that I’m talking about in ReSet The Yeast Connection.

Alicia’s Story
For several years, Alicia has been treating her own yeast infections with over-the-counter creams and pills, which she buys in bulk in anticipation of her next bout. Because there are so many commercials selling these medications, Alicia thought she had a common, annoying problem like most women. While it is true that 80 percent of women have yeast vaginitis at some point, Alicia never considers that it could be anything more. Other than what she’s read on her box of vaginal cream, she knows nothing about yeast infections.

Alicia is a busy mom and entrepreneur, and while she makes sure her kids have healthy foods and snacks, she tends to grab a sandwich and frothy, sugary coffee drinks on the go. When a doctor on television suggested snacks of dried fruit and nuts, she began to keep a stash in her purse, dipping into it quite often to give herself a boost and a treat. She never realized that the moldy nuts and concentrated sugars of the dried fruit were actually feeding her yeast problem.

It wasn’t until she was shopping with a girlfriend and stocking up on vaginal cream that was on sale that her friend pointed out that she really shouldn’t be getting that many yeast infections. Alicia said, “I go through this stuff like face cream.” Alicia wasn’t fond of talking about such private matters but her friend sent her to the Candida...
Questionnaire (which you can find at the end of Chapter 4) and Alicia’s score was off the charts for severe YOS symptoms.

Because she believed her yeast infections were “normal”, Alicia never thought they might be connected to her chronic sinus congestion, allergies, gas, bloating, and skin rashes. She was stunned when she remembered that both her kids had bouts of thrush (yeast in the mouth) and diaper rash and were sensitive to foods like wheat and constantly battled her for sugary snacks. (See Chapter 8 for information on treating yeast and fungus in children.)

By the end of her research, Alicia was convinced that the whole family had a problem. She started by eliminating sugar and wheat from her family’s diet and felt her sinuses clearing for the first time in years. After three weeks on the Yeast Balance Program, she noticed that her chronic vaginal and anal itch es were subsiding. She recognized that she always had some kind of yeast infection, even though she only treated it with the creams when it really got bad. Her kids stopped bugging her for sweets and her own cravings diminished. Even her partner felt better when his jock itch cleared up. Alicia realized that she was passing her yeast problem to her husband. (See Chapter 10 for information on treating yeast and fungus in men.)

The point is that most women who have yeast infections have no idea that they are walking around with chronic YOS. A vaginal yeast infection is just an indicator that there is a yeast imbalance throughout your system and for you, it’s manifesting as a yeast infection. As you learned in Chapter 1, YOS shows up in many different ways.

Most women and doctors alike only think of yeast in terms of vaginal yeast infections and think they are “normal.” Some sources indicate that nearly 80 percent of women have had at least one yeast infection, and about half of those women have serious and recurring infections.

Even though yeast infections are common and some women have them frequently, they are not normal. In fact, the very existence of yeast infections is an indicator that your system is out of balance and that you have a strong likelihood of having a chronic YOS problem. So, if you’ve ever had the thought that you have chronic yeast infections, then you also have chronic YOS.
You may think that vaginal yeast infections are your only yeast-related symptom, so if you haven’t already done so, I urge you to fill out the Candida Questionnaire in Chapter 4. Imagine finally getting rid of your chronic yeast infections AND your seemingly unrelated conditions like IBS, rashes, irritability, and brain fog.

Vaginal yeast infections do not exist without an intestinal overgrowth of yeast. Period.

**Vaginitis First Aid**

Tight clothes, synthetic fibers, increased humidity, and acidity all encourage yeast. Spending the day at the pool or by the ocean in a wet bathing suit also provides a great environment for yeast. Feminine hygiene sprays, pads, and douches can alter the vaginal pH allowing yeast to overgrow.

**Is Yeast Vaginitis Contagious?**

Yes. Sexual partners can pass yeast back and forth, so it’s best for both partners to be treated if one is diagnosed with YOS.

**Vaginitis Symptoms and Signs**

- Vaginal discharge (white and smells yeasty)
- Burning and itching (scratching and rubbing makes symptoms worse)
- Painful sexual intercourse
- Painful and burning urination
- Inflamed and swollen perineum (the genitals and anus, even the public hairs feel sore and sensitive)
- Perineal skin rash caused by vaginal toxic discharge
- Aching pain of the lower pelvic area

**Vaginitis YOS**

It’s possible to have a case of yeast vaginitis without intestinal YOS. However, in my experience, most cases of chronic yeast vaginitis are accompanied by an overabundance of yeast in the intestines.
Typical Topical Treatments For Yeast Infection
Whole sections of your local pharmacy are devoted to products that treat vaginal yeast infections. While there are several different brands, the active antifungal ingredients are largely the same. Although those marketing the products claim that they cure or heal yeast infections, they in fact only provide temporary relief. The over-the-counter products in no way address the YOS in your intestines that is causing symptoms throughout your body and the actual trigger for vaginal yeast infection and discharge.

Another thing that makes medical antifungal creams less than acceptable is the non-medicinal ingredients they contain. One common cream contains 1% active ingredients. The other 99% includes Benzyl Alcohol, Cetearyl Alcohol, Cetyl Esters Wax, 2 Octyldodecanol, Polysorbate 60, Water (Purified), and Sorbitan Monostearate. When the vaginal tissue is already greatly red and inflamed with yeast, adding more potentially irritating chemicals may cause more problems. Knowing that this is the case, many vaginal creams contain hydrocortisone to reduce itching. However, cortisone helps grow yeast and prolonged use of this drug causes thinning (atrophy) of the tissues in the vagina.

Many of my patients report that their yeast infections returned quickly after they stopped using prescription creams or oral antifungals. This is because the underlying cause of the yeast infection was never addressed – YOS in the intestines.

A vaginal yeast infection is an outward and obvious, uncomfortable manifestation of a YOS problem, and as you’ve seen throughout this book, your yeast can only be brought into balance through appropriate diet, a yeast detox, probiotics, and natural antifungals.

Boric Acid Douche
When I was active as health advisor to YeastConnection.com, I wrote about boric acid douches. A mild solution of boric acid has been used as a home remedy for decades to treat vaginitis. I assure you that this same mild acid solution is so gentle it’s commonly used to treat eye irritations, eye infections, and sties. If it’s safe for your eyes, then it’s safe for your vagina. Boric acid has even been used in ointments and salves to treat
diaper rashes that are fungal in origin. If you Google “boric acid,” you may find references that say it is toxic. Yes, it can be in very strong doses, but you’ll be using a very mild solution.

The antifungal properties of boric acid have been well researched. Primary among the research supporting boric acid’s effectiveness is a Cornell University study of 100 women with chronic yeast vaginitis who had failed to respond to various over-the-counter or prescription anti-fungal medicines; 98% successfully treated their infections with boric acid suppositories over a period of 2-4 weeks. Now, that’s impressive!

The authors said the lack of effectiveness of conventional antifungal agents appears to be the main primary reasons for these recurring vaginal yeast infections. The authors concluded that boric acid is “clearly the treatment of choice.”

Generally, make sure you’ve cleansed all areas of your genitals carefully and dried them. Make up a douche using 1 teaspoon of boric acid powder (available at most drug stores) dissolved in a pint of warm water (you have to boil the water first for 15 minutes to make sure it is sterile). We all know douching can be a real messy nuisance, so the good news is that there’s an easier way.

Try a suppository, like Yeast Arrest, to deliver the right concentration of mild boric acid exactly where it’s needed without mess or hassle. Yeast Arrest is available in many online stores.

The suppositories melt at body temperature, coating the inside of the vagina, the outer area of the labia, and the hood of the clitoris, where yeast organisms tend to accumulate, killing the yeast easily and painlessly and relieving external itching.

Use a suppository or a douche once a day for a mild infection and twice a day for a more severe infection for at least a week, and keep using them at least two days more after symptoms have disappeared.

If recurrent vaginal yeast infections have been a problem, you can use a suppository vaginally at bedtime for one week, beginning one week before your period.

**Vaginal Health Tips**

- Avoid dyed and scented toilet paper. Some of these dyes and chemicals can cause vaginal irritation.
• Wear cotton underwear. Wash in very hot water. Some women boil or microwave their underwear to make sure no yeast survives!
• The best advice is the same as for babies: air dry your sensitive tissues as much as possible, which means wear loose cotton skirts and no underwear.

**Skin Fold Rashes**
Because yeast loves warm, damp areas, it will flourish in the folds of skin and the underside of breasts, as well as in the armpits and groin. It’s common in women who have *YOS* and are overweight. The rash will be red, itchy, painful, and weepy, and can have a yeasty odor. It can also have tiny red spots.

**Health Tips:**
• Instead of cornstarch as a dusting powder to keep the area dry, dust with clay. You can put clay powder in a squeeze bottle and spray it on your skin.
• Wear a cotton bra at all times so the underside of the breast doesn’t contact the skin of the chest wall.
• You can develop a rash in your cleavage. To avoid this, position a thin cotton handkerchief or layer of gauze between your breasts.

**Anita’s Story**
Each person has a unique relationship with yeast, and for some, a round of antibiotics without taking probiotics, accompanied by consumption of sugar, wheat, yeast, and dairy, is enough to launch *YOS*. When we were kids and had tonsillitis and antibiotics for the infection, I remember our “liquids” were ginger ale and milkshakes! What could possibly be worse? Often people find themselves in a vicious cycle of antibiotics and overeating, potentially setting the stage for chronic *YOS*.

That’s the simple version of *YOS*, but in my experience, adults who are suffering with the symptoms of chronic *YOS* have often had a complicated medical history, punctuated with rounds of antibiotics, overeating, and massive stress. The following story is a typical one and shows how different health challenges and treatments have served to
keep people in a state of YOS. I’m sharing this story along with my commentary about yeast.

Anita is in her early fifties and said that she feels like she was born with yeast. You might think that’s an odd thing to say, but in reality, many babies are pushed through a very yeasty vaginal canal. In checking with her mother as she was compiling her medical history, Anita confirmed that she’d been treated for thrush (yeast in the mouth) and had ear infections as an infant. Many babies do have ear infections, which are treated with antibiotics, when in fact, they and their mothers should be treated with the Yeast ReSet Protocol.

Like many children, Anita had her first dose of antibiotics before the age of one. Her mother told her that she had diaper rash quite often and was extremely uncomfortable. In my experience, diaper rash is also connected to YOS, and like many children, Anita’s diaper rash was treated with cortisone cream, which actually encourages more yeast growth. Cortisone basically feeds yeast.

Several ear infections and several rounds of antibiotics later, Anita’s intestinal balance was thrown off and she had difficulty digesting her meals, leading to sensitivity to wheat, yeast, and dairy. Eating a regular diet as a toddler resulted in gas and bloating, and although the term IBS didn’t exist when Anita was a child, she realized that she had the symptoms at a very early age (and still did when she consulted with me). A combination of diarrhea, constipation, gas and bloating and Anita was labeled a colicky, fussy child.

We now know that incomplete digestion of a meal (not enough chewing or drinking too much water with your meal) can become fodder for intestinal yeast and bacteria. Incompletely digested food as well as the 178 toxic chemical antigens can be absorbed through a leaky gut, causing allergic reactions and inflammation throughout the body.

NOTE: Proper chewing means there will be far fewer undigested food particles, which would otherwise become dinner for bacteria and yeast in your colon. Saliva also contains anti-bacterial and anti-fungal enzymes, so the more you chew, the more saliva you create.
Anita was prone to colds and flu, and every winter she had another dose of antibiotics; when she reached her teen years, she had terrible acne for which her doctor prescribed long-term antibiotics that went on for years.

Remember that nothing purposeful was done during this time to create balance in Anita’s intestinal flora. Antibiotics were systematically killing off any friendly bacteria that might have managed to spawn. Anita’s family had a typical diet in the 1970s and 1980s with meat, potatoes, and dessert, and she said that the cupboards and refrigerator were full of fresh-baked pies, ice cream, and soda, the ideal diet to support YOS.

Like many teenagers, Anita developed many cavities, and the treatment was a mouth full of mercury fillings. In my experience, and according to my research, toxic mercury vapor may be inhaled, absorbed, or disrupt enzymes in the brain, kidneys, and liver. This impacts YOS because mercury kills bacteria, just like an antibiotic, but somehow it leaves yeast alone!

Anita had more ear infections in her teens, continued to take antibiotics for her acne, and missed her high school prom because she had been diagnosed with mono. Despite mono not being a bacterial infection, but a virus, her doctor prescribed more antibiotics. Anita, like about twenty percent of my patients who had mono, said she had never felt well since that infection.

What followed were years of exhaustion, weight gain and bouts of depression as Anita developed a habit of emotional eating. She felt awful, and felt awful about herself. Trying to help, her family doctor prescribed antidepressants and anti-anxiety medications. She also started taking the birth control pill, which altered her hormonal balance. When the hormone balance is disrupted with excessive estrogens, the yeast feeds off estrogen and continues to thrive.

When Anita finally contacted me, she was 52 years old. Her periods had stopped at age 45 and she was in full-blown menopause. She suffered hot flashes, panic attacks, and vaginal dryness. She also had extreme sensitivity to many foods, chemicals, and household products. She moved into a new home only to find that the basement had many walls covered with black mold, hidden by paneling. This is like poison to any person, but for Anita, it was even more so, because the mold cross-reacted with her yeast.
This may sound extreme, but virtually every new patient I speak with has many similar elements in their medical history. It is likely that you do too – even if it is just a few of the issues noted above. Remember to fill out the detailed Candida Questionnaire at the end of Chapter 4.

To recap, YOS and imbalances are usually preceded by one or more cycles of antibiotics and accompanied by a diet that feeds yeast.
CHAPTER 10: MEN WITH YEAST

As I mentioned in Chapter 1, men, in general, appear to be less affected by yeast than women. That could be because estrogen causes yeast to flourish, and also because women seem to take more medications than men. Men tend to ignore physical symptoms, so they go the doctor less and therefore may take less medication. It may be denial that is saving them from greater problems in the short term; however, men certainly have their share of yeast.

The ABC’s of yeast in men are Antibiotics, Burping and Beer equal Candida. Men usually don’t see a doctor about their YOS symptoms, or if they do, they are routinely misdiagnosed.

Men can have the same history of antibiotics and yeast-loving diet that creates the ideal atmosphere for yeast to flourish as women. The term fungal infection and not yeast infection is used more often in males to describe jock itch and athlete’s foot, but the source of both is still overgrowth of yeast.

The most severe cases of YOS that I’ve seen in men tend to occur after months or years of antibiotics used for acne or after being treated for traveler’s diarrhea with antibiotics.

Trevor was one such case. He was a Peace Corps Volunteer in his early 20s and traveled to many third world countries. Diarrhea from contaminated water was common. So were the antibiotics in their first aid kits to be taken for such symptoms. After two years and several bouts of diarrhea, Trevor had chronic bowel symptoms. At first he was diagnosed with IBS, but as his symptoms expanded to food allergies, chronic fatigue, and joint pains, he consulted me to find out what was really going on.

The Candida Questionnaire allowed him to enumerate his multiple symptoms and put him in the moderate to severe category of YOS. Fortunately for Trevor, following the Yeast ReSet Protocol put him back on an even keel and brought back his health.

I’ve seen very similar cases of young men who were on years of tetracycline for acne who developed IBS, leaky gut, and body-wide symptoms of yeast toxins and YOS. One major symptom that older men experience after being exposed to antibiotics is prostatitis. Prostate care is very important and I’ll address it immediately below.
Bruce’s Story
Bruce’s health was complicated by side effects to medications he took because his doctors didn’t know he had YOS and treated him for anxiety and inflammation with drugs that just made him worse.

Another complication was being exposed to mold in his home for almost two years before I read him the riot act and made him test for mold and then move out of his house. Simply going into the house for 5 minutes would bring on an attack of wheezing and irritate his eyes.

If you live in a damp or humid basement and you can smell a musty, moldy odor, you are inhaling mold spores that your body has to fight. If your basement floods or you have leaky pipes anywhere in your home, you could be exposed to mold. Since mold is closely related to yeast, it will aggravate an existing yeast condition.

I’ve covered many of these YOS symptoms at the beginning of Chapter 4, but men deserve to have their own list.

1. Jock itch
2. Itchy scrotum or groin
3. Swollen scrotum
4. Itchy feet or toes
5. Itchy ears or scalp
6. Dry, itchy, flaky skin
7. Itchy feet or athlete’s feet
8. Loss of sex drive
9. Impotence
10. Prostatitis
11. Cravings for sweet foods or drinks
12. Craving beer
13. Penile infection (burning, irritation, white discharge, red rash)
14. Difficulty urinating
15. Urinary frequency or urgency
16. Painful intercourse
17. Sexual dysfunction
18. Swollen scrotum
19. Constipation
20. Bad breath
21. Bloating
22. Indigestion
23. Frequent intestinal gas
24. Frequent diarrhea, very loose stools
25. Irritability or mood swings
26. Fatigue or lack of energy
27. Memory loss
**Yeast ReSet for Men**

Men will follow the same Yeast ReSet Protocol as women, which is outlined in Chapter 6. When following your progress with the Candida Questionnaire, note that there is an adjustment on the Candida Questionnaire scores for men. More of the questions are geared towards women, so they have a greater chance of scoring higher. Therefore the mild, moderate, and severe scores for men are:

- Mild – 140
- Moderate – 90
- Severe – 40

**SPECIFIC YEAST SYMPTOMS IN MEN**

The above list covers the common YOS symptoms in men. If you have any of these symptoms, treating YOS should be your first approach. Below, I’ll go into more details for a few conditions.

**Prostatitis and Yeast**

The first line of treatment for prostatitis is the Yeast ReSet Protocol, but few people know this. Let me explain.

Prostatitis describes the swelling and inflammation of the prostate gland, which is a walnut-sized gland located directly below the bladder in men. The prostate gland’s function is to produce fluid (semen) that feeds and transports sperm.

Prostatitis often causes painful or difficult urination. Other symptoms of prostatitis include pain in the groin, pelvic area, or genitals, and sometimes flu-like symptoms.

According to the Mayo Clinic, prostatitis is usually caused by a nonspecific agent, giving rise to the name Non-specific Prostatitis. If it’s a bacterial infection, they say it can usually be treated successfully with antibiotics. However, they admit that sometimes prostatitis isn't caused by a bacterial infection or a cause is never identified. Since there is a strong likelihood that your prostatitis is caused by yeast, then antibiotics are going to make it worse. That’s why I recommend using silver.

Natural Immunogenics makes high quality silver products called Sovereign Silver available on [Vitacost.com](http://Vitacost.com) in many different sizes. The directions on the bottle for short-term
immune support say 1 teaspoon 7x daily. When I called, the company Customer Service said to use 2 teaspoons 7-10x daily for mild prostatitis. They also said that the silver is 10ppm and tasteless and that I should hold it under my tongue for 2-3 minutes before swallowing.

**The Mayo Clinic Prostatitis Symptoms:**
- Pain or burning sensation when urinating (dysuria)
- Difficulty urinating, such as dribbling or hesitant urination
- Frequent urination, particularly at night (nocturia)
- Urgent need to urinate
- Pain in the abdomen, groin, or lower back
- Pain in the area between the scrotum and rectum (perineum)
- Pain or discomfort of the penis or testicles
- Painful orgasms (ejaculations)
- Flu-like symptoms (with bacterial prostatitis)

Based on symptoms and lab testing, allopathic doctors diagnose acute bacterial prostatitis, chronic bacterial prostatitis (lasting 3 months or more), or chronic abacterial prostatitis (lasting three months or more and is not caused by bacteria). They admit that most cases of prostatitis fall into the last category. There is also a category of prostatitis that doesn’t cause symptoms.

Some of my alternative medicine doctor friends are convinced that inflammation of the prostate is caused by a yeast infection. Drs. Roby Mitchell and John Trowbridge are two doctors who demonstrate case after case of men whose prostatitis was treated with antifungals and cured. These men demonstrate a history of antibiotics and/or years of drinking beer and eating carbs. It doesn’t help that when an allopathic doctor diagnoses prostatitis he will immediately prescribe antibiotics. How can the problem get better if the treatment causes the problem?

Most prostatitis is very mild so it can go ignored and undiagnosed for years as the yeast takes hold. Symptoms may include frequent or urgent urination, nighttime urination, incomplete bladder emptying, reduced urine flow, or a slow start to urine flow. Some men can experience discomfort, pain, or even blood in the urine.
Dr. Roby Mitchell says that chronic inflammation and irritation of the prostate can lead to abnormal cells being formed—these are cancer cells. The condition is called prostatic inflammatory neoplasia (PIN). Furthermore, he says that early detection and treatment of PIN prevents prostate cancer, similar to the way getting rid of colon polyps prevents colon cancer.

There has been recent acknowledgment that the PSA test for prostate cancer is inaccurate and ambiguous; however, if inflammation is present, there will be an elevation of PSA unless testosterone levels are too low. Dr. Mitchell recommends that if you have symptoms and a low PSA, you should have your testosterone level checked as well.

You can have your PSA tested by your primary care doctor or a urologist. If your PSA comes back above 2, you have a prostate infection, according to Ron Wheeler M.D., a urologist and medical director of the Diagnostic Center for Disease in Sarasota, Florida. This infection is non-specific prostatitis and will respond to a yeast-free diet and antifungal treatments. Dr. Mitchell warns that if it is left to smolder, it may lead to prostate cancer. Cancer is more difficult to treat. If you have an elevated PSA, don't sit on it.

**Jock Itch**

Jock itch is the male equivalent of the rash under women’s breasts. Sorry guys, fungus is fungus whether you have it on your feet, genitals, or under your nails. Yeast is a cousin of fungus, so *YOS* only makes it worse. A jock rash is actually caused by your “equipment” in sweaty contact with your upper thighs. Sexy as they may be, bikini briefs and tight bike shorts are playing right into the hands (…or the buds) of yeast. It’s the moistness, friction, heat, and history of antibiotic use that give yeast a hospitable environment in which to live.

You may hear your doctor call your rash Tinea and not Yeast; however, yeast is usually also involved and the treatment I recommend will address all forms of fungus, including the ones that are found in dorms and barracks.

A jock rash begins with a red itchy area in a fold of skin. There can be red raised areas or tiny pimples with small, dry, scaly centers. As you can see, anything goes. The more yeast is involved, the more the rash becomes moist and red and yeasty smelling. A yeast jock rash can also jump to the tip of the penis.
If you are overweight, other skin folds can become involved with this annoying rash. I’ll list a few first aid treatments, but it’s important to follow a yeast-free diet and do the Yeast ReSet Detox for complete relief.

1. Soak in Clay and Magnesium Baths.
If you can, do not shower off the clay that remains as a fine dusting on your skin, but know that it will create clay dust on your clothes.

2. Instead of cornstarch as a dusting powder to keep the area dry, dust with Clay. You can put clay in a squeeze bottle and spray it on your skin.

**Penile Rash**
Candida can be passed between partners sexually. It is important for men to use condoms as protection if you or your partner, whether male or female, has any kind of yeast or fungal infection. If you have any signs of thrush (not just for babies) in your mouth, be aware of the possibility of sharing it with your partner if you are engaging in oral sex.

Following the Yeast ReSet Protocol is fundamental to correcting the imbalance that is at the root of the YOS causing fungal infections.

**Athlete’s Foot**
Sure, the ladies can get athlete’s foot too, but it’s much more common in men. Maybe men walk barefoot around more locker rooms than women. Maybe women change their sweat socks more often than men and avoid the creeping rot that occurs when fungus grows in a nice warm, moist environment.

Athlete’s foot is a very common condition caused by a fungus that lives on the skin and toenails. It’s actually a form of fungal ringworm called Tinea pedis. The infection causes scaling, flaking, and itching of the skin. You pick it up in moist areas where people walk barefoot, such as showers or pools, then house your feet in a warm, dark, damp environment inside your tennis shoes, take antibiotics, and eat a high-sugar diet, all of which encourage fungal growth.

People in tropical climates are more prone to this infection, but sweaty footgear and walking barefoot in spa and sports facility showers is a common cause in North America. In the
acute stage, fungal skin infections may blister and crack and discharge clear liquid. Most often it is characterized by chronic irritation and annoying itchiness.

**First Aid:**
In the acute stage, keep the area dry and uncovered between soaks.

- Soak your feet in a solution of 1 quart of water and 1 tablespoon of Magnetic Clay, 1 tablespoon of sea salt and 1 tablespoon of baking soda.
- Soak your feet in a footbath with hot water and a cup of apple cider vinegar.
- Taheebo tea can also be used to soak the feet. This tea is made from the bark of a tree that grows in Brazil on which fungi or mold won’t grow. A solution of a tablespoon of this bark boiled for an hour in a quart of water can be used several times. Simply reheat before reusing. After soaking, which lessens the inflammation, pain, and itching, apply antifungal cream or lotion. There are many over-the-counter medications that can be used two or three times a day but must be continued for at least four weeks. Preparations available in health food stores include wild oregano oil, tea tree oil, and garlic oil, which are powerful antifungals. Fungus grows best in oxygen-deprived areas; by using cream containing vitamin E, a powerful oxygenator, you can discourage fungal growth.
- After soaking your feet, scrub them to remove any dead skin that can harbor the fungus and dry them well – perhaps even with a hair dryer.
- Zeolite powder (white clay), used for removing the odor from footwear, helps to trap fungus spores to dry athlete’s foot blisters and to keep the feet dry inside your shoes. After soaking your feet, powder with zeolite, put on fresh cotton socks, and put another 1/2 teaspoon of powder directly inside your shoes.
- Change your socks several times a day if your feet perspire heavily and change your shoes once or twice a day, because they hold moisture where the fungus can grow. The worst types of shoes and boots are rubber and plastic, which hold sweat and moisture inside.
If you are susceptible to athlete’s foot, that may be due to *YOS*, which makes you more susceptible to fungal infection. Yeast mainly grows in the gastrointestinal tract, but when it overgrows it can cause oral thrush, groin rash, or penile rash. It can also be undetectable on the skin but creates an environment in which other fungi can grow.

To get rid of athlete’s foot, treatment of *YOS* is also necessary. See Chapter 6 for full details.

*YOS* can affect us from head to toe, so it’s only fitting that I ended this chapter with a section on foot fungus!
SECTION FOUR: YEAST RESET MENU & RECIPES

CHAPTER 11: MENU & YEAST RESET RECIPES

YEAST RESET FAST FOOD MENU

UPON RISING
Juice of 1/2-1 fresh lemon in warm water. Sweeten with Stevia.

BREAKFAST (Choose one)
Hot grain cereal (non-gluten) with organic butter and unsweetened almond or rice milk
Eggs with sautéed greens and vegetables
Brown Rice Mochi with almond butter
Miso or vegetable soup
Gluten-free waffles w/ maple syrup

LUNCH (Choose one)
Make this your main meal of the day.
Brown rice and vegetables
Leafy green salad, soup, and Brown Rice Mochi
Fish, greens, and salad
Egg or tofu omelet with sautéed vegetables
Grilled chicken salad

DINNER (Choose one)
Keep this meal light and simple.
Soup and salad
Stir-fry grains and vegetables
Roasted vegetables with polenta
Gluten-free pasta primavera
Mixed salad with marinated tofu or tempeh
SNACKS
Baked blue corn chips
Popcorn
Raw vegetables
Fresh fruit and dried fruit (soaked)
Shelled nuts and seeds (soaked or roasted)
Rice cakes

DRINKS
Pure, clean water
Green tea
Fresh squeezed lemon juice and water
Cranberry juice sweetened with Stevia
Herbal teas
Kukicha (roasted twig tea)

KIDS MENU
Here is Julie’s recipe list that will give you lots of ideas for safe foods to feed your kids.

Drinks:
   Water, water, water (with a big pinch of sea salt)
   Green Tea, Stevia
   Almond/Rice milks
   Lemon/Limeade

Breakfast:
   Buckwheat pancakes/waffles
   French toast
   Lactose-free cheese omelette
   Hot non-gluten cereal
   Scrambled eggs with cauliflower
Breakfast tacos
Sunrise Sandwiches
Eggs Goldenrod

Lunch:
Lactose-free grilled cheese
Almond butter sandwiches
Unprocessed meat sandwiches
Pizza spelt bagels
Hotdogs (organic)
Quesadillas
Soups

Snacks:
Guacamole, mixed with all types of veggie purees
Celery and almond butter
Rice crackers and almond cheese
Raw veggies and hummus dip or cheese sauce (get good brand or make at home)
Nuts, trail mix w/ coconut and unsweetened carob chips

Dinner Entrées:
All meats fresh, cooked without sugar sauces
Hamburgers/cheeseburger
Tacos
Chili
Macaroni and cheese with chicken
Pizza
Stir-fry with brown rice
Nachos
Spaghetti w ground buffalo
Pork/chicken/beef dinners
Side Dishes:

Brown rice
Brown rice noodles
Mac and cheese
Beans
Edamame
Green beans and bacon
Broccoli and cheese
Carrot coleslaw
Kale salad
Sweet potato fries
Raw Jicima ‘fries’
Chips and guacamole

Desserts:

Carob balls
Buckwheat pumpkin cookies
Apple crisp
Fruit and carob covered almonds
Almond muffins with blueberries
Pumpkin pie (spelt crust, buckwheat crust)
Blueberry pie
Fruit salad with coconut
Apples and almond butter

Condiments:

Organic mustard
Unsweetened Ketchup
Salad Dressing (Lemon/olive oil)
Spices (Cinnamon, nutmeg, cumin, turmeric, garlic, kelp salt)
Blueberry syrup
YEAST RESET RECIPES
The recipes below are suggestions to help you through the initial phase of the Reset plan. You will notice that there are recipes that include beans (legumes) of which you will be able to eat only \( \frac{1}{4} - \frac{1}{2} \) cup 2-3 times a week, starchy veggies such as sweet potatoes or yams which you will eat no more than 2 times a week, and non-gluten grains (quinoa, brown rice, etc.) which you may eat \( \frac{1}{4} - \frac{1}{2} \) cup 2-3 times a week. Be aware and keep track when you use recipes that contain these somewhat restricted foods. If you have any digestive issues when you eat these foods, it might be best to limit them further for a week or so, until the yeast overgrowth is more under control.

Leftovers are best eaten within 24 hours; mold will grow the longer a food is leftover. Dinner leftovers are easily used as lunch the following day. If you can’t use up all the leftovers, it is best to freeze them in individual portions that can be used as needed. Some foods do not freeze well, and if you are not sure, take a small portion out as soon as it is completed cooking, freeze for several hours and then defrost and check how it tastes. Texture can be a little different with some foods when frozen – potatoes are a good example of this. They do not freeze well.

While most fermented foods are to be avoided when on the Yeast Reset Diet, certain fermented foods such as yogurt are wonderful because they contain beneficial bacteria (probiotics) that are important for a healthy digestive system, also called your microbiome. We suggest that other fermented foods, such as sauerkraut and kimchi, be introduced during phase 2 of the dietary plan. If they cause a few digestive reactions, wait a week or so and try again. Other foods, such as garlic and onions, are not only fantastic anti-candida foods, but are also considered to be Prebiotics because they serve as food for those beneficial bacteria (probiotics) that keep your microbiome happy. Other therapeutic foods for the Yeast Reset Diet are highlighted on the food list. Be attentive to these foods when possible.

A word about making this happen in your busy life: organic foods that are also non-GMO are important in today’s polluted environment. How do you find time to shop, clean, and prepare the foods on a diet that has such a focus on fresh veggies? While it isn’t easy, it is manageable.

First, download the Dirty Dozen list from the Environmental Working Group (ewg.org). There is an app for your phone that you can refer to when shopping. If it is not possible to eat all foods organically, then choose only organics from the Dirty Dozen list, or buy only those non-
organic veggies that are on the EWG’s *Clean Fifteen* list most of the time. Keep in mind, though, that while the organic part is important, if it causes stress finding the right foods, then it won’t work for the whole *RESET* program. The moral of the story: DO THE BEST YOU CAN!!!!

Second, clean your veggies when you get home while you are putting them away. You are more likely to prepare veggies on another day that have already been cleaned. While you are putting them away, you can make a salad for dinner or for tomorrow’s lunch.

Third, it is not necessary to make complicated recipes. We have given you some EASY ones to start with here, but it is even simpler to make a whole meal in the oven: roasting chicken, sweet potato and other veggies makes a one-pan meal. Then, use the leftover chicken for tomorrow’s lunch as chicken salad, as an addition to a green salad, or in a stir-fry.

**Five-Minute Foods**

Using leftovers for a stir-fry, sauté cut-up veggies in coconut oil for a few minutes (if using some fresh veggies, then sauté them a little longer before adding any leftover veggies). Chop up leftover protein into bite-sized pieces while the veggies are cooking, add to the pan along with some coconut milk and some spices or herbs that you like (ginger, basil, oregano, cumin, curry, etc.), and warm the whole dish! Before serving, add a dash of sesame oil, Liquid Aminos, or Coconut Aminos for flavor. Please note that fresh herbs are usually added near the end, while dried spices are added near the beginning to fully take advantage of their flavor.

Remember that smoothies with added greens make the fastest and healthiest breakfast ever! Bon appétit!

**RECIPES FOR PHASE 1**

**Breakfast**

**Curried Eggs & Vegetables - Serves 2**

<table>
<thead>
<tr>
<th>Ingredient</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 tsp. coconut oil, divided</td>
<td>¼ tsp. turmeric</td>
</tr>
<tr>
<td>½ cup chopped onion</td>
<td>½ cup chicken or vegetable broth</td>
</tr>
<tr>
<td>1 tsp. minced ginger</td>
<td>1 small red or orange pepper, diced</td>
</tr>
<tr>
<td>1-2 cloves garlic, minced</td>
<td>½ cup finely chopped zucchini</td>
</tr>
<tr>
<td>½ tsp. curry powder</td>
<td>1½ cups baby spinach leaves</td>
</tr>
</tbody>
</table>
3-4 eggs, beaten

Heat 2 tsp. coconut oil over low heat in a large skillet. Sauté onions, ginger, and garlic for 2-3 minutes. Add curry powder, turmeric, and broth and cook for another 2-3 minutes. Add pepper and zucchini and simmer for about 5 minutes more. Add spinach during the last 2 minutes and stir to mix in. In a separate skillet, heat remaining 1 tsp. coconut oil over low heat and add eggs. With a spatula, gently stir eggs from the sides, and when almost done, fold vegetable mixture into eggs and finish cooking. Serve immediately, garnished with sliced avocado.

**Green Eggs - Serves 2**

3 tsp. coconut oil, divided
¼ cup onions, sliced
½ cup zucchini, chopped
½ cup each spinach, baby kale, and watercress, all torn into small pieces (any greens will do)

Heat 2 tsp. coconut oil over low heat in medium skillet. Cook onions until they begin to soften, adding squash and cooking for another 4-5 minutes. Add spinach, baby kale, and watercress and stir-cook until soft. Be careful not to overcook. Spoon vegetables into a bowl. Add remaining 1 tsp. coconut oil to pan and add eggs, sprinkling in nutmeg. Cook 2-3 minutes, stirring from edges. When almost done, fill with vegetables and stir in, folding one half of the egg mixture over the vegetables into an omelet (or just stir together for a scramble) and serve immediately, garnished with basil or parsley.

**Spanish Omelet - Serves 2**

2 tsp. coconut oil
½ cup chopped onions
¼ cup chopped celery
½ cup chopped red pepper

½ cup chopped zucchini
1 medium tomato, chopped
1 tsp. olive oil

Carolyn Dean MD ND 210
3-4 eggs, beaten

¼ cup each cilantro and parsley, chopped

Heat coconut oil over low heat in medium skillet. Add onions and sauté for 2 minutes. Then, add celery, green pepper, and squash and continue cooking until soft. Add tomatoes, reduce heat to low, and cook for a few minutes. Remove from pan and keep warm. Add eggs to pan, using more oil if needed. Cook gently, stirring from edges. When the eggs are almost done, stir in vegetables and cilantro, warm, and remove from heat. Garnish with parsley and serve.

Coconut yogurt - 2 servings

1 can (14 oz.) coconut milk (full-fat)
1 or 2 capsules probiotic (any variety is ok), OR ½ to 1 tsp. powdered

Turn the oven light on (not the oven temp). Mix the coconut milk with the probiotic and pour into a glass jar with a lid. Be sure it is mixed well. Cover the jar and place in the oven, leaving on the light for the heat. This helps the good bacteria to proliferate!! Leave in the oven for about 24 hours. Remove from oven and chill for about 4 hours until it sets well. You may stir in some vanilla bean seeds if you like, or any flavoring. Use coconut yogurt for breakfast or as a snack topped with chopped nuts and cinnamon.

Appetizers and Snacks

Edamame Hummus

One 10 oz. bag frozen, shelled edamame
4 Tbsp. sesame tahini
¼ tsp. salt

¼ cup lemon juice
1-2 cloves garlic
3 Tbsp. olive oil

Bring 3-4 cups water to a boil and add edamame, cooking for about 3-4 minutes. Drain well and add to food processor, along with tahini salt, lemon juice, and garlic. Process the ingredients while slowly drizzling in olive oil until the mixture is very smooth, adjusting amount as needed. Taste and add salt if more is needed. Serve with raw veggies.
**Deviled Eggs**
Hardboiled eggs
Edamame hummus (recipe above)
Paprika for garnish, optional

Cut eggs in half, the long way. Fill the egg cavities with the hummus and sprinkle with paprika, if desired.

**Crispy peas**
1 cup dried yellow split peas
3 cups water
1-2 tsp. olive oil
Sea salt to taste

Soak peas in 3 cups water for 4-5 hours. Drain well and pat dry. Over medium-high heat, warm oil in a large skillet and add about half the peas. Stir-cook until golden and crunchy, 6 to 10 minutes. Remove to a serving bowl and season with salt to taste. You may add other favorite seasonings as you wish. Repeat with remaining peas. Store in a jar and use within a week. Be careful to eat only ¼-½ cup at a time.

**Walnut Spread** – yield 1¼ cups
1 cup garbanzo beans (chickpeas), drained (reserve liquid)
½ cup chopped walnuts
½ cup basil leaves
2 Tbsp. olive oil
2-3 tsp. lemon juice
Dash salt and pepper

Drain beans and reserve liquid (freeze remaining beans for another use). In a blender or food processor, combine beans with 2 Tbsp. bean liquid and remaining ingredients. Cover and blend until smooth. Add additional liquid as needed and scrape sides of bowl periodically. Use as a dip for raw veggies and store in refrigerator. Use within in 5 days.
Roasted Cauliflower - Serves 6-8

If you have any leftovers, use as a side dish or add to your lunch salad. Delicious served warm or at room temperature.

2 Tbsp. olive oil, approximately
1 medium cauliflower, rinsed clean
Salt and pepper to taste

Preheat oven to 425 degrees. Rub 1 or 2 baking sheets with some olive oil or line with parchment paper. Break cauliflower into 1-inch florets. Toss with olive oil and spread evenly on the baking sheet(s). Roast in pre-heated oven for about 10 minutes. Shake around or toss with a spoon so that they brown evenly. Roast for another 5-10 minutes. Check to see if they are done to your liking. Allow to cool for a few minutes before sprinkling with salt and pepper.

Cauliflower-Spinach Dip

4 cups cauliflower florets
2 cups lightly packed spinach leaves
½ cup basil leaves
2 Tbsp. tahini
2 Tbsp. fresh lemon juice

3 Tbsp. extra-virgin olive oil
1 coarsely chopped small garlic clove
½ avocado, cut into small pieces
Salt and pepper

Place cauliflower florets in a steamer basket set over a pot of simmering water. Cover and steam until crisp-tender, about 8 minutes. Add spinach leaves; cover and steam until wilted, about 2 minutes. Puree vegetables in a food processor with basil, tahini, lemon juice, olive oil, garlic, avocado pieces, salt, and pepper until smooth. Serve warm or at room temperature with raw or lightly steamed veggies. You may also use as a “sandwich” filling to stuff lettuce leaves or slices of turkey, topped with cherry tomatoes cut in half and slivers of avocado.
Minted Cucumber Dip
1 small cucumber, seeds removed, diced 1 tsp. lemon juice
¾ cup plain Greek yogurt Salt and pepper to taste
⅓ cup chopped mint leaves

Combine all ingredients in a bowl and use for veggie dipping or as a salad dressing.

Popcorn
Using only organic, non-GMO popping corn, pop corn in coconut oil. Spray the finished popcorn with coconut oil spray and sprinkle some sea salt on top. Enjoy 1 cup of popcorn twice a week.

Salads

Tuna, Chicken, or Turkey Salad- Serves 2
1 hard-boiled egg, chopped 2 tsp. onion powder
1-2 Tbsp. hummus or Yeast-free Mayo 1-2 Tbsp. chopped fresh cilantro, dill, or
(recipe below) parsley
½ cup finely shredded red cabbage

Mix all ingredients with 1 cup leftover cooked tuna, chicken, or turkey, diced (or 6.5 oz. can of tuna). Serve atop lettuce or mixed greens and drizzle with olive oil. Garnish with extra chopped herbs.

Tuna-Stuffed Peppers - stuff salad into 2 small/medium yellow, orange, or red peppers.

Zucchini Pasta Salad – serves 4-6 (you can purchase a ‘zoodle’ maker that makes veggies strands like spaghetti!!! Or cut into thin strips to make the spiral cuts)

Dressing
2 Tbsp. olive oil ½ tsp. red pepper flakes
2 Tbsp. lemon juice Sea salt and freshly ground black pepper
**Salad**

1 pint cherry or grape tomatoes, halved  
2 large zucchini, about 1½ inches thick, spiral cut into noodles  
1 large carrot, about 1½ inches thick, spiral cut into noodles  
½ bunch fresh basil, sliced into chiffonade

Whisk together the oil, lemon juice, red pepper flakes, and salt and pepper to taste in a small bowl to make the dressing. Set aside. In a large bowl, combine the tomatoes, zucchini, and carrots. Pour the dressing over the vegetables and stir to combine. Add the basil and season with additional salt and pepper as needed. Allow to sit for at least 30 minutes or up to 2 hours in the refrigerator before serving.

**Bean Salad - Serves 4**

Note: Use this recipe as long as you are not sensitive to the nightshade family of veggies.

2 cups black beans (or other favorite bean)  
1 red pepper, diced  
1 yellow or green pepper, diced  
¼ to ½ cup diced red onion or scallions  
1 cup cherry tomatoes (optional)  
¼ cup olive oil  
1 Tbsp. lemon juice  
2 tsp. ground cumin

Combine all ingredients and chill for an hour before serving. Be careful to have only a small amount of this salad as the beans may cause a reaction if you eat too large a serving. Easy and delicious!

**Salad Dressings and Sauces**

**Green Goddess Dressing** – yields about 1 cup

If possible, use only fresh herbs for this dressing, as dried herbs will give a very different taste. Use less if using dried herbs, as the flavor is more intense when dry.

¼ cup chopped basil leaves  
¼ cup chopped parsley  
3 Tbsp. snipped chives  
2-3 cloves garlic, chopped
3 Tbsp. lemon juice (fresh, if possible) 1-2 Tbsp. olive oil
¾ cup plain Greek yogurt 1 very ripe avocado, cut into small pieces
Using a food processor, blend all ingredients until smooth, adding water if needed to thin it out. Refrigerate leftovers and use within 1-2 days.

**Sesame Dressing** – yields about ½ cup
2 Tbsp. lemon juice Freshly ground black pepper to taste
1 garlic clove, finely minced 1½ Tbsp. sesame oil
¼ tsp. sea salt 1 Tbsp. extra virgin olive oil
½ tsp. sesame seeds for garnish (optional)

Whisk all ingredients, except sesame seeds, together in a small bowl. Toss gently with salad ingredients and garnish with sesame seeds. Taste and season with additional salt if needed. Add more sesame oil if needed for taste.

**Salsa** - serving size = ¼ cup
2 large tomatoes, diced 1 clove garlic, chopped
2 scallions, chopped 1 Tbsp. cold-pressed, extra virgin olive oil
1 Tbsp. cilantro, chopped 2 tsp. fresh lime juice

Combine all ingredients in a bowl. If you want a spicier taste, add some chili powder or other spices. Serve with your favorite raw veggies, garnish an omelet, or use as a great topping for fish.

**Creamy Salsa Variation**
Using a wire whisk, mix plain Greek yogurt to your taste with the above Salsa recipe.

**Italian Style Olive Oil/Lemon Dressing** - serves about 2 -3
¼ cup olive oil ½ tsp. dry mustard
2 Tbsp. lemon juice ¼ tsp. each dry basil and oregano
1 large clove garlic, crushed Sea salt and freshly ground pepper to taste
Carolyn Dean MD ND 216
Whisk all ingredients together in a small bowl, or shake well in a jar with a tight fitting lid. Store leftovers in the refrigerator. It will gel when cold and needs to sit outside the refrigerator for 10 minutes before using. The garlic flavor gets stronger as it sits! Remember that Candida organisms hate garlic!

**Creamy Italian Variation**
Whisk plain Greek yogurt and the above Italian dressing together until it reaches the creamy consistency you desire. You may wish to add more herbs or spices.

**Nut/Seed Pâté**
2 cups of nuts or seeds: pumpkin or sunflower seeds, or almonds or macadamia nuts*
3-4 cloves garlic
1 rounded tsp. sea salt
4-6 oz. lemon juice
2-4 oz. water
Optional ingredients: add onion, turmeric, ginger, or basil for color, taste, and texture.

Grind nuts and seeds in food processor and set aside. Blend remaining ingredients in food processor until smooth. Add nuts or seeds and blend. Add optional ingredients as desired and blend again.
Spread 2 Tbsp. of the pâté on collard leaves, romaine lettuce, or nori sushi sheets. Add sliced avocado, basil, cilantro, green onions, pickles (no vinegar), and tomatoes and roll into a delicious wrap.
*Note: for more digestibility, soak seeds for 4 hours and nuts for 8 hours with 1 drop grapefruit seed extract to kill any mold or bacteria. Discard soaking water before adding nuts.

**Yeast-free Mayo**
1 egg
½ tsp. sea salt
½-1 tsp. dry mustard
2 Tbsp. lemon juice
1 cup cold-pressed organic grapeseed, flax, walnut, or olive oil
Put all ingredients except oil into blender and process at medium speed. While blender is still running, drizzle in oil in a steady stream, increasing speed to high. Continue until oil blends in smoothly. Store in refrigerator for 2-3 days.

**Soups/Stews**

**Beans and Greens Soup - Serves 6**

| 2 cups white kidney beans (or other white beans) | 2 large onions, chopped |
| 2 cups kidney or red beans | 2 cloves garlic, minced |
| 1½ cups chickpeas | 1 tsp. dried basil or 1 Tbsp. fresh basil |
| 3 cups fresh spinach, escarole, or Swiss chard, washed, drained, and chopped OR | 1 Tbsp. dried parsley or 2 Tbsp. fresh parsley |
| 4 cups chicken or vegetable broth | 1 tsp. dried oregano or 2 tsp. fresh oregano |

Beans may be canned or cooked from dry. If canned, organic is preferred, and include any liquid from the beans. Combine all ingredients and simmer about 45 minutes to 1 hour. Add pepper to taste.

**Bone Broth**

Bone broth is rich in minerals that help to improve your gut health, support the immune system, and reduce inflammation.

If you search the Internet you can choose one, or go to the Weston Price website for a good recipe. A slow cooker is helpful so it can cook for a long time without boiling all the liquid away. Bone broth is also becoming easier to buy in stores and online.

**Vegetable Beef Soup - Serves 3-4**

| 2 lbs. beef bones, from organically raised/ grass-fed beef | 2 cups water |
| 2 Tbsp. apple cider vinegar | 2 Tbsp. apple cider vinegar |
2 cups sliced onions
2 cups finely chopped celery
2 cups green beans, cut in pieces (or 1 frozen 10-oz. box cut green beans)
2 cups chopped cabbage
1 lb. chuck roast pieces
2 cups fresh tomatoes, chopped (or 1-lb can diced tomatoes)
Sea salt
Herbs of your choice

Simmer the bones in the water with the vinegar, onion, celery, and green beans for 20 minutes. Add the cabbage and meat. Simmer 10 minutes and remove bones. Continue to cook until meat is tender, about 20-30 minutes more. Add chopped fresh tomatoes 10 minutes before serving. Season to taste with sea salt and herbs.

Note: if using frozen green beans, add at the end with the tomatoes.

Roasted Asparagus Soup – serves 4

2 lbs. (approx.) asparagus, ends snapped off and cut into 2 inch pieces
2 large leeks, carefully washed, green ends discarded, cut into chunks
2 Tbsp. olive oil
Salt and pepper to taste
4-5 cups vegetable or chicken broth
1 Tbsp. fresh parsley or tarragon, chopped
1 large clove garlic, minced

Preheat oven to 425°F. Combine asparagus and leeks in a large bowl and add oil, mixing well. Put veggies on a large baking sheet with sides and sprinkle with salt and pepper. Roast in preheated oven for about 30 minutes, until asparagus is soft and leeks are golden brown, stirring occasionally. Be careful not to burn. Remove from oven and set aside to cool.

Blend ½ of the cooled vegetables, along with garlic and parsley or tarragon, in food processor or blender with 1½ to 2 cups broth. When smooth, transfer to a soup pot and repeat with remaining vegetables. Warm soup, adding more broth to desired consistency. Serve immediately.

Egg Drop Soup - serves 4

3 large eggs
6 cups chicken broth
3 Tbsp. freshly chopped parsley
Salt and pepper to taste
In a medium size bowl, beat the eggs with a wire whisk. Heat the broth almost to a boil and slowly pour in the eggs. Allow the eggs to set before stirring in the parsley, separating the egg a bit while stirring. Remove from heat and adjust seasoning with salt and pepper as needed. Serve immediately.

**Lentil and Swiss Chard Soup - serves 6**

<table>
<thead>
<tr>
<th>2 bunches (~1½ pounds total) Swiss chard, rinsed well</th>
<th>1 teaspoon dried thyme</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Tbsp. olive oil, plus extra</td>
<td>1 cup lentils, picked over and rinsed</td>
</tr>
<tr>
<td>1 cup finely chopped onion</td>
<td>1 can (14.5 ounces) diced tomatoes, in juice</td>
</tr>
<tr>
<td>1 Tbsp. tomato paste</td>
<td>Sea salt and freshly ground pepper</td>
</tr>
<tr>
<td>1 tsp. dried oregano</td>
<td>Juice of 1/2 lemon</td>
</tr>
</tbody>
</table>

Cut chard stalks away from leaves and cut into 1-inch pieces. Tear leaves into 2-inch pieces and keep separate from stalks. Set aside. Heat oil over medium-high in a large saucepan with a lid. Add onion and chard stalks and cook, stirring, until softened and slightly browned, 3 to 5 minutes. Add tomato paste, oregano, and thyme; stir to combine.

Add lentils, 5 cups water, and tomatoes with their juice; bring to a boil. Reduce heat and simmer, partially covered, 25 minutes. Add chard leaves, season with salt and pepper, and cook until lentils and chard are tender, 15 to 20 minutes. Stir in lemon juice; ladle soup into bowls and serve immediately.

**Slow Cooker Red Lentil Stew - Serves 3-4**

This can be used as a hearty side dish or a vegetarian main dish. Either way it is easy and very flavorful!

| 4 cloves minced or crushed garlic                      | ¼ tsp. ground coriander |
| ¾ tsp. powdered ginger                                | Pinch of red pepper flakes |
| ¼ tsp. ground cumin                                   | 2 + cups water |
| ¼ tsp. ground cinnamon                                | One 14oz. can regular coconut milk |
| ¼ tsp. ground turmeric                                | 1¼ cups red lentils, rinsed |
1 medium/large onion, peeled and finely chopped
3 carrots, scrubbed and diced
1 tsp. salt and ½ tsp. pepper
3 plum tomatoes, chopped
1 cup frozen peas
¼ cup chopped fresh parsley or cilantro

Mix all the spices together and put in the bottom of the crockpot. Stir in the water and coconut milk until the spices are well mixed in. Stir in lentils and carrots and add salt and pepper. Cover and cook until all veggies are tender, about 4 hours on high or 8 hours on low. Stir in tomatoes and cook on high for about 10 minutes. Then stir in peas and cook for another 5 minutes. Add more water if stew is too thick and add more red pepper flakes if you like more bite. Stir in cilantro or parsley and adjust salt and pepper if needed. Serve hot. Freeze leftovers.

**Side Dishes**

**Grilled Veggies**

Prepare any combination of the following vegetables:

- 1 eggplant, cut into ½ inch rounds
- 1 red and green pepper, cut into large wedges
- 1 onion, cut into large wedges
- 1 summer squash, cut into long, thick strips
- 1 zucchini, cut into long, thick strips

Preheat grill. Brush both sides of each vegetable piece with a light coat of olive oil. When grill hot, place vegetables on grill and cook on each side until brown. Use as a side dish; any leftovers can be added to a green salad.

**Roasted Veggies**

Prepare any combination of the following vegetables:

- 1 each red and yellow bell pepper, cut into large chunks
- 2 red or yellow onions, peeled and cut into thick wedges
- 1 medium eggplant, trimmed and cut into chunks
- 2 cups Brussels sprouts, cut in half only if large
1 medium zucchini, cut into medium chunks

6-8 large garlic cloves, peeled

2 Tbsp. cold-pressed, extra virgin olive oil

Fresh rosemary sprigs, optional

Sea salt and freshly ground pepper to taste

Drizzle oil into 1 or 2 shallow roasting pans or line with parchment paper. Spread veggies in a single layer and arrange garlic cloves among the vegetables. Spray all with olive oil. Place rosemary sprigs among vegetables and grind some pepper over top. Sprinkle salt over all. Roast for 20-30 minutes at 425°, turning vegetables after 15 minutes. The time may vary for each vegetable, so check oven periodically. Serve immediately or allow to cool and serve at room temperature. Leftovers add nicely to a salad. Make extra, if desired, to have leftovers for another meal.

**Shirataki noodles** – 1 pkg. serves 2

Shirataki noodles are made from tofu and contain mostly fiber. You will find them in the refrigerated section of your grocery store. They have been used in China and Japan for many years and are only 20 calories for a 4 oz. serving (1/2 package). Do not buy clear noodles, but the ones that are made from tofu. Drain and rinse the noodles 2 or 3 times and cook in boiling, salted water for only 2-3 minutes. Drain and put back into the same pan, with no liquid added. Stir for a few minutes over low heat until the noodles are somewhat dry. Now they can be used in any recipe: add to a stir-fry, soup, or top with ratatouille (page____), pesto (page___) or your favorite sauce.

**Spaghetti Squash**

Heat oven to 350 degrees. Cut 1 small/medium spaghetti squash in half and place on a greased cookie sheet, baking until fork-tender. Set aside to cool. Scrape out “spaghetti” strands with a fork, and top with chicken curry, ratatouille, or any dish you might serve with noodles or rice.
Stir-fried Snow Pea Pods – Serves 2-3

1 Tbsp. coconut or sesame oil, divided ½ pound snow peas, washed, strings
1 bunch scallions, chopped removed
¼ cup pine nuts

In a heavy fry pan or wok, heat half the oil over low heat and add scallions, sautéing for 3-4 minutes. Add nuts and continue to cook for 2 more minutes. Remove from pan and set aside. Add remaining oil and snow peas to the pan and stir-fry for 3-4 minutes. Toss scallion/nut mixture in and serve immediately.

Ratatouille – serves 6 or more

3-4 Tbsp. olive oil, divided 2 lbs. plum tomatoes, chopped, or one 28 oz.
2 large onions, sliced can tomatoes, drained
1 medium eggplant, cut into 1-inch cubes ½ tsp. salt
4 minced garlic cloves ¼ tsp. pepper
3 green peppers, chopped 1 tsp. oregano
2 med/large zucchini, cut into ½-inch slices ½ tsp. thyme

Heat 1 Tbsp. oil in a Dutch oven or 5-quart pot and sauté onion for 5 minutes. Add 1 more Tbsp. oil, eggplant, and garlic, and sauté about 5 minutes. Add 1 more Tbsp. oil and peppers and sauté 5 more minutes. Add zucchini and sauté 5 more minutes, adding the last Tbsp. oil only if needed. Lastly, add tomatoes and seasonings; cover and simmer for about 30 minutes. Use as a side dish or as a sauce for spaghetti squash or shirataki noodles.

Basic Greens – serves approximately 3-4

2 cloves garlic, cut into slivers
1 Tbsp. olive or coconut oil
1 bunch greens (spinach, kale, collards, Swiss chard), washed and chopped into medium size pieces.
½ cup veggie or chicken broth (not needed for spinach)

If using kale or collards, cut out the tough center stem and discard. For chard, cut out the stems and slice into slivers, sautéing before adding the chard leaves. For spinach, break into pieces and only discard the tough part of the stem.
Sauté garlic in oil for about 30 seconds over low heat. Increase heat to medium and add chopped greens. Sauté over medium heat for about 3-4 minutes. If using spinach, cooking is complete without adding broth.
For other greens, add broth, cover and simmer over low heat for about 5 minutes for chard and 10-15 minutes for kale or collards.

**Variation** - for seasoned greens, add small amounts of any of the following alone or in combination: dry chipotle pepper, coconut aminos, freshly squeezed lemon juice, ground cumin or curry powder (or other spices you enjoy).

**Greens and Tomatoes** serves approximately 4 - 5

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 large bunch of greens, washed (kale, Swiss chard, or collards work best)</td>
<td></td>
</tr>
<tr>
<td>2-3 cloves garlic, minced</td>
<td></td>
</tr>
<tr>
<td>2 tsp. ground cumin</td>
<td></td>
</tr>
<tr>
<td>1 28-oz can tomatoes, undrained, OR 6 cups chopped fresh tomatoes</td>
<td>¼ to ½ tsp. salt</td>
</tr>
<tr>
<td>1 large onion, diced</td>
<td></td>
</tr>
</tbody>
</table>

Remove the large stems from the greens and cut crosswise into small strips. Combine the tomatoes, diced onion, garlic, and cumin in a large saucepan. Bring to a simmer, cover and cook for about 5 minutes. Add greens and continue to simmer, covered, for about 20-25 minutes until tender. Add salt and freshly ground pepper to taste. Serve immediately.

**Kale Chips** - serves 4

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 bunch kale</td>
<td></td>
</tr>
<tr>
<td>Sea salt to taste</td>
<td></td>
</tr>
<tr>
<td>1-1½ Tbsp. cold-pressed, extra virgin olive oil</td>
<td></td>
</tr>
</tbody>
</table>
Preheat oven to 375°. Strip the stems off the kale and tear or cut into 2- or 3-inch pieces. Toss with olive oil, mixing well to coat all the leaves. Put on a cookie sheet and roast in preheated oven for 5-7 minutes. Gently turn the pieces over and bake for another 5-10 min. Be very careful not to burn, but ensure they become crisp. Sprinkle lightly with salt and enjoy. The pieces should come out crunchy, so leave them in the oven a little longer if needed. Serve when cooled a bit. Even kids love these!

**Roasted Garlic**

Preheat oven to 350°. In any quantity desired, cut the top of the garlic bulb off so that it has a flat even surface and so that the cloves are now exposed. Add ¼ - ½ teaspoon olive oil and rub over the cut area and around the outside. Wrap them in foil, placing cut end up, and roast in preheated oven for approximately 35-45 minutes. Add roasted garlic, squeezed out of each clove, to dressings, soups, and salads, or use as a spread. This is a good candida treatment. Remember, “Food is Medicine.”

**Roasted Red Peppers**

In any quantity desired, place red peppers on a lightly greased cookie sheet and place in the oven on “broil.” As the skin blackens, keep turning and do not allow peppers to burn through to the inside. You just want to darken the outside. When the peppers are blackened on all four sides, place in a paper bag and seal for 10 minutes to “sweat”. After cooling, gently remove the charred skins. As you do this, save any juice that accompanies the peppers. Cut into strips and marinate in olive oil and garlic slivers. Serve as a garnish for green salads, or mix into tuna or chicken salad.

**Lunch or Dinner**

**Roasted Cornish Hen** – serves 2

- 1 Cornish hen, rinsed and dried
- Fresh sprigs of thyme
- 1 lemon cut in half
- 2 Tbsp. fresh parsley
- 1 Tbsp. olive oil
- Salt and pepper to taste
Preheat oven to 450 degrees. Place hen in a roasting pan, breast side up. Put 1 lemon half and 3 sprigs of thyme in cavity. Tuck several thyme sprigs under the breast skin, along with some parsley. Squeeze other lemon half over hen, and brush 1 Tbsp. olive oil all over the skin.

Roast hen in preheated oven until golden brown, about 45-50 minutes. Let stand for 10-15 minutes before cutting in half. Serve immediately.

**Lettuce/Turkey Wrap-Ups** – serves 4-5

- 2 Tbsp. olive oil
- 2 medium carrots, peeled and grated
- 1 medium zucchini, grated
- 4 green onions, thinly sliced
- 1 pound ground turkey
- 3 Tbsp. liquid aminos or coconut aminos
- Dash of garlic powder
- Crispy lettuce leaves

Heat olive oil in skillet or wok. Add carrots, zucchini, and green onions and sauté for about 3-4 minutes until softened. Add turkey and continue to cook, stirring, breaking up the chunks, until turkey is no longer pink, about 5 minutes. Add aminos and garlic powder and mix well. Serve in a bowl with lettuce leaves on the side. Wrap filling in a lettuce leaf.

**Salmon with Escarole and Lemon** - Serves 4

- 1 lemon
- 1 Tbsp. olive oil
- 1 medium red onion, halved and thinly sliced
- 2 garlic cloves, thinly sliced
- ¾ cup water
- 2 heads escarole (~2 pounds total), cored, trimmed, and coarsely chopped
- 4 boneless, skinless salmon fillets (4-6 ounces each)
- Salt and pepper to taste

Cut lemon in half; thinly slice off end of one-half lemon and cut into 4 thin slices. Squeeze other half into a bowl and set aside. In a 4-quart Dutch oven or heavy pot, heat oil over medium heat. Cook onion, stirring occasionally, until golden, about 6 to 8 minutes. Add garlic and sauté for another 1-2 minutes before stirring in escarole and water. Place salmon filets on top and season...
with salt and pepper. Place 1 lemon slice on each fillet. Cover and cook until salmon is opaque throughout, about 12 to 14 minutes. Remove salmon to serving dish and stir lemon juice into escarole. Top salmon with escarole and serve immediately.

**Chicken Curry – serves 4**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1½ Tbsp. coconut oil</td>
<td>One 15-oz can regular coconut milk</td>
</tr>
<tr>
<td>1 medium/large onion, chopped</td>
<td>½ cup water</td>
</tr>
<tr>
<td>3 cloves crushed garlic</td>
<td>1 medium red or yellow bell pepper, sliced</td>
</tr>
<tr>
<td>1 tsp. turmeric</td>
<td>4 carrots, sliced thin</td>
</tr>
<tr>
<td>½ tsp. cinnamon</td>
<td>5 cups packed thinly sliced kale, collards, or chard</td>
</tr>
<tr>
<td>½ tsp. ground coriander</td>
<td></td>
</tr>
<tr>
<td>1 tsp. curry powder</td>
<td>Sea salt and fresh ground pepper to taste</td>
</tr>
<tr>
<td>2 tsp. cumin powder</td>
<td>Cayenne pepper, ⅛ tsp., optional for additional spice</td>
</tr>
<tr>
<td>1¼ lbs. boneless chicken breast, cut into bite-sized pieces</td>
<td>Cooked spaghetti squash or shirataki noodles</td>
</tr>
<tr>
<td>2 Tbsp. tomato paste</td>
<td></td>
</tr>
</tbody>
</table>

Using a Dutch oven or large pot, add coconut oil and warm over medium heat. Add chopped onion and sauté until translucent, about 5 minutes. Then add garlic and spices and continue to sauté for another few minutes. Add chicken pieces and toss until well coated with spices; sauté for about 5-7 minutes.

Now add the tomato paste, coconut milk, water, sliced pepper and carrots and stir to combine. Reduce heat and simmer covered for about 15 more minutes, stirring occasionally to blend flavors.

Add the greens, stir, and cook over low heat for 5-10 more minutes until softened. Add salt and pepper to taste, and cayenne if desired. Serve immediately on top of cooked spaghetti squash or shirataki noodles. If you are eating grains, you may serve it with cooked quinoa or brown basmati rice.

**Coconut Chicken – serves 4**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2 Tbsp. olive or coconut oil</td>
<td>1 small onion, diced</td>
</tr>
</tbody>
</table>
2-3 cloves minced garlic
1 14-oz can diced tomatoes
1 lb. boneless chicken breasts cut into bite-sized pieces
1 Tbsp. curry powder
½ cup regular coconut milk

Heat oil over medium heat in a large skillet. Add onions and cook, stirring, until softened. Add garlic and sauté for 1 minute. Then add tomatoes, chicken pieces, and curry powder. Cook over low heat, stirring, for about 20-25 minutes, until chicken is thoroughly cooked and mixture has thickened. Stir in coconut milk during the last 5 minutes. Season to taste with sea salt and pepper. Top with a sprinkle of cinnamon and garnish with basil leaves.

**Coconut Salmon - serves 6**

One 14-oz. can regular coconut milk
2 tsp. arrowroot
1½ tsp. curry powder
1½ lbs. salmon fillets

Preheat oven to 350 degrees. Mix coconut milk with arrowroot and curry powder in a 2-3 quart ovenproof dish. Add salmon and bake, covered, for about 35-45 minutes. Season to taste with salt and pepper and serve immediately with some of the sauce on top of each fillet. Top with cherry tomatoes and basil or cilantro. Remaining sauce may be used to top veggies such as cauliflower, broccoli, spaghetti squash, or green beans.

**Curried Lentils and Cauliflower - Serves 4-6**

1 cup dried brown lentils
1 bay leaf
2 cups water
1 Tbsp. olive oil
1 onion, chopped

2 cloves minced garlic
½ cup water
Sea salt and freshly ground pepper
Ground cinnamon for garnish
4 or 5 fresh basil leaves for garnish
Salt and freshly ground pepper

Carolyn Dean MD ND
Rinse lentils and pick out any stones. Place in a medium soup pot with bay leaf and water. Bring to boil, lower heat, and cover. Simmer 25-30 minutes until soft. Drain if needed. While lentils are cooking, heat oil in another large pot. Add onion and sauté until soft. Add garlic, spices, and remaining ingredients. Cover and simmer until cauliflower is tender (10-15 minutes). Stir cooked lentils into cauliflower-tomato mixture, and discard the bay leaf. Dress with plain yogurt if desired.

**Curried Vegetable Stew – serves 6**

<table>
<thead>
<tr>
<th>Ingrediants</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1½ Tbsp. coconut or olive oil</td>
<td>1 small head cauliflower, broken into bite-sized pieces</td>
</tr>
<tr>
<td>2 medium-large onions, diced</td>
<td>3 garlic cloves, minced</td>
</tr>
<tr>
<td>2-3 tsp. grated fresh ginger</td>
<td>6 small Yukon gold or other new potato, washed and diced</td>
</tr>
<tr>
<td>1-3 tsp. curry (depending on your taste for curry!)</td>
<td>½ tsp. turmeric</td>
</tr>
<tr>
<td>Óne 15-oz. can lite coconut milk</td>
<td>2 cups water</td>
</tr>
<tr>
<td>1-2 Tbsp. red curry paste</td>
<td>2 cups fresh green beans, cut into 1 inch pieces (or one 10-oz. package frozen cut green beans, thawed)</td>
</tr>
<tr>
<td>Salt to taste</td>
<td>½ cups frozen baby peas, thawed</td>
</tr>
</tbody>
</table>

Sauté onion in oil for 3-4 minutes over medium heat in a large, heavy soup pot. Add garlic and sauté another minute. Now add potatoes, carrots, and 2 cups water. Bring to a simmer and cover. Cook for about 10 minutes. Potatoes will not be fully cooked yet.

Add the cauliflower, green beans, and spices. Cover and continue simmering gently for about 10-15 minutes, until veggies are tender. Mash some of the potatoes against the side of the pot to thicken it some. Now stir in the coconut milk and the curry paste if using, being sure that the
paste is well mixed in. Allow to sit for an hour or more to blend flavors. Just before serving, stir in defrosted baby peas and reheat, adding salt if needed. Does not freeze well.

**Chili** - serves 8

2 pounds ground organic, grass-fed beef, buffalo, or turkey
One 28-oz. can tomatoes
Two 15-oz. cans red kidney beans, drained
One 8-oz. can tomato sauce
1 medium chopped onion
2 Tbsp. chili powder
1 Tbsp. parsley flakes

¾ tsp. dried basil, crushed
¾ tsp. dried oregano, crushed
½ tsp. black pepper
½ tsp. ground cinnamon
2 cloves garlic, minced
¼-½ tsp. ground red pepper
1 bay leaf

In a 4-quart Dutch oven cook the meat until it is no longer pink. Drain off fat. Stir in undrained tomatoes, drained kidney beans and remaining ingredients. Simmer uncovered for 45 minutes. Add more chili powder or red pepper as needed for a zippier taste. Freezes well in individual portions for easy meals.

**Slow-Cooker Turkey Breast**

2 Tbsp. ghee or olive oil
1 medium onion, cut into chunks
2 small carrots, scrubbed and cut into chunks
1 large stalk celery, cut into small chunks
4-6 cloves crushed garlic

1-2 cups chicken broth
3-4 sprigs of fresh thyme
Several leaves of fresh sage
2 bay leaves

Turkey breast, with bone and skin, about 7 lbs.

Heat ghee or olive oil in heavy skillet over medium/high heat and cook onion, carrot, celery, and garlic for about 7-8 minutes. Add more oil if necessary. Add 1 cup chicken broth and increase heat to high. Cook for about 5 minutes until liquid is thickened and reduced a bit. Stir in little more broth and herbs and transfer to slow cooker. Season turkey breast with salt and pepper to
your taste and place skin side up in slow cooker. Cover and cook about 6 hours on low. Meat thermometer should read 165 degrees when done.

Remove turkey and allow to sit covered with aluminum foil for about 15 minutes. Meanwhile, pour liquid from slow cooker back into the skillet and simmer until thickened, 10-15 minutes. Add salt and pepper as needed.

Slice turkey and drizzle juices on top before serving with **Mashed Cauliflower** (below). Use leftovers for turkey salad and freeze the remains for later use.

**Mashed Cauliflower** – serves 4-5

1 head of cauliflower, about 4-5 cups
2 Tbsp. ghee or coconut oil
¼ cup coconut milk
1 tsp. garlic powder OR roasted garlic cloves, optional
Sea salt and freshly ground pepper to taste
Other herbs of your choice if desired

Break apart the florets of cauliflower and steam until fork-tender. Puree in food processor with the remaining ingredients until it has a similar consistency of mashed potatoes. Add more coconut milk if needed. Use more or fewer herbs and seasonings to your taste.

**Herbed Cauliflower Rice** – serves 4-5

1 medium to large head of cauliflower, trimmed
1 Tbsp. coconut oil
6 green onions, sliced, using some of the green part too
2-3 cloves garlic, crushed
½ cup finely chopped fresh cilantro, basil, or parsley (or combination of any of these)
Sea salt and freshly ground black pepper to taste

Grate or shred the cauliflower using a food processor or a box grater (large holes). In a large wok or skillet over low heat, melt the coconut oil and add the green onions and garlic, stirring for 1
minute. Increase heat to medium and add the shredded cauliflower. Cook, stirring frequently, for about 5-6 minutes until heated thoroughly. Add the salt and pepper and fold in the herbs.

**ALTERNATIVE NUT MILKS**

It is easy to make nut milk if you have a high-speed blender like a VitaMix or Blendtec. It may be possible to try with a traditional blender, but you will have to blend for a long time and you may have to strain more of the leftover pieces. Making your own is cheaper and you will avoid all the additives and preservatives in the boxed varieties. Always use raw nuts and if possible, organic nuts. Some need overnight soaking, while others get blended without soaking. Most nuts can be made into milk!

Here are some recipes to get you started!

In each nut milk you can add ReStructure to make it a high protein meal.

**Almond Milk**

1 cup raw organic almonds, soaked overnight in water to cover, then drained and rinsed
4 cups filtered water
Pinch of salt, optional

Mix drained almonds with water and optional salt in a high-speed blender (or a regular blender on high, if necessary) for about 60 seconds. Strain in a fine mesh strainer or a nut milk bag (found in a health food store), squeezing every last drop! The strainer will yield milk with tiny pieces in it and is fine if you are not too fussy. The nut milk bag will yield smoother and creamier almond milk. Store in the refrigerator and use within 3 or 4 days. Shake well before using. You can save the leftover meal to add to yogurt or a smoothie.

**Coconut Milk**

1 cup grated coconut, unsweetened
4 cups filtered water
No soaking is necessary!!! Mix coconut and water in blender and blend for as long as it takes to mix well. You can mix more after stopping if it seems to need it. There will be some leftover globs of coconut fat – you can leave it or strain it out. When you refrigerate it, the globs will harden and need to soften out of the fridge for a little while. Shake well before using. Use in any recipe that calls for full fat coconut milk.

**Hemp Milk**

½ cup hemp seeds (also called hemp hearts)
3 cups filtered water
Pinch of salt

No soaking is necessary!!! Mix hemp seeds and water in blender and blend for as long as it takes to mix well. No straining is necessary either. Just refrigerate and use within 3-4 days. Shake well before using.

**Brazil Nut Milk**

1 cup Brazil nuts, soaked for 4 hours in water to cover, then drained and rinsed
4 cups filtered water
Pinch of salt

In a high-speed blender, combine and blend on low to start then on high for about 60 seconds. It is not necessary to strain if using the high-speed blender. Refrigerate and use within 3 days. Shake well before using.

**SMOOTHIES USING NUT MILKS**

You can add ReStructure protein powder to any smoothie, even your Green smoothie@

**Green smoothie** - Serves 1

1 cup coconut milk
½ cup coconut water
½ avocado, cut into chunks
1 large handful of baby spinach or other greens
Juice of a lemon or lime
2 ice cubes, optional
Blend all ingredients together in blender until creamy. Drink immediately.

**Cacao Smoothie - Serves 1**

½ cup coconut milk
1 cup hemp or almond milk
1 Tbsp. cacao powder
1 Tbsp. raw almond butter
2 ice cubes, optional

Blend all ingredients together in blender until creamy. Drink immediately.

**Iced Mocha smoothie - Serves 1**

1 cup regular or decaffeinated coffee
1 cup coconut or Brazil nut milk
1 Tbsp. coconut oil or coconut butter
2 tsp. raw cacao powder
¼ tsp. ground cinnamon
2-3 ice cubes
Blend all ingredients together in blender until creamy. Drink immediately.

**Chai Tea Latte - Serves 1**

½ cup hemp milk
1 Tbsp. hemp seeds
½ cup coconut milk
1 cup steeped chai tea
2 large handfuls baby spinach or other greens
½ avocado, cut into chunks
Tiny pinches of ginger, cloves, and cinnamon, optional
Blend all ingredients together in blender until creamy. Drink immediately.

**Stage 2 Recipes**

When using a stage 2 food such as vinegar, mushrooms, or fruit for the first time, such as vinegar, mushrooms, or fruit in the recipes below, check your digestion to see if there is any reaction. If you feel more gas or bloating or are just uncomfortable, then avoid that food for a little longer before trying again. Everyone’s digestive system reacts differently!

Fermented foods are important for intestinal health, also called your microbiome. Try adding some mushrooms to some of the stage 1 recipes and see how you feel. Try adding some berries to a smoothie or just enjoy a small bowl of berries and coconut or Greek yogurt! Test the waters!!

**Popcorn**

Use the same recipe as in Phase 1, but instead of spraying the popcorn with coconut oil, spray on apple cider vinegar and then sprinkle on nutritional yeast. It has a very unique and delicious flavor.

**Roast chicken and vegetables** – serves 4

**Marinade:**

3 Tbsp. balsamic vinegar  
2 Tbsp. olive oil  
2 Tbsp. minced garlic  
2 Tbsp. chopped fresh thyme (or 1 Tbsp. dried)  
1 tsp. coarse salt  
½ tsp. black pepper

Whisk marinade ingredients together in a small bowl and set aside.

4 Roma tomatoes, quartered lengthwise  
1 medium zucchini, cut into 1-inch chunks  
1 small eggplant, cut into 1-inch chunks  
1 medium onion, cut into 2-inch chunks  
1 yellow or red pepper, cut into 1-inch chunks  
8 chicken thighs (bone and skin included)
Line a baking sheet or large cookie sheet with parchment paper or spray with oil. Preheat oven to 425 degrees. Combine all vegetables in a large bowl and toss with 3 Tbsp. of the marinade. Arrange vegetables in a single layer on one side of the prepared baking pan. Toss the chicken with the remaining marinade mixture and arrange on the other end of the baking sheet. Season all to taste with salt and pepper. Roast in the preheated oven about 45 minute or sooner if you think it looks done. Substitute any vegetables you like!

**Pumpkin pancakes - yields 8 pancakes**

4 eggs, lightly beaten       ¼ tsp. nutmeg
2 Tbsp. almond meal         1/8 tsp. ground cloves
½ cup pumpkin puree         ¼ tsp. salt
1 tsp. vanilla              2 Tbsp. coconut oil
¼ tsp. baking soda          ½ cup unsweetened applesauce or fresh
1 tsp. cinnamon             berries
¼ tsp. ginger

Using a fork, mix eggs in a medium bowl and add almond meal, pumpkin, and vanilla, stirring to combine well. Add baking soda and spices and combine. Heat a pan to cook the pancakes in and add the coconut oil to melt. Stir ½ the oil into the pancake mixture, leaving the rest to use for cooking the pancakes. Top with butter and/or applesauce or berries and serve immediately.

**Oat Bran Muffins – yields 4-5 muffins**

⅓ cup coconut milk (not canned)       Pinch of sea salt
2 tsp. lemon juice                  3 Tbsp. sunflower seeds or chopped
¼ cup oat bran                      almonds
¾ cups oats                         ½ cup unsweetened applesauce
½ tsp. baking powder               ½ cup fresh or frozen organic blueberries or
¼ tsp. baking soda                 raspberries
Preheat oven to 400 degrees. Spray muffin cups with coconut oil spray and set aside. Combine milk and lemon juice in a cup and allow to sit about 10 min or until curdles form. Combine dry ingredients in a large bowl. Add milk/lemon juice combination and the applesauce, mixing gently with a spoon until completely moistened. Carefully stir in dried fruit. Spoon into prepared muffin tin, filling about ¾ full. Bake 20-25 min until lightly browned. Allow to cool for 10 minutes before removing from pan.

**Sauerkraut**

Fermented foods such as sauerkraut are important to make with no vinegar. Sauerkraut is the easiest of the fermented foods to make! You will need a very clean 2-quart canning jar to start. For colorful sauerkraut, use 1 small head each of red and green cabbage!

1 medium head of cabbage (about 3 lbs.), wilted outer leaves discarded
1-2 Tbsp. kosher salt
1 Tbsp. caraway seeds, optional

Save one outer leaf of cabbage for placing over the sliced cabbage in the jar. Quarter the cabbage, removing the core. Thinly slice or grate each quarter. Transfer cabbage to a large mixing bowl and add the salt. With clean hands, massage the salt into the cabbage for at least 5 minutes, and more as needed. The cabbage will become limp. Add the optional caraway seeds, if using, and mix well.

With your clean hands, pack the cabbage into the canning jar, pressing down after each addition. If any liquid accumulates in the bottom of the jar, pour it off. Stuff the saved large cabbage leaf on top of the cabbage to help keep it submerged in the liquid that will accumulate. You may need a small jar to place on top to keep it submerged. Cover the top of the jar with a cloth or with cheesecloth, securing it with a rubber band. This enables air to get into the jar, but keeps it clean from any dirt.

Press the cabbage down every few hours during the first 24 hours. It will become more limp and reduced in size and the liquid will rise above it. You may need to add some salted water if there is not enough liquid.
Keep at cool temperatures, about 65-75 degrees, out of the sunlight for proper fermentation. Check daily and be sure it is below the liquid. You may see some bubbles while it is fermenting. If you see any foam or mold, scrape it off and don’t eat that part. The rest of the cabbage will be fine. After 3 days, taste it. If you like the way it tastes, it may be ready to eat. It can take up to 10 days. When you approve the taste, remove any weights, put the jar lid on and refrigerate. It will keep for about 2 months or more in the refrigerator. Start out with small amounts at first, about 1 tablespoon daily.

**Spicy Tahini Dressing** – yields about 2/3 cup

¼ cup olive oil  
2 Tbsp. sesame tahini  
1 Tbsp. apple cider vinegar  
1 Tbsp. lemon juice  
1 Tbsp. coconut aminos  
1 Tbsp. water  
1 tsp. dried chives (optional)

Combine all ingredients in a bottle with a tight lid and shake well. Will keep for about 1 week, refrigerated. Shake before each use.

Every time I read through these recipes in the editing process, I get very excited that you have so many great food choices. I thank Barbara Schiltz RN, MS for creating these recipes for you. I’m also happy to report that Barb is available for nutritional consultations by phone and internet. You can ask Customer Service ([support@RnAReset.com](mailto:support@RnAReset.com)) for her contact information.
REFERENCES


Pfaller MA. Infection Control: Opportunistic Fungal Infections-The Increasing importance of Candida Species. New Challenges and Controversies Meeting. Veterans Administration Medical Center and University of Iowa College of Medicine. 270-273, 1989.)


Iwata K. Recent Advances in Medical and Veterinary Mycology, University of Tokyo Press, 1977.


MEET THE DOCTOR OF THE FUTURE

Dr. Dean is a medical doctor, naturopath, herbalist, acupuncturist, researcher, and formulator. She’s authored 110 Kindle books and 35 print books, including *The Magnesium Miracle*, *IBS for Dummies*, *Hormone Balance*, and *Death by Modern Medicine*. Dr. Dean is on the Medical Advisory Board of the non-profit Nutritional Magnesium Association.

Dr. Dean won *The Arrhythmia Alliance Outstanding Medical Contribution to Cardiac Rhythm Management Services Award 2012* presented at The Heart Rhythm Congress organized by the Heart Rhythm Society (HRS), Sept 23-26, 2012. In September 2014, she received an Excellence in Integrative Medicine Award at the Sacred Fire of Liberty Awards in Washington.

At [www.DrCarolynDean.com](http://www.DrCarolynDean.com), you are invited to receive a free subscription of Dr. Dean’s Doctor of the Future Newsletter and join her online wellness program Completement Now! On that website you will see links to her weekly radio show and product website [www.RnAReSet.com](http://www.RnAReSet.com).

Disclosure: Dr. Dean has an economic interest in the innovative products RnA Drops, ReNew, ReAline, ReMag and ReMyte. They can be found at [www.RnAReSet.com](http://www.RnAReSet.com).