

# Intelligent Medicine Health News Review



Every week, I share my insights with you on various health topics, from the latest news to seasonal concerns to in-depth examinations of particular areas of interest. But every now and then, I like to give my take on a handful of the most recent headlines in one easy-to-digest sitting—a Health News Review. This week, I’m breaking down four recent articles, and sharing my opinion on the issues:

## **“Leaky gut” linked to autoimmune disease**

Bacteria in the intestines of experimental animals and humans

can traverse the gut wall and travel to remote organs and tissues, triggering autoimmune reactions, according to a recent Yale University study. This bacterial translocation is thought to be a key driver of autoimmune liver disease and systemic lupus.

*MY INSIGHT:* “Leaky gut syndrome” is a colloquial moniker for altered intestinal permeability, which has been documented in many disease states, including ulcerative colitis, celiac disease, and HIV infection. The gut surface is designed to allow good things (i.e. nutrients) to be absorbed, and to keep out bad things (e.g. bacteria, endotoxins, or incompletely digested food proteins which can trigger allergic reactions); inflammatory changes can cause the tight junctions between cells in the GI wall to be “leaky.” Altered intestinal permeability explains why autoimmune disorders, but also Parkinson’s Disease, coronary artery disease, thyroid problems, fatty liver disease, skin disorders, and autism have been linked to the microbiome. Causes of leaky gut include food allergies/intolerances, bacterial or fungal overgrowth, glyphosate from GMO foods, and use of medication like NSAIDs that damage the intestinal mucosa.

The above article provides mechanistic support for the notion of leaky gut. We can test for leaky gut with the lactulose mannitol challenge, in which a patient drinks a special solution and then collects a couple of urine specimens. Alternatively, we can measure blood levels of zonulin, a substance released when intestinal cells are damaged.

Restoring intestinal permeability may require an elimination diet with exclusion of common food allergens, chemical additives, and plant lectins. Supplements that support intestinal healing include colostrum, glutamine, probiotics, and n-acetyl-glucosamine. For a deep dive on the relationship between leaky gut and autoimmunity, check out my recent interview with Dr. Amy Myers, author of *The Autoimmune Solution*.

## How medical students and doctors are indoctrinated to favor drug fixes

Authors of the authoritative medical textbook, *Harrison's Principles of Internal Medicine*, received \$11 million in payments from drug and device makers in the period 2009 to 2013, according to a recent analysis. Moreover, there were no disclosures of financial conflicts of interest as is usually required in published research papers. One of the *Harrison's* authors received a total of \$870,000 in research funding.

*MY INSIGHT:* *Harrison's* is the Bible of internal medicine. Originally published in 1950, it is now in its 19th edition (I used the 13th edition). During medical school and subsequent training, whenever confronted with a thorny question, we always cracked open this multi-volume tome to get the answer. Now medical students carry *Harrison's* apps on their mobile devices where they can quickly look up diseases with a keyword.

But *Harrison's* offers scant advice on diet and lifestyle as a solution for common medical problems. You won't see payola from the Broccoli Manufacturers of America or Nordic Track influencing the treatment algorithms in *Harrison's*. It's the researchers who come up with lucrative drug fixes who are accorded authoritative status in medical textbooks. No wonder med students complain they learn nothing about nutrition.

## Vitamin D might help IBS

Researchers at the University of Sheffield in the UK have demonstrated that vitamin D supplementation might be beneficial for patients suffering from Irritable Bowel Syndrome (IBS). Their findings "suggested supplements may help to ease symptoms which can include abdominal pain, bloating, diarrhea and constipation. Vitamin D was shown to have the most benefit on quality of life in IBS."

*MY INSIGHT:* What can't vitamin D help? It's amazing how pervasive its benefits are. The researchers are unclear why vitamin D supplementation should help IBS, but I have a feeling it's due to its anti-inflammatory properties.

More and more, we're coming to realize that IBS is not merely a stress disorder, but that it may be a less severe form of colitis in which the intestinal wall is irritated, but not grossly inflamed or ulcerated as it is in inflammatory bowel disease. Rather, microscopic changes are revealed when we look closely at biopsies from IBS sufferers.

Vitamin D helps to tamp down inflammation in colitis, much as it does in other autoimmune inflammatory disorders like rheumatoid arthritis and multiple sclerosis. Hence, it makes sense to supplement vitamin D in IBS.

### **Baby wipes contribute to childhood food allergy**

A "perfect storm" of influences explains why food allergy rates are soaring among young children, according to researchers at Northwestern School of Medicine. Mice with certain skin barrier mutations, similar to what some children with eczema have, were found to experience greater likelihood of acquiring food allergies when their skin was treated with soaps.

*MY INSIGHT:* This is a new angle on acquisition of food allergies. Thirty-five percent of children with food allergies have evidence of atopic dermatitis or eczema. It is thought they have defective skin barriers, which allow for the penetration of potential allergy-provoking proteins through the skin. We might dub this "leaky skin syndrome."

Strong soaps and detergents, especially the common additive sodium lauryl sulfate, present in commercial baby wipes, have the property of removing the "water-proofing" surface oils which protect the skin. Even when kids are not consuming allergy-triggering foods, their skin becomes a

conduit for dust and food allergens when touched by parents or siblings whose hands may carry even minuscule protein residues.

The solution is to limit use of skin products containing sodium lauryl sulfate, or at the very least, to wipe it off after use. A list of natural baby wipes can be found [here](#). Additionally, family members are encouraged to wash their hands to clean off lingering food residues before touching, wiping or bathing their infants or toddlers.

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