

IMPORTANT: Read This Disclaimer First

*This handout is not, and should not be, considered medical advice. It does not replace the 1-on-1 relationship with your Physician. The material on this handout is **for informational purposes only**. As each individual situation is unique, you should use proper discretion, in consultation with a health care practitioner, before undertaking the protocols described herein. **For example: your weight can dramatically affect the dosages you need to be using for each of these protocols, and only a skilled practitioner can support you with proper supervision.** The authors and publisher expressly disclaim responsibility for any adverse effects that may result from the use or application of the information contained herein.*

SCD Lifestyle GI Infections Handout

Remember: All Tests Are Not Created Equal

Most of our 1-on-1 private clients require reliable testing. These people are doing everything right with diet, supplements, and lifestyle... but just like me, they struggle with lingering digestive problems that don't add up. Worse yet, most of them have done stool testing in the past and the results were negative.

The truth is testing is really complex and challenging.

There's no perfect test out there (yet)

Each has its own accuracy level, reliability, positives, negatives, etc. And the most important thing for our clients is to avoid a false negative. If there's something there, we want to be able to find it.

The testing industry is changing a lot and so is our trust in labs. With everything in flux, the one constant stool test that continues to support our clients is from BioHealth (no affiliation).

Stool Testing: The BioHealth #401H GI Pathogen Screen

GI Pathogen Screen with H. pylori Antigen - 401H	
Parameter	Result
Stool Culture for Pathogens	
Source	Stool
Preliminary Report	Normal flora after 24 hours
Final Report	* Group D Enterococcus isolated *
Amount of Growth	Light
Stool for Ova & Parasites	
Ova & parasites #1	No Ova/Parasites detected
Ova & parasites #2	No Ova/Parasites detected
Ova & parasites #3	No Ova/Parasites detected
Ova & parasites #4	No Ova/Parasites detected
Trichrome Stain	Few protozoan forms of Blastocystis hominis seen on Trichrome Stain
Stool Antigens Test	
Cryptosporidium Antigen	Not detected
E. histolytica Antigen	Not detected
Giardia lamblia Antigen	Not detected

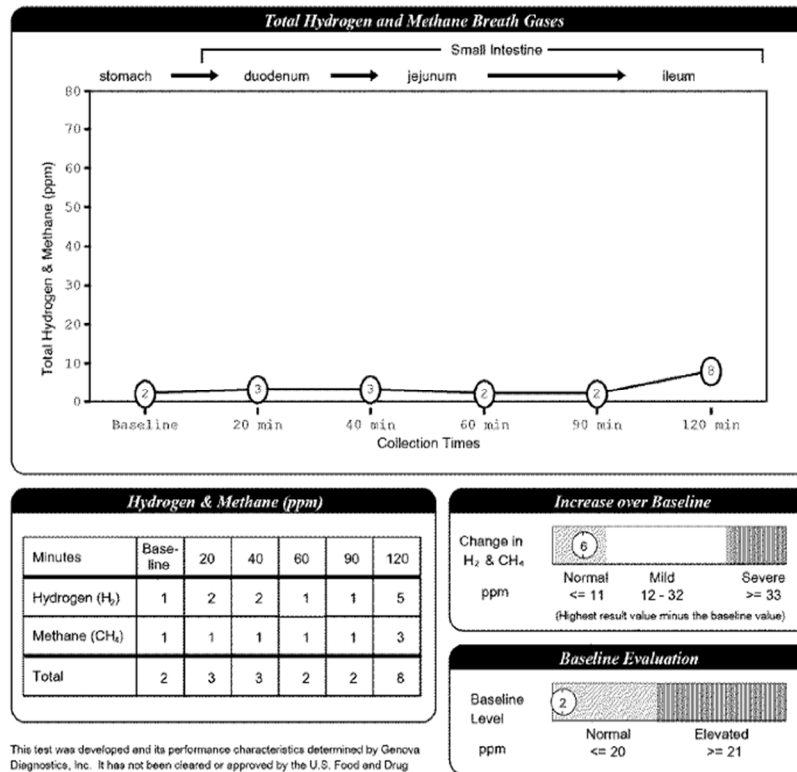
Fungi	No fungi isolated
C. difficile Toxin A	Not detected
C. difficile Toxin B	Not detected
Yeast	Light growth of Candida species isolated
Occult Blood	Not detected
Helicobacter Pylori Stool Antigen	
H. pylori Antigen	* Detected *

Next, we're also combining it with Doctor's Data Parasitology X3:

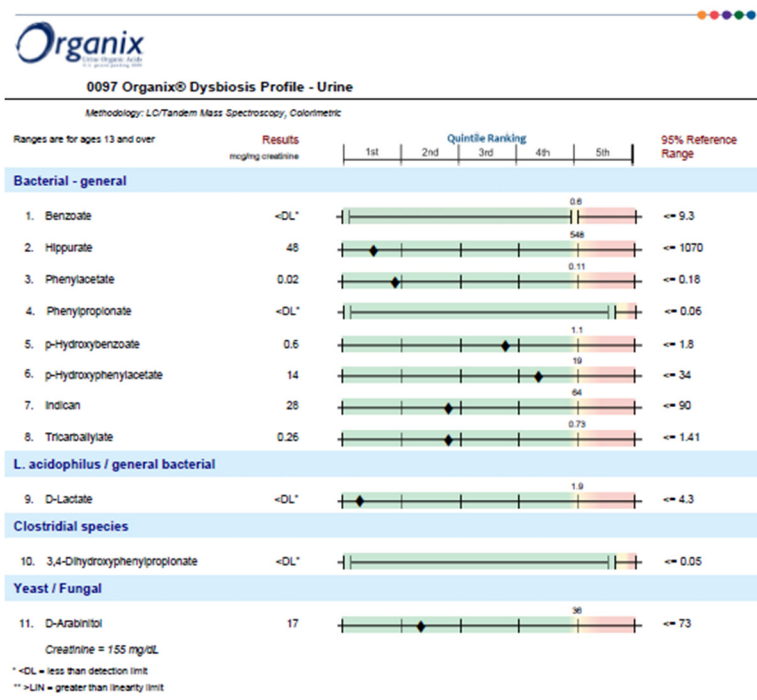
Parasitology, stool, x3

PARASITOLOGY/MICROSCOPY *		PARASITOLOGY INFORMATION	
Sample 1 None Ova or Parasites		<p>Intestinal parasites are abnormal inhabitants of the gastrointestinal tract that have the potential to cause damage to their host. The presence of any parasite within the intestine generally confirms that the patient has acquired the organism through fecal-oral contamination. Damage to the host includes parasitic burden, migration, blockage and pressure. Immunologic inflammation, hypersensitivity reactions and cytotoxicity also play a large role in the morbidity of these diseases. The infective dose often relates to severity of the disease and repeat encounters can be additive.</p> <p>There are two main classes of intestinal parasites, they include protozoa and helminths. The protozoa typically have two stages; the trophozoite stage that is the metabolically active, invasive stage and the cyst stage, which is the vegetative inactive form resistant to unfavorable environmental conditions outside the human host. Helminths are large, multicellular organisms. Like protozoa, helminths can be either free-living or parasitic in nature. In their adult form, helminths cannot multiply in humans.</p> <p>In general, acute manifestations of parasitic infection may involve diarrhea with or without mucus and/or blood, fever, nausea, or abdominal pain. However these symptoms do not always occur. Consequently, parasitic infections may not be diagnosed or eradicated. If left untreated, chronic parasitic infections can cause damage to the intestinal lining and can be an unsuspected cause of illness and fatigue. Chronic parasitic infections can also be associated with increased intestinal permeability, irritable bowel syndrome, irregular bowel movements, malabsorption, gastritis or indigestion, skin disorders, joint pain, allergic reactions, and decreased immune function.</p> <p>In some instances, parasites may enter the circulation and travel to various organs causing severe organ diseases such as liver abscesses and cysticercosis. In addition, some larval migration can cause pneumonia and in rare cases hyper infection syndrome with large numbers of larvae being produced and found in every tissue of the body.</p> <p>One negative parasitology x1 specimen does not rule out the possibility of parasitic disease, parasitology x3 is recommended. This exam is not designed to detect <i>Cryptosporidium</i> spp, <i>Cyclospora cayetanensis</i> or <i>Microsporidia</i> spp.</p>	
Sample 2 None Ova or Parasites			
Sample 3 None Ova or Parasites			
*A trichrome stain and concentrated iodine wet mount slide is read for each sample submitted.			
GIARDIA/CRYPTOSPORIDIUM IMMUNOASSAY			
	Within	Outside	Reference Range
Giardia intestinalis	<div>Neg</div>	<div></div>	Neg
Cryptosporidium	<div>Neg</div>	<div></div>	Neg
<p><i>Giardia intestinalis</i> (lamblia) is a protozoan that infects the small intestine and is passed in stool and spread by the fecal-oral route. Waterborne transmission is the major source of giardiasis.</p> <p><i>Cryptosporidium</i> is a coccidian protozoa that can be spread from direct person-to-person contact or waterborne transmission.</p>			

SIBO Testing: The Breath Test (Gold Standard)



Candida Testing: The Organic Acids #0097 Profile for Gut Dysbiosis



Remember: There's no one-size-fits all protocol

(THESE ARE JUST A GUIDE FOR YOU AND YOUR PRACTITIONER)

STOP: before you take action and work with a practitioner to execute these protocols...

There's a few really important things you can't forget before starting a GI infection protocol.

1) If you have Constipation - fix it ... remember when we're killing bad bugs, it's going to flood our body with toxins as they die, so your ability to detox is critical! The best way to detox? Poop, pee and sweat every single day. You can get things moving with more fat, Vitamin C, and Magnesium Citrate.

2) If you have problems with toxicity or a sluggish liver, you need to start a liver support protocol before beginning your GI Infection protocol. Remember it's best to do this before, during and at least 1 month after a GI protocol.

Liver Support for Detox:	with breakfast	with lunch	with dinner	updates to program:
Ovation Acetyl-Glutathione (60cap)	1		1	1 bottles

NOTE: [Click Here to purchase these from us if you'd like](#)

(1 bottle will last 30 days at this dosage - you'll likely need several bottles)

3) AGAIN – We Can't Stress This Enough

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4) IF IT GOES BAD

We highly recommend you gradually ramp into these protocols under guidance from your practitioner by taking small amounts of the products and upping them day by day until you're taking the entire protocol. If at any point in time you have a reaction that's too great to handle, which can happen when killing bad bugs, drop down to ½ dose for 3-4 days and see how you feel. If you feel better, ramp back up slowly over another 3-4 days. If at any time you can't handle how it makes you feel, STOP the protocol completely and contact the practitioner you're working to decide next steps.

The H. Pylori Protocol

60- Day H. Pylori Protocol	Upon arising	With breakfast	With lunch	With dinner	Amount Needed for Protocol:
Ortho Pyloricil – 60 caps		3		3	6 Bottles
Klaire Labs Interfase Plus - 120 caps		3		3	3 Bottles
Monolaurin – 90 caps (600mg)		2	2	2	4 Bottles
NAC - (900mg)		1	1	1	2 Bottles
Klaire Therbiotic 1 serving	1				1 Bottle

The Blastocystis Hominis protocol

60-Day Blastocystis Hominis Protocol	Upon arising	With breakfast	With lunch	With dinner	Amount Needed for Protocol:
Paracid Forte - 90 caps		2	2	2	4 Bottles
DFH Oil of Oregano - 60 caps		2	2	2	6 Bottles
Artemisinin		1	1	1	2 Bottles
Klaire Therbiotic 1 serving	1				1 Bottle

The Cryptosporidium Protocol

60-Day Crypto Protocol	Upon arising	With breakfast	With lunch	With dinner	Amount Needed for Protocol:
Paracid Forte - 60 caps		2	2	2	4 Bottles
DFH Oil of Oregano - 60 caps		2	2	2	6 Bottles
AP Mag - 60 caps		2	2	2	6 Bottles
Klaire Therbiotic 1 serving	1				1 Bottle

The Candida Protocol

30-Day Candida Protocol	upon arising	with breakfast	with lunch	with dinner	Amount Needed for Protocol:
Candidid Forte – 90 caps		4	4	4	4 Bottles
DFH Oil of Oregano - 60 caps		2	2	2	3 Bottles
S. Boulardii (5 Billion CFU's)		1	1	1	
Klaire Therbiotic 1 serving	1				1 Bottle

The SIBO Protocol Option 1

60-Day SIBO Protocol Option 1	Upon arising	With breakfast	With lunch	With dinner	Amount Needed for Protocol:
Paracid Forte - 90 caps		2	2	2	4 Bottles
DFH Oil of Oregano - 60 caps		2	2	2	6 Bottles
Monolaurin (600mg)		2	2	2	5 Bottles
Interphase Plus		3		3	3 bottles
Prescript Assist Probiotic		1		1	2 bottles

The SIBO Protocol Option 2

60-Day SIBO Protocol Option 2	upon arising	with breakfast	with lunch	with dinner	Amount Needed for Protocol:
Allimed (200ct)		1	1	1	1 Bottle
Berberine Sulfate (Vital Nutrients)		3	3	3	9 bottles
ParaBotanic		4		4	4 bottles
Interphase Plus		2	2	2	3 bottles
Prescript Assist Probiotic		1		1	1 Bottle

NOTE: Allimed can be found here: <http://optimalhealthusa.com/Allimed.html>

Remember: Retest 30-60 Days after Completing any Protocol

These protocols work well, but nothing is 100% and everyone is in a very different situation. Always make sure to retest 30-60 days after completing a protocol and verify that is in fact gone. In some cases, new infections that were dormant can show up and they will need to be addressed.

If the protocol didn't work, it's time to start looking for your limiting factor. Many times those in severe adrenal fatigue need to work through an adrenal protocol before they are ready to kill off a GI Infection. Their immune system just wasn't strong enough yet and it's time to wait until natural hormone production improves and try again. Never give up!

If You Need a Skilled Practitioner...

We highly recommend working with a Functional Medicine Practitioner who was trained in the Kalish method by our mentor Dr. Dan Kalish. They're going to have experience using protocols like this and are well suited to help you.

Need help finding someone?

We are no longer doing 1-on-1 consulting, but we recently spent months interviewing world class candidates and hand-picked two Kalish Trained Functional Medicine Practitioners. They are training with us and are sharing their valuable clinical experience to make our practice even better. To join our consulting practice and you can book an appointment with our new practitioners here:

<http://scdlifestyle.com/consulting/>

In good health,

- Jordan and Steve