

# Multiple Food Intolerance

Multiple food intolerance can cause horrendous problems for hypersensitive sufferers. Reactions can occur any time between the food being eaten and excreted, and it is these delayed reactions that cause so much confusion.



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The charity for environmental illness

## Allergy or Intolerance?

When reactions to foods are immediate, it is difficult to distinguish between

intolerance and true food allergy. Food intolerance describes any reproducible, adverse reaction to a food substance, and nobody is sure why or how it occurs. In contrast, a true/ classic allergy causes the immune system to release IgE antibodies that can be measured. In extreme cases a true/ classic food allergy can result in life threatening anaphylactic shock, which requires immediate medical assistance. If there is any confusion as to whether the reaction is due to intolerance or allergy, avoid the suspect food completely and see your GP for testing. Some of the first signs of anaphylactic shock include a feeling of warmth, flushing, tingling in the mouth or a red, itchy rash. It can cause symptoms such as light-headedness, shortness of breath, severe sneezing, anxiety, stomach or uterine cramps, vomiting and diarrhoea. In severe cases patients could experience a drop in blood pressure, resulting in shock and loss of consciousness.

## Which Foods?

It is possible to become intolerant of any foodstuff, including oils, seasonings and herbs. Although everyone is different, individuals are more likely to become sensitive to the foods that are eaten most often. In addition sufferers may find they react to food that is botanically similar, for example potatoes and tomatoes. These botanical relationships are shown in Food Family Charts. All suspected foods should be tested twice before exclusion in case symptoms are actually caused by environmental factors such as packaging, ingredient contamination or airborne allergens.

## Symptoms

It seems likely that several mechanisms in the body are responsible for creating the diverse range of symptoms of food intolerance. Reactions are enormously varied and can include physical, behavioural and emotional symptoms such as bloating, headaches, asthma, eczema, hives, hyperactivity, depression, aggression, euphoria, fatigue and exhaustion. Food intolerance is also known to exacerbate symptoms in specific illnesses such as Crohn's disease, ulcerative colitis, multiple sclerosis, diabetes, autism, alcoholism, coeliac disease, chronic fatigue syndrome and chemical sensitivity. It is common for intolerances to go unnoticed for several years until they become so bad the effects are inescapable.

## Diagnosis

While GPs can easily test for allergies, the same tests rarely show up food intolerance. Some food intolerance reactions are immediate and unmistakable but reactions that occur hours or days later may go unnoticed, creating a riddle of poor health. The first step to establishing whether food intolerance is a factor is keeping a diary of everything that is eaten. Include approximate times and any symptoms or changes in mood. Review the diary after a couple of weeks to see if any patterns emerge. Food/ Symptom diaries are an invaluable source of evidence when consulting your GP or dietician. Some supportive GPs may be able to help you carry out an Elimination Diet. This involves avoiding all suspect foods for a period of time and then reintroducing them one by one to evaluate reactions. Avoid trying out this sort of diagnosis by yourself, as occasionally it can lead to even more complications and sensitivities. (For more information see the book *Food Allergy and Intolerance* by Jonathan Brostoff and Linda Gamlin.) There are also several non-medical tests that claim to diagnose food and chemical sensitivities, but none have yet proved 100% accurate in independent trials. They include ELISA, ALCAT, Vega testing, Applied Kinesiology and dowsing. The accuracy of many alternative methods of testing often depends on the experience of the practitioner. However in the absence of any medical alternatives

such tests can provide some guidelines as to which foods to suspect. Once you have the results, you can try excluding the food and assessing reactions yourself.

## **Treatment**

Once culprit foods have been identified, they should be avoided. However they do need to be replaced with something else otherwise the resulting lack of nutrients is likely to cause even more sensitivities. Replacing foods is easy if only a few need to be cut out, but occasionally hypersensitive sufferers face the terrifying ordeal of becoming intolerant of virtually all foods. In this case, food substitute drinks are available – see your GP for details, and the helpsheet ‘Total Food Intolerance’ from MCS-Aware. When problem foods have been eliminated, sufferers of multiple food intolerance should consider organising their remaining ‘safe’ foods into a Rotation Schedule/ Diet. Since the body is likely to become sensitive to any food that is eaten too regularly, a Rotation Diet involves organising ingredients into a planned menu to ensure nothing is eaten more often than every 4 days. If food is not being eliminated efficiently, rotation schedules may need to be considerably longer to ensure each food is only present in the body once. Botanically related foods may need to be eaten on the same day, or even at the same meal. A rotation diet is not a cure but it considerably cuts down the chances of developing more intolerances. Your GP should be able to refer you to a dietician to check your resulting menu is nutritionally adequate. More information is available from MCS-Aware.

Avoiding problem foods may alleviate symptoms temporarily, but if food intolerance persists it is a good idea to begin investigating any underlying health problems. It is useful to start treating any other diagnosable illnesses and consider being tested for bacterial, viral, parasitic or yeast (candida) infections. Leaky gut, digestive enzyme deficiency, malabsorption or malnutrition can all exacerbate or even be the sole cause of food intolerance.

Having dealt with these factors, most people find their intolerances improve alongside their general health. If this is not the case, some individuals have success in trying different sorts of desensitising treatments such as Neutralization, Desensitisation, Provocation-Neutralization Techniques, or Enzyme Potentiated Desensitisation. Most of these techniques involve administering small, measured amounts of the allergic substance over a period of time, although because the exact cause of food intolerance is not known, not every treatment works for every person.

## **Recovery**

In most cases food intolerance is reversible, but it does depend on the underlying reason for the initial sensitivity. Once culprit foods have been identified and underlying health issues resolved, foods can be reintroduced into the diet. There appear to be two types of intolerance: cyclic and fixed. Fixed intolerances are likely to persist for several months or even years, but cyclic intolerances usually disappear once the food has been avoided for three to six weeks. All excluded foods should be re-tested approximately every 6 months to see if the sensitivity persists – there is no need to keep avoiding a food if it does not provoke symptoms. Always start by testing foods you’ve had the longest break from. Reintroduce foods one at a time, and keep a detailed Food/ Symptom Diary in order to track any new intolerances. Remember to organise all new foods into a rotation schedule to minimise chances of recurring sensitivity.

Sampling problem foods can be incredibly daunting, especially if initial reactions were severe, but food intolerances DO change, especially when your health begins to improve. In turn, a more varied diet should help to improve your health, so it really is worth trying to reintroduce foods. If a psychological barrier is holding you back, consider some form of counselling. Non-medical types of test can be very useful to lessen the risk of an unpleasant reaction, but remember the tests are not foolproof.

Much more information including *What’s Making You Ill*, *Symptom Diaries*, *Total Food Intolerance*, and more about food, chemical and electro- sensitivities is available at [www.mcs-aware.org](http://www.mcs-aware.org). Email: [info@mcs-aware.org](mailto:info@mcs-aware.org)  
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