

Patient:

Date:

Tuesday 2<sup>nd</sup> April 2019

**Comments:**

- You came to see me saying you are “*generally in good health*” but still mentioned a few complaints: weight gain of 10 kilos in the last 5 years; shoulders and lower back pains; plus feeling globally “*unfit*”.
- This comprehensive biological assessment has uncovered three main issues. In first, we notice excessive production of gut endotoxins (lipopolysaccharide/LPS) reflecting intestinal inflammation and ‘*dysbiosis*’ (imbalanced gut microbial community) plus implying an increased intestinal permeability or ‘*leaky gut*’.
- Such problem frequently feeds the two other problems identified here: global inflammation (us CRP) and more precisely significant mucosal inflammation (high immunoglobulins A/IgA) shown page 3/7; oxidized LDL ‘*bad*’ cholesterol reflecting what we call ‘*oxidative stress*’ or, if you prefer ‘*rusting*’ - see page 4/7.
- All these abnormal findings together with corresponding dietary mistakes easily explain your complaints and I have designed this 4-month program to address them. It combines a totally customized treatment with numerous antioxidants and specific phytonutrients to fight LDL cholesterol oxidation, plus several dietary changes based on biological results plus on two genotypes, namely **apoE** ‘E3/E4’ and **OGG1** ‘SC’.
- The presence of an E4 allele implies an exaggerated impact of high cholesterol foods such as **coconut oil** and **dairy products**; fortunately, you do not eat **red meat**. Keeping glycosylated haemoglobin (HbA1c) low represents another key goal, which means you need to reduce **fast sugars** and **fructose-rich drinks**. **Olive oil, vegetables, oily fish, and crustaceans** are highly recommended, as well as regular **exercise**.
- Importantly, you significantly react to **gliadin**, sub-protein belonging to the **gluten** complex, with IgA antibodies; plus we must keep in mind that **gliadin** automatically increases gut permeability whatever the immune reaction is. You have no other choice than going strictly **gluten-free** for the next 4 months, plus you should refrain from consuming alternative **grains** (especially **rice**) as well as **hot & spicy foods**.
- Second relevant ‘variant’ genotype for the diet relates to OGG1. Your result ‘SC’ requests implementing **intermittent fasting**, which means sticking to two main meals only, ideally with in an 8-hour window that allows for 16-hour fast during which you should of course drink water, black coffee, green tea, etc.
- You will also follow my instructions based on the fatty acid status, which shows a need for more good fats coming from **oily fish, nuts, seeds, olive oil, avocados, and hemp seed oil**: see highlighted chart. To help you manage such changes, I suggest you see my nutritionist who will provide a nice **eating-plan**.
- Coming back to your treatment, we will be supporting your metabolic drive thanks to combined thyroid and adrenal treatments largely imposed by compensating a huge stress that: a) blocks conversion from thyroid prohormones T4 into active hormones T3 (hence giving GTA); b) drains adrenal glands as shown by depleted global adrenal precursor, the ‘prohormone’ pregnenolone (giving daily compound capsules).

Georges MOUTON MD