The H. pylori and Stomach Ulcers Report

Empowering You with Knowledge and Solutions for Good Health

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1. Introduction

We would like to extend a warm word of thanks to you for acquiring this Report.

The reason why we have decided to share the contents in this Report with you is quite simply because we are innately compassionate and truly do care about your health and well-being. Furthermore, we have witnessed an alarming rate of increase in the number of people around the world who are suffering unnecessarily from persistent pain and discomfort caused by the world’s most destructive bacteria called H. pylori. This hardy bacterium is also the primary cause of Stomach Ulcers and several other gastrointestinal tract diseases and infections.

Here are the key points we wish to bring to your attention…

- How you got infected with H. pylori – Page 9
- How you can avoid infecting others – Page 9
- How to avoid getting scammed by inappropriate H. pylori tests – Page 11
- Exactly why drug therapies have a 70% failure rate – Page 12
- The ravaging negative effects of drug therapies used for H. pylori – Page 13
- Why acid blockers are so dangerous – Page 14
- Different types of ulcers caused by H. pylori – Page 21
- Why your own blood can be a dangerous painkiller – Page 25
- Other GI tract disorders related to H. pylori infections – Page 20

H. pylori is responsible for causing chronic infection and related diseases in billions of people around the world. H. pylori is such a threat that the World Health Organization's (WHO) International Agency for Research into Cancer (IARC) has classified H. pylori as a “Class-I-Carcinogen”.

H. pylori is the primary cause of Peptic, Gastric and Duodenal Ulcers in 80 to 90% of people infected with it, of which 50% of those will suffer from Gastric cancer. Gastric cancer is fast becoming the leading cause of deaths worldwide.

These statistics represent a significant health threat and for those who have been diagnosed with H. pylori, this problem deserves immediate attention.

This, one-of-a-kind, Report is an essential guide that will provide all the knowledge you need to know about H. pylori and how it can cause Peptic, Gastric or Duodenal Ulcers and several other diseases and infections. The Report also shares an important and yet often ignored issue about “Taking Direct Control of your own Health” and how to find, and then work together with, a suitable Health Care Professional.

This Report is largely based on successful Doctors experiences who use tried and tested protocols for diagnosing and then treating their patients, who present with H. pylori infections, stomach ulcers and other associated symptoms.

We, therefore, believe that if you read this Report it will almost certainly have a profoundly positive impact on your future health and quality of life.

If you are currently struggling with H. pylori, Peptic, Gastric or Duodenal Ulcers or associated disease and feel you are making little or no progress, even though it may have been for several years already, then please don’t despair because what you are about to read in this Report is going to provide you with the very best opportunity to achieve future good health.

So if you are determined to get healthy again, please get comfortable and start reading!!!

We really want to give you REAL HOPE and sustainable good health in the future.
Simply, read as much as you would like to and then refer to the successful treatment program we have provided for you on page 15 of this Report.

We wish you all the best and trust that the knowledge you will acquire from this Report will enable you to find peace and good health.

Sincerely,

The Natural Health Team
2. Taking Control of your own Health

First and foremost, there are too many people around the world that put their health in the hands of someone else. Just think about this a minute and ask yourself - would you normally trust a stranger with anything that could cause devastation in your life? Would you trust a stranger with your Credit Card when you have given them your pin number? The bet is that your answer is a definite NO. So the question is why do you place so much trust in anyone else when it comes to your health? Your health is critical to your future.

There is only one way to put an immediate stop to this and that is “Take Control of your own Health” and as quickly as possible.

It really isn’t difficult and the benefits in doing so are immeasurable. If you have already been suffering with bad health for a while we are sure that you will know precisely what we are talking about here. We bet you have been through the mill with many different treatments and are probably feeling far worse off now than when you first got ill.

We wouldn’t be surprised if you wake up every morning feeling an overwhelming sense of despair when you feel the same old aches and pains again and again. Well, you are not alone! We have seen this so often and as such we are determined to help you to become a victor rather than another victim.

The first step is for you to realize that you (and only you) are responsible for your Health.

These are our guidelines for you and everyone else …

“Take Direct Control of your own Health”. You might ask why? This is simply because we have found that our clients, who are in control of their own health, are generally far healthier than the ones that aren’t. We also find that they are less prone to getting sick in the first place because they tend to eat a healthy diet, exercise regularly and are far more positive about life in general.

Here are 6 tips for you…

1. When you decide to take control of your own health, make sure that you stick to your decision.
2. When you start feeling ill, deal with it as quickly as possible.
3. Supplement your diet with an appropriate range of essential vitamins and minerals.
4. Build up your own knowledge base about the illnesses or diseases you or family members are most prone to. The more you know the better. This is vital to being able make informed and confident decisions in future.
5. When looking for suitable treatments, always look for natural treatments that are supported by clinical and scientific evidence that they actually do work. Without this most claims made by the manufacturers are worthless.
6. Find a Doctor or Health Care Professional that is open minded and is willing to work together with you. This is an important part of this journey and you should rely on their experience for Diagnosis, Pathological Testing and general medical advice.

Once you have taken direct control of your health you will feel so much more confident about the future. After all good health is your Divine right and you deserve to live a long, happy, healthy and prosperous life.

That’s all great, but there is still one more very important aspect you need to add to the equation… you need to find a suitable Health Care Professional.
3. Finding a Health Care Professional

To complete your new health oriented structure, I encourage you to go and find a good Health Care Professional who you can really relate to and trust. It is extremely important to find a practitioner who will listen to you and be prepared to be part of your healing, one that holds hope as an ideal, and not Fear of disease.

**Good health is your Divine right. Remember**, it is your responsibility and you need to remain in direct control of it. Practitioners in Complimentary and Alternative Medicines, like licensed Chiropractors, Naturopaths, Acupuncturists, Nutritionists, and Homeopaths are generally less rigid and far more progressive in holistic therapy, natural healing and herbal alternatives.

When you have learnt something new please share it with your Health Care Professional and seek their confirmation and support before rushing into it. Remember that Health Care Professionals are highly skilled in diagnosing, testing, monitoring, and advising on most aspects of your health and alternative treatments. The key is for you and your Health Care Professional to work closely together, with the common purpose focused on your good health.

To find a suitable Health Care Professional I suggest that you do so by visiting the websites of various Associations for Naturopathic Doctors, Herbalists, Chiropractors, Acupuncturists, etc. in your country. Most of these associations provide a database where you enter your zip or post code and state/ county/ province and then provide a list of their members who have practices closest to your home.

Once you have located one or more nearby Healthcare Professionals, or in fact found someone with a good reputation for dealing with your specific kind of problem, set up an interview. All Healthcare Professionals are extremely busy, so be prepared to pay for the time you book for your interview. This is YOUR chance to find out whether or not you are going to work well with the Doctor. If such an interview is NOT granted, that’s not your Doctor! Did you not choose your own Bank, Mortgage Company, Accountant? So choose your Doctor carefully, your life depends on it!

**One Practitioner who we fully endorse is David Hompes who is an Expert in Digestive Health. He can be contacted via his website** [http://h-pylori-symptoms.com](http://h-pylori-symptoms.com)
4.1 What is Helicobacter Pylori (H. pylori)?

Helicobacter Pylori is a spiral shaped bacterium that lives in the stomach and duodenum (section of intestine just below the stomach). It has a unique way of adapting in the harsh environment of the stomach.

The inside of the stomach is bathed in about half a gallon of gastric juice every day. Gastric juice is composed of digestive enzymes and concentrated hydrochloric acid, which can readily tear apart the toughest food or microorganism. Bacteria, viruses, and yesterday’s steak dinner are all consumed in this deadly bath of chemicals. It used to be thought that the stomach contained no bacteria and was actually sterile, but H. pylori changed that. The stomach is protected from its own gastric juice by a thick layer of mucus that covers the stomach lining. H. pylori take advantage of this protection by living in the mucus lining.

Once H. pylori is safely ensconced in the mucus, it is able to fight the stomach acid that does reach it with an enzyme it possesses called urease. Urease converts urea, of which there is an abundant supply in the stomach (from saliva and gastric juices), into bicarbonate and ammonia, which are strong bases. This creates a cloud of acid neutralizing chemicals around the H. pylori, protecting it from the acid in the stomach. The reaction of urea hydrolysis is important for diagnosis of H. pylori by the breath test.

Another defense H. pylori has is that the body's natural defenses cannot reach the bacterium in the mucus lining of the stomach. The immune system will respond to an H. pylori infection by sending white cells, killer T cells, and other infection fighting agents. However, these potential H. pylori eradicators cannot reach the infection, because they cannot easily get through stomach lining. They do not go away either, though, and the immune response grows and grows.

Polymorphs die, and spill their destructive compounds (superoxide radicals) on stomach lining cells. Extra nutrients are sent to reinforce the white cells, and the H. pylori can feed on this. Within a few days, gastritis can occur that can lead onto the formation of a peptic ulcer. It may not be H. pylori itself which causes peptic ulcer, but the inflammation of the stomach lining; i.e. the response to H. pylori.

4.2 How H. pylori Survives in Acid

H. pylori are the only bacterium in the stomach on earth that cannot be killed by hydrochloric acid.

So how does this incredibly destructive bacterium survive in acid?

- H. pylori are able to survive gastric acids due to its ability to produce an enzyme called urease. Through a chemical process, urease can neutralize stomach acid, making it easy for the bacteria to survive in its own acid free zone.
- Because of their corkscrew shape, the bacteria can easily penetrate the stomach’s protective mucous lining.
- The ‘antacid’ effect of H. pylori fools your stomach into producing more acid, which then makes your stomach cells more susceptible to damage through exposure to acid and pepsin.
- Too much acid and pepsin can damage a healthy and unprotected stomach lining and this is basically how ulcers are formed.

You may think that if H. pylori are capable of surviving in acid, then it has to be invincible, right? Thankfully this is not the case and although it is difficult to treat it can be done.
4.3 How H. pylori are transmitted and how you can get re-infected?

H. pylori are believed to be transmitted orally. Many researchers think that H. pylori is transmitted orally by means of fecal matter through the ingestion of waste tainted food or water. In addition, it is possible that H. pylori could be transmitted from the stomach to the mouth through gastro-esophageal reflux (in which a small amount of the stomach’s contents is involuntarily forced up the esophagus) or belching, common symptoms of gastritis. The bacterium could then be transmitted through oral contact.

Scientific evidence proves that H. pylori can reside in oral cavities. As such oral-oral transmission of H. pylori is possible through kissing on the lips. Another possibility is that similar bacteria to H. pylori, in pets, called Helicobacter Canis (H. canis), can be transferred to humans by cats and dogs that tend to lick you on your hands or face. Oral-oral transmission up until recently has not been regarded as a big threat, **but it actually is.**

If you or your spouse or children have been tested positive for H. pylori it is important to test your entire family for presence of H. pylori. If you do not do this there is risk of H. pylori re-infection to the treated family member and also an on-going re-infection of all family members. It is good practice to prevent anyone outside of your immediate family group from kissing your children on the lips. This includes grandparents.

Scientific evidence also proves that H. pylori can be transmitted through sexual activity and particularly from oral sex. However, new evidence suggests that H. pylori can also be transmitted through normal sexual activity because the vagina can accommodate and sustain H. pylori. It is also possible to re-infect partners or spouses with H. pylori through sexual activity.

H. pylori transmission is associated with lower socioeconomic status and poor hygienic conditions. Therefore, we should keep in mind the possibility that these bacteria might be transmitted via contaminated water and food. Dairy and Poultry food products are a particularly noteworthy source of H. pylori. It is therefore very important to cook eggs for longer than 3 minutes to prevent infection of H. pylori.

It should also be noted that H. pylori infection is hereditary and that it does run in families. About half of the infections are hereditary and the rest are acquired from the environment during childhood.

Our advice is that if you are diagnosed with H. pylori it is important to have your spouse or partner and other family members tested as well. The reason for this is that once you have completed a successful eradication treatment, the last thing you want is to be re-infected by the oral-oral transmission from our spouse or children. Besides that it is important to reduce risk of re-infection by breaking the ongoing cycle of transmission within a family unit.

Most recently, if has been discovered that H. pylori can and does colonize in the gall bladder and bile duct. This is a significant factor that needs to be considered in treating or eradicating H. pylori, particularly if you have had H. pylori for more than two years. For treatment in these cases it is vital to follow our treatment program otherwise you will keep on testing positive for H. pylori.

4.4 Tell Tale Symptoms of H. pylori

The following symptoms/syndromes are known to be related to H. pylori but we would like to point and make it quite clear that the many symptoms associated with Gastrointestinal Tract diseases and infections do overlap extensively and can cause patients great confusion.

- acid reflux
- acne
- B-12 & folic acid deficiency
- bad breath
- burping/belching
- calcium deficiency
o cancer
o chronic pain, including in the back and between the shoulder blades
o constipation
o depression
o diarrhea
o fatigue
o fibromyalgia
o gas, morning, painful or fowl smelling
o gastritis - inflammation of the stomach lining
o gallstones/gallbladder disease
o headaches
o heartburn
o indigestion
o intense hunger
o iron deficiency
o low stomach acid
o malabsorption
o migraines
o nausea
o poor sleep
o rosacia
o stomach bloating
o ulcers
o upper abdominal pain

It is quite possible that after the H. pylori bacteria has been successfully eradicated; you may have similar symptoms after treatment as you did before treatment. If this is the case then you will need to ask your Health Care Professional to further diagnose what may be causing these symptoms. I discuss this further on page 28 in the section on ‘Other Digestive Disorders and Infections’

4.5 The Latest H. pylori Facts

o 75% of the world's population is infected with the H. pylori bacterium. That means that right now over 4.6 billion people are infected worldwide.

o 816 million people alive right now MAY develop a stomach ulcer caused by an infection of H. pylori.

o Almost 70% of H. pylori strains found in the West are now resistant to the antibiotic metronidazole, and nearly 15 per cent are also resistant to clarithromycin. Yet both of these drugs are still heavily prescribed in the treatment of ulcers.

o Over 50% of gastric cancer patients are infected with H. pylori.

o Up to 90% of all stomach ulcers are caused by an infection of the H. pylori bacterium.

H. pylori do not cause ulcers in every infected person. The reason for this is unknown. It is thought that ulcers could be caused by a combination of factors, such as a stressed out lifestyle, eating habits and an infection of H. pylori. This is difficult to prove because there are so many variants particular to individual cases and to different cultures.

4.6 Are you infected with H. pylori?

Research shows that H. pylori are present in 75% of the world’s population. When you consider this you can see there is a good chance you may be infected, especially if you have the symptoms of a stomach ulcer.

Also when you consider that nearly 90% of people with stomach ulcer symptoms are infected with this bacterium, as are 50% of new patients with stomach cancer, then you may need to get a proper diagnosis to be on the safe side.
These facts we have listed below are not to scare you - they are simply to give you an idea of the magnitude and severity of H. pylori infections - this is a hardy little bug and difficult to get rid of, if you opt for a conventional drug therapy that your doctor will probably prescribe.

The only way to be sure if you are infested with H. pylori is to have a Laboratory Test done. If you haven’t had a test done yet then I suggest you contact your Health Care Professional to arrange to have a test done. There are a number of tests that are available to test for H. pylori infection.

4.7 Watch out for the scam in Testing for H. pylori

H. pylori tests are not always accurate and for your own good I urge you to make sure that your diagnosis is based on an accurate test. Doctors are often misled about what tests to use for detecting H. pylori, so watch out for the scam that is going on. The ONLY test that we recommend is the HpSA Test because it is quick, very accurate and the least non-invasive to you. The endoscope and biopsy is expensive and needs to done in a hospital and yet it does not provide any additional advantage. We do not recommend the Breath Test or Blood Test as they simply do not provide the level of consistency or accuracy your health deserves.

Four tests are used to detect H. pylori:

- **Blood antibody test.** A blood test checks to see whether your body has made antibodies to H. pylori bacteria. If you have antibodies to H. pylori in your blood, it means you either are currently infected or have been infected in the past.

  **NOTE:** A blood test does not provide a definitive result on the status of H. pylori. This is because antibodies remain in the blood for between 3 to 5 years after a successful treatment. What it is used for is to test the antibody level at least to show that at each time point antibodies are lower than at the original baseline (before treatment) level.

- **Urea breath test.** A urea breath test checks to see if you have H. pylori bacteria in your stomach. The breath test is not always available or accurate because there are specific requirements you need to adhere to before this test is used. Any incompliance of these requirements can result in a false negative or positive result. **NOT RECOMMENDED**

- **HpSA (Stool antigen test).** A stool antigen test checks to see if substances that trigger the immune system to fight an H. pylori infection (H. pylori antigens) are present in your feces (stool). Stool antigen testing may be done to help support a diagnosis of H. pylori infection or to determine whether treatment for an H. pylori infection has been successful. **This is THE ONLY accurate test and the least invasive to you too, HIGHLY RECOMMENDED.**

- **Stomach biopsy.** A small sample (biopsy) is taken from the lining of your stomach and small intestine during an endoscopy. Several different tests may be done on the biopsy sample. For more information, see the medical test Upper Gastrointestinal Endoscopy. This is a highly invasive test and requires preparation before the test. **NOT RECOMMENDED**

4.8 The 3 Big Reasons why Drug Therapies Fail

No. 1 - Side Effects

When you take any of the prescribed drug therapies for H. pylori or any other illness for that matter, you will suffer from side-effects - there is no question about that. Side effects can be so bad that many people have to abandon the treatment early.

No.2 - Difficult Treatment Regimen

The difficulty you will face is strictly sticking to a 10 or 14 day drug treatment is another reason to cause these therapies to fail. Drugs prescribed in these treatments will require that doses be taken up to four times each day – with a total of 20 to 24 pills a day!!
No.3 – H. pylori has a high resistance to antibiotics

H. pylori’s resistance to antibiotics is increasing steadily. Almost 70% of H. pylori strains in the West are now resistant to the antibiotics metronidazole and clarithromycin, both of which are prescribed in Triple and Quadruple Therapies.

4.9 Drug Therapies have a 70% Failure Rate

Let’s have a look at those different drug therapies now, but also have a quick look at the complex treatment regimens of these therapies BEFORE you end up paying a fortune for a course of medication that you know you probably won't be able to stick to, and which ALSO has many side effects that you may not be able to cope with.

Dual Therapy

Dual therapy involves the use of an antibiotic and a PPI (Proton Pump Inhibitor) like Prilosec or Nexium. PPI's help reduce stomach acid which in turn helps promote the healing of peptic ulcers or inflammation. (This in turn causes indigestion and the food you eat to begin rotting and fermenting in your stomach, that then causes a dysfunctional digestive system and other diseases like Acid reflux/ GERD.)

Vital Statistics

Side Effect Rating – Low to Medium
Claimed Cure Rate – 70% (only if you complete the course)

Actual Cure Rate – 20 to 30% (taking into account all those who started the treatment – figures include those who could not finish the course due to side-effects or who did not follow the treatment regime properly)

Doctors and patients who prefer to handle the use of fewer drugs, may find that they are wasting their time with this therapy as H. pylori has become immune to most single doses of antibiotics. Dual therapy has a claimed cure rate of around 70% for peptic ulcers, although we estimate that this is closer to 30% at best after talking to doctors who have had very little success in the past with this. As a result, Dual therapy is hardly prescribed any more.

Triple Therapy

Triple therapy became the preferred drug treatment for peptic ulcers in 1998 and also for patients with H. pylori gastritis. This treatment now involves a 10-day or 2-week course of two antibiotics along with a Proton Pump Inhibitor (like Prilosec or Nexium) or an acid blocker.

Vital Statistics

Side Effect Rating – Medium to High
Claimed Cure Rate – 80 to 85% (only if you can complete the course)

Actual Cure Rate – 30 to 40% (taking into account all those who started the treatment - figures include those who could not finish the course due to side-effects or who did not follow the treatment regime properly)

The aim of Triple Therapy is to balance side-effects with effectiveness. This treatment is fairly complicated and it may have you taking up to 20 pills a day. Can you imagine what that is doing to your system? To start with, try nausea, dizziness, vomiting, headaches, diarrhea, dark stools, metallic taste in the mouth, and yeast infections in women. We are talking about major negative side-effects here – in fact, the side effects are bad enough to put most people off finishing a 2-week course.

Quadruple Therapy

Even more complicated and more difficult to take, than Triple Therapy, and with even more side-effects. Quadruple Therapy is also a two week drug treatment for stomach ulcers. And yes you guessed right, this is another chemical cocktail of two antibiotics, a proton pump inhibitor, as well as a further cytoprotective agent which offers your stomach lining protection if you really have to take aspirin or other NSAIDs. The risk of side effects with Quadruple Therapy is higher than with Triple Therapy.

Vital Statistics

Side Effect Rating – High
Claimed Cure Rate – 85% to 90% (if you can complete the course)
Actual Cure Rate – 25 to 40% (taking into account all those who started the treatment - figures include those who could not finish the course due to side-effects or who did not follow the treatment regime properly)

The difference between Triple and Quadruple Drug Therapy

The most common drug therapy prescribed by doctors for peptic ulcers is Triple Therapy. In cases when it is imperative for you to have to take NSAIDs (anti inflammatory drugs) for another life threatening medical condition, then a further drug is added to your Triple Therapy. This is known as Quadruple Therapy. Dual Therapies have been phased out because they are really ineffective and outdated.

4.10 The Ravaging Negative Side Effects of Drug treatments

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<th>DRUG BRAND NAMES</th>
<th>GENERIC NAMES</th>
<th>NEGATIVE SIDE EFFECTS</th>
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<td>Antacids</td>
<td>Neutralizes stomach acid</td>
<td>Tagamet, Zantac, Mylanta, Tums, Gaviscon, Gelusil, Maalox and Rennies</td>
<td>Aluminium Hydroxide</td>
<td>Possible breast enlargement for males, dizziness, diarrhea, fatigue and headaches</td>
</tr>
<tr>
<td>Antibiotics</td>
<td>Used to treat and eradicate H. pylori</td>
<td>Achromycin, Tetracycin, Medicycline, Novatetra, Nu Tetra, Flagyl, Neotric, Novonidazol, Trikacide, Amoxil, APOAmoxi, Amicillin, Novamoxin, Nu Amoxi, ProAmix</td>
<td>Tetracycline, Amoxicillin, Metronidazole, Clarithromycin</td>
<td>Possible joint pain, diarrhea, dizziness, fever, flu-like symptoms, stomach upset, low blood pressure, kidney damage, increased liver enzymes, mouth ulcers, nausea, light sensitivity, itching, rash, skin discoloration, hives, vomiting, heartburn, shortness of breath, blood disorders and loss of appetite, Candida overgrowth</td>
</tr>
<tr>
<td>Proton Pump Inhibitors</td>
<td>Stops production of stomach acid. Used for treatment of Acid Reflux - GERD</td>
<td>Prilosec, Nexium, Prevacid, Losec, Zonton, Inhibitol, Protonix, Somac, Pantoloc, Aciphex, Pariet</td>
<td>Omeprazole, Lansoprazole, Rabeprazole, Esomeprazole, Pantoprazole</td>
<td>Possible stomach pain, constipation, diarrhea, dizziness, upper respiratory tract infection, headache, nausea, rash, vomiting and increased risk of pneumonia</td>
</tr>
<tr>
<td>H2 Blockers</td>
<td>Used in Quadruple therapy to protect the stomach lining against NSAIDs. Reduces the amount of acid your stomach makes</td>
<td>Tagamet, Pepcid, Axid, Zantac</td>
<td>Cimetidine, Ranitidine, Famotidine, Nizatidine</td>
<td>Possible breast enlargement in males, diarrhea, dizziness, fatigue, headaches, impotence and constipation</td>
</tr>
</tbody>
</table>

Nexium, Prevacid and Prilosec, and the H2 acid blockers like Tagament, Pepcid and Zantac are reportedly some of the worst drugs available.

**WARNING**

"Antibiotics prescribed in conjunction with Nexium for the treatment of peptic ulcers have occasionally been known to cause life-threatening allergic reactions as well as severe side effects. If you have been prescribed antibiotics in conjunction with Nexium, please make sure you check on Amoxil and Biaxin for more information."

4.11 Why Acid blockers damage your health

One of the first ulcer medications most people will try is an antacid. Most of us hope that this will cure any suspected ulcer and that an expensive trip to the doctor won’t be necessary. We can live in hope, but this course of action is definitely not going to fix any ulcer, let alone heartburn or acid reflux! The reason is that you need to treat the cause of ulcers and not just the symptoms. Eradication of H. pylori has to be the first step in the process.

It is normally only when antacids fail, that you decide to visit your doctor who will diagnose through one of the laboratory tests that you have an H. pylori infection. The first course of action will normally be a Triple Therapy for you. Be warned that Triple Therapy has an
extremely difficult treatment regimen to stick to, and the failure rates are high because of this.

**Acid Blockers - Side Effects they aren’t telling you about!**
Acid Blockers are used in Quadruple therapy to protect the stomach lining against NSAIDS - they work by reducing the amount of acid your stomach produces. Sounds like good logic, but there are serious consequences when this the acid content in your stomach is reduced artificially !!

Blocking or reducing the production of your stomach acid will actually **worsen your existing condition**. Normal levels of stomach acid are absolutely necessary to digest proteins properly and to allow your body to absorb vitamins and minerals.

"By blocking or reducing the production of stomach acid.....
......you are creating a dysfunctional digestive system"

When there is not enough stomach acid, proteins and vitamins from the food you eat simply cannot be absorbed fully, and this can leave you undernourished. And if you are undernourished your immune system will break down, making you more susceptible to all sorts of diseases. Stomach acid also protects you by killing fungi, bacteria, and viruses found in the food you are eating.

By blocking your stomach acid you are taking your natural defense systems down, leaving yourself wide open to all those harmful fungi, bacteria, and viruses!

So if you’re taking any one of these prescribed drugs you could unconsciously be making yourself more susceptible to food poisoning, parasites, and other stomach problems, including more ulcers and Candida Overgrowth.

"**Antacids are one of the most dangerous treatments for stomach ulcers....bottom line - avoid them!**"

**Antacid medications**
Many people rely on antacids, assuming that too much stomach acid results in ulcers. Many antacid medications designed for “too much acid” can actually add fuel to the fire.

**Do you know the antacid called Alka-Seltzer?**
Get this! It contains aspirin which is known to cause ulcers if used over prolonged periods. Because Alka-Seltzer is **NEVER going to fix ANY ulcer**, and you are enjoying the temporary relief every time you pop one, you may end up taking this antacid for a prolonged period of time. In this way the aspirin found in Alka-Seltzer can actually cause stomach ulcers.

**Here’s another one – Tums**
This source of relief contains another common antacid ingredient, calcium carbonate, which can cause constipation in addition to lowering your stomach acid that causes serious digestive problems.

**4.12 Treating Helicobacter Pylori (H. pylori)**

**Is Prevention Better than Cure!!!**
If you are tested positive for Helicobacter Pylori (H. pylori) the best advice we can offer is to treat it **as soon as possible**. The old saying “Prevention is Better than Cure” holds true, especially when you accept the fact that you could develop Peptic Ulcers and subject yourself to a great deal of unnecessary pain and suffering. You will also run a risk of developing gastric cancer if you leave this chronic infection untreated.
And that is not all - growing evidence has also linked the presence of H. pylori to heart attacks. So please treat this infection as a matter of urgency.

In mainstream medicine, the choice of treatment is currently limited to Triple Therapy, or Quadruple Therapy. These therapies consist of two or three strong antibiotics used in combination at higher than normal dosages, along with either a further drug which will either be a Proton Pump Inhibitor, or a Histamine H2-receptor, depending on the cause of the ulcer.

Clearly these methods have many negative side effects, and doctors are now reporting failure rates as high as 70% with these therapies. Thousands of Doctors are faced with this scenario, and this was a major reason why so many of their patients simply are not treated effectively with the antibiotic regimens. As a result of the above, we recognized several years ago that integrative, natural or functional medicine was the best available option for treating infections like H. pylori. As such we are constantly in search of safe and natural medicines that can replace the conventional and potentially toxic pharmaceutical drugs.

The Basis for Successful H. pylori Treatment

In September 2006, we launched a remarkable and completely unique natural alternative that completely eradicates all strains of H. pylori bacteria, and WITHOUT any negative side effects.

After successfully using this natural treatment on thousands of our clients since September 2006, we can say without reservation that this is the safest and most effective form of treatment available. As a result this natural treatment has become the primary treatment we recommend you use for treating H. pylori infections.

What is this treatment?

Known as Matula Herbal Formula™, this unique 30 day herbal treatment from South Africa is proven in both laboratory studies and clinical trials to be super-effective against H. pylori bacteria. Since we started using Matula Herbal Formula™ to treat our clients, we have never looked back.

Our Clients really do enjoy the taste of Matula Herbal Formula™ and also find it is much easier to take than any drug therapies - only 2 cups of Matula Herbal Formula per day for 30 days. Not only is the bacteria eradicated, but during treatment, healing of the stomach lining and all types of ulcers have also been achieved.

Matula Herbal Formula™ has anti-bacterial, anti-fungal and anti-parasitic properties, and is also proven to be effective in helping patients overcome Candida overgrowth, as well as relieving the symptoms of acid reflux symptoms.

Many of our Doctor Members have now had the privilege of using Matula Herbal Formula™ to treat hundreds of their own patients with serological proof of this infection. The results have been no less than remarkable, and have all been completely side-effect free.

Recovery time after successful eradication of infections has proven to be far quicker than with conventional pharmaceutical medicines. In all respects the overall well-being of all our clients has been remarkable, with improvements in more areas throughout the body than any conventional medicine can ever hope to offer.
Different treatments for different stages of infection

There are generally 4 different approaches to successful eradication of H. pylori infections, and these depend on when you were infected, whether you also have ulcers, and if you have had any antibiotic treatments in the last 12 months. The primary treatment we recommend for eradicating H.pylori is without question **Matula Herbal Formula™**.

Here is how we differentiate between treatments according to the history of the H. pylori infection;

1. **New Untreated Cases** - these will be recently discovered infections, less than 2 years old, previously untreated, and with no history of ANY antibiotic medications taken in the last 12 months.
2. **New Treated Cases** - these will also be recently discovered infections, less than 2 years old, previously treated, and with a history of ANY antibiotic medications taken in the last 12 months.
3. **Old Untreated Cases** - these relate to infections dating back more than 2 years, previously untreated, and with no history of ANY antibiotic medications taken in the last 12 months.
4. **Old Treated Cases** - these also relate to infections dating back more than 2 years, previously treated, and with a history of ANY antibiotic medications taken in the last 12 months.

Once you have established which basic category the infection falls into, you can proceed with treatment as follows;

**Proven Methods of Treatment**

1. **New, untreated H. pylori infection (less than 2 years)**
   - This is simply a 30-day course of **Matula Herbal Formula™** along with your positive attitude.
   - A good **Omega-3** oil, can help reduce inflammation in the bowel lining if necessary.
   - See below for optional dietary tips to speed up the healing process.

2. **New, recently treated H. pylori infection (less than 2 years)**
   - A 30-day course of **Matula Herbal Formula™** along with your positive attitude.
   - **Good Probiotic** supplements are recommended due to exposure to antibiotics - this will re-introduce good flora into your digestive system that the antibiotics will have killed off.
   - A good **Omega-3** oil, can help reduce inflammation in the bowel lining if necessary.
   - See below for optional dietary tips to speed up the healing process.

3. **Older, untreated H. pylori infection (more than 2 years)**
   - To start with we recommend that you have an ultrasound evaluation done and if your Gallbladder requires a flush then to do a Gall Flush (See below for more details). This is necessary because if the H. pylori bacteria has been in
your system long enough to colonize in the areas of your digestive tract where **Matula Herbal Formula™** may not be able to make contact with.

- A 30-day course of **Matula Herbal Formula™** along with your positive attitude and a Gall Flush as recommended.
- To keep on top of your digestive health in general, and to complete your treatment, we recommend a colon cleanse after you have finished your treatment of **Matula Herbal Formula™**, but before you have the HpSA re-test.
- A good **Omega-3** can help reduce inflammation in the bowel lining if necessary.
- See below for optional dietary tips to speed up the healing process.

4. **Older, recently treated H. pylori infection (more than 2 years)**

- Again we recommend that you have an ultrasound evaluation done and if your Gallbladder requires a flush then to do a Gall Flush - (See below for more details). This is necessary because if the H. pylori bacteria has been in your system long enough to colonize in the areas of your digestive tract, **Matula Herbal Formula™** may not be able to make contact with it.
- A 30-day course of **Matula Herbal Formula™** along with your positive attitude and a Gall Flush as recommended.
- **Good Probiotic** supplements are recommended due to exposure to antibiotics which may have killed off all the good flora in your digestive system.
- To keep on top of your digestive health in general, and to complete your treatment, we recommend a colon cleanse after you have finished your treatment of **Matula Herbal Formula™**, but before you have the HpSA re-test.
- A good **Omega-3** oil, can help reduce inflammation in the bowel lining if necessary.
- See below for optional dietary tips to speed up the healing process.

**Recommended Supplements**

The Probiotics like those found in **COMPLETE PROBIOTICS** -

- Replenish microflora in your intestinal tract for optimal balance
- Support optimal digestive and bowel health
- Support optimal cholesterol and blood pressure levels
- Help optimize vitamin and mineral absorption from your healthy diet

The Bacillus Coagulans (also known as Lactobacillus-sporogenes) found in **COMPLETE PROBIOTICS** comprise a preferred strain of probiotic because they:

- **Have superior bioavailability for your body.**
- **More Effective than other Probiotics because Lactobacillus-sporogenes survive the rigorous acidic stomach environment and reach your intestine safely, where they proliferate.**
- Contain 2 billion live viable lactobacilli that retain their viability during preparation, storage, and shelf life.
- **Are easy to store, heat resistant and stable. No refrigeration needed. Take them to your office or on trips, carry in your purse, or wherever.**
- Have long shelf life, so you can buy a multi-pack and keep them in several places for easy access at mealtimes.
Optional Diet Adjustments

In addition to Matula Herbal Formula™ we also recommend the following diet changes which can only help with the whole healing process:

- Eat plenty of dark green vegetables, rich in chlorophyll and vitamin K.
- Drink fresh cabbage juice daily, immediately after juicing it.
- Try a dilute soup made with potatoes, cabbage and carrots.
- If you need to eat Grains, they should be very well cooked (twice as long as usual), preferably in double the amount of water usually used for their preparation.
- Include Millet, unrefined Rice, Barley and Rolled Oats.
- Drink Wheat, Barley or Alfalfa juice if available

Gall Flush

This flush should be done only after a proper evaluation of your Gallbladder!

It is advisable to do this flush over a weekend. This is an economical method that works really well, but it does take a lot of preparation before the actual flush takes place.

Preparation:
For one week drink at least 8 glasses of purified water daily. Have one spoon of Extra Virgin, Cold Pressed Olive oil with a spoon of freshly squeezed lemon juice each morning. Try to drink as much fresh apple juice as possible. Avoid rich and fatty foods, in fact eat a vegetarian diet rich in raw foods and unrefined grains such as brown rice. Take no alcohol or caffeine for the week.

Day of Cleanse:

- Have a light, fresh fruit breakfast.
- For lunch, a simple salad and steamed vegetables.
- After 14h00 eat nothing, drink plenty of water.

Into a jug place four tablespoons of Epsom salts and three cups of water. This will make four doses of a three-quarter cup each.

- You need to have Olive oil and some fresh lemons or grapefruits ready for later.
- At 18h00 drink a three-quarter cup of the Epsom salt mixture, and again at 20h00.
- Just before 22h00, mix a half a cup of Olive Oil and three-quarter cup of freshly squeezed lemon or grapefruit juice in a large jar. Shake the mixture vigorously.
- At 22h00, drink entire mixture within five minutes. Lay down on your back immediately thereafter. You must lie down flat on your back for at least twenty minutes.
- At 06h00 following morning, take another three-quarter cup of the Epsom salt mixture, and again at 08h00.
- At 10h00 you should have a light meal, preferably fresh fruit. You should eat very lightly for the remainder of the day.
- You can expect to get diarrhea. This will be watery and not painful.
NOTE: You may see green “stones” floating in the water. On average these tend to be small, about the size of split peas. You may also see yellow or pale “crystals” or sludge in the water. The diarrhea will continue for a few hours. You may feel tired and headachy, but this will pass very quickly. Once finished, your Gall Flush is complete.
5. Other H. pylori related GI Tract Disorders

5.1.1 Gastric, Peptic and Duodenal Ulcers

Anatomy of an Ulcer

Sufferers describe an ulcer as a burning, cramping, gnawing, or aching in the abdomen that comes in waves, for three to four days at a time, but may subside completely for weeks or months. Pain is worst before meals and at bedtime, when the stomach is usually empty. The ulcer itself is an open sore in the lining of the stomach (gastric ulcer) or in the upper part of the small intestine, or duodenum (duodenal ulcer). Both types are also called peptic ulcers.

The stomach is the most acidic part of the body, setting the stage both for ulcer development and infection. Three types of cells pump out the ingredients of gastric juice: mucous-secreting cells, chief cells that release digestive enzymes, and parietal cells that produce hydrochloric acid. The mucous-secreting cells also produce histamine, which stimulates the parietal cells to release acid.

The stomach needs the acid environment for the digestive enzyme pepsin to break down proteins in foods.

Acidity is measured using the pH scale. A neutral pH is neither acid nor base—it has a value of 7; acids are less than 7, and bases (also called alkaline substances) are greater than 7. Many body fluids, including blood, tears, pancreatic juice, and bile, are in the 7 to 8 pH range. Gastric juice, in contrast, has a pH of 1.6 to 1.8. That's more acidic than lemon juice, cola drinks, and coffee. The environment in the small intestine is far less acidic than in the stomach, but because it receives the acidic mixture of semi-digested food from the stomach, it is prone to ulceration too.

The stomach's innermost lining, the mucosa, protects it from digesting itself. The mucosa consists of lining cells, connective tissue, and muscle. An ulcer hurts when it penetrates the mucosa into the underlying submucosa, which is rich in nerves and blood vessels.

A vat of churning acidic goop may not seem a hospitable place for a microbe, but H. pylori bacteria actually thrives in the low pH environment. “H. pylori have outgrowths called flagella that allow them to penetrate the mucus layer of the stomach, where the pH is more tolerable. Eradicating H. pylori is not simple. “The antibiotic drug must be able to kill the bacteria, yet also resist breakdown in the acidic surroundings.

The problem with existing drugs is that they only temporarily improve symptoms and increase the likelihood of ulcers returning. They also cause lowered stomach acid, this in turn causes an increase in the risk of other diseases or infections. If H. pylori is effectively eradicated, however, the likelihood of ulcer recurrence is much less because the source and cause of the problem has been removed. problem is removed at its source.

5.1.2 Recognizing the symptoms of a Stomach Ulcer

Making sure you have an Ulcer.

Are you really sure you have an ulcer? You may think you have an ulcer, but you can make sure once you check out the most common symptoms of a stomach ulcer listed below. Also find out more about possible complications that could cause you a great deal of misery later. Once you have established that you have an ulcer, take some time to familiarize yourself with a host of nasty side effects BEFORE you decide on taking the drug therapy that most doctors will prescribe.

Identifying the symptoms of a stomach ulcer is the first step you need to take to make sure you have an ulcer.

Lucky for us all types of stomach ulcers have their own tell tale signs and symptoms. Also those that have suffered before have left us a good trail of reliable and common warning signs for us to watch out for.
The 3 most common symptoms of a stomach ulcer

Keep a look out for these symptoms - they are common to all types of stomach ulcers....

- Abdominal pain
- Heartburn (also called acid reflux, or GERD)
- Abdominal Discomfort (2 - 4 hours before or after meals)

If you have any of the above symptoms, the bad news is that you will most probably have a stomach ulcer. The good news is that 90% of all ulcers are easily curable, but there are exceptions so please be careful!

If you have a bleeding ulcer you may not feel any pain at all. In fact you may only realize you have a problem when you start vomiting blood or passing blood in your stools. Bleeding ulcers must not to be left unattended as they can prove fatal.

Complications to be aware of !
If any complications have already set in, then these are the warning symptoms you really need to be looking out for;

- black and smelly stools
- nausea or vomiting of blood
- chest and back pain
- fainting and dizzy episodes

IMPORTANT: If you are still not sure if you have the symptoms of a stomach ulcer then it is best to get a proper diagnosis from your physician.

Common Myths about Treating Peptic Ulcers
When you feel the onset of any of the above 3 most common symptoms, you may remember an old housewives tale and take a glass of milk, a comforting snack, or maybe you would even take a more modern approach and take an antacid (avoid these at all costs!).

All these can bring partial relief to the symptoms of a stomach ulcer, but that's where it stops. NONE OF THESE WILL CURE YOUR ULCER! Take any of these and you can put money on the fact that your ulcer pain will bounce back before you know it!

Choosing a proper treatment for your peptic ulcer can be quite challenging, especially if you have always listened to your doctor! For your own good health, now is the time to consider a natural approach. Doctors will hardly ever recommend this as an option because the truth is that most doctors are simply unaware that these even exist! So chances are you will end up with a prescription for Triple Therapy if you follow doctors orders.

The BIG difference between natural remedies and drug therapies is that natural remedies are easier to take and have fewer or no side effects.

Different Ulcers Types have different symptoms
There are 7 different types of stomach ulcers and the symptoms are different for each different type of ulcer. For example, duodenal and gastric ulcers have symptoms which are quite opposite. Please click on Gastric Ulcers or Duodenal Ulcers to find more specific symptoms of these ulcers.

Any symptoms of a stomach ulcer should be regarded as a warning signal. If you notice any one particular symptom, then best you keep a lookout for any other symptoms that may follow. Never hesitate to see your doctor for a proper diagnosis. Stomach ulcer symptoms should be taken seriously. Get the right treatment and you won't have to live with the pain and discomfort of you ulcers anymore.
5.1.3 Methods of Diagnosis for Stomach Ulcers

**Endoscopy and Biopsy**
Endoscopy is an accurate form of diagnosis for ulcers. An endoscope is a long, flexible tube with an attached camera. It is threaded down your throat and esophagus into your stomach and duodenum. Using the camera, your doctor can view your digestive tract and stomach cavity and see if there are any ulcers present.

A small sample (biopsy) is taken from the lining of your stomach and small intestine during an endoscopy. While the diagnosis is very accurate for ulcers, the results from the tests performed on a biopsy are not always consistent.

**X-rays**
Your doctor may begin your diagnosis with an X-ray – this will show an outline of your esophagus, stomach and duodenum. Prior to the X-ray picture being taken, you will be asked to swallow a white liquid, called barium or barium meal. This forms a coating on your digestive tract and makes an ulcer more visible on the X-ray.

X-ray can only detect some ulcers, but not all. X-rays cannot detect the presence of any H. pylori bacteria.

**Treatment Options**
Normally you would treat the symptoms of a stomach ulcer by following your doctors orders. Usually this means you will start with a course of antibiotics, but quite soon after you are going to end up with some really nasty side effects. These can be so bad that you will probably have to stop your drug treatment in mid course.

Most drug therapies continually offer relief by treating the symptoms on an ongoing basis. Most people have found that trying to treat the symptoms of a stomach ulcer can easily turn out to be a never ending cycle of pain and relief.

Always ask for clinical test results and a money back guarantee before you part with your money - this is a true test of the claims and promises made by the manufacturers of drugs and natural remedies.

5.1.4 The Symptoms of a Peptic Ulcer

The reason why there are so many recognizable symptoms is that a peptic ulcer can either be a gastric ulcer, a duodenal ulcer or an esophageal ulcer. So all the symptoms of a peptic ulcer are simply a collection of the symptoms of these 3 different types of ulcers.

Gastric and duodenal ulcers have common symptoms. In addition, they also have symptoms of their own, yet in several respects some of their respective symptoms are almost opposite.

For example, a gastric ulcer will cause you to have pain after eating, whereas you will feel pain before eating if you have a duodenal ulcer. Because a peptic ulcer can be either one of these ulcers, the symptoms of a peptic ulcer can be pain before eating or pain after eating. You may even experience pain before AND after eating if you are unlucky enough to be suffering from a gastric ulcer and a duodenal ulcer at the same time.

The following list will help you identify if you have a peptic ulcer. Please click on the links to **Gastric Ulcers** and **Duodenal Ulcers** if you want to see the exact symptoms for the type of ulcer you have.

**The basic symptoms of peptic ulcers**
- The most common symptom of a peptic ulcer is a gnawing or burning pain in your stomach just below your sternum
- Stomach pains are triggered by hunger and occur between meals and in the early hours of the morning
- Pains can be sharp or dull
- Taking aspirin, or drinking orange juice or coffee can cause pain
- Antacid medication offers short term relief
- Pain can occur when your stomach is empty, or after you have eaten. The type of ulcer you have will determine this.
Pain may be relieved by food intake or with antacids, again depending on the type of ulcer you have.
- Frequent burping
- Bloating of the stomach
- Ulcer pain can come and go over long periods of time

As with stomach ulcers, the less common symptoms of a peptic ulcer may include;
- Evidence of bleeding
- Vomiting
- Loss of appetite
- Nausea and dizziness

Note that 10 - 20% of all people with peptic ulcers will not experience any symptoms at all – as a result they will be unaware that they have an ulcer. These people may only realize they have an ulcer when it has already gone to an advanced stage and become a bleeding ulcer.

### 5.1.5 The Symptoms of a Gastric Ulcer

The symptoms of a gastric ulcer are fairly simple to identify. Gastric ulcers are common, but they can lead to serious complications if not attended to. We suggest having a hard look when choosing a safe and effective treatment - find out why the answer to permanent recovery lies in removing the cause of the problem – H. pylori.

If you are infected with H. pylori your risk of developing gastric cancer is 2 to 6 times greater than those who are not infected. The longer you leave your condition unchecked the greater your risk will be of your ulcer getting to an advanced stage, and the greater the risk of complications setting in.

**The Symptoms**

If you are experiencing any of the following symptoms then you should get checked out for the presence of a gastric ulcer. You will need to see your doctor for a proper diagnosis.

The signs and symptoms of a gastric ulcer are almost opposite to the signs and symptoms of duodenal ulcers - the main differences are noticed in the timing and severity of the pain.

- Gastric ulcers generally cause a dull aching pain, often right after eating.
- Making a meal can often cause an increase in pain.
- Eating will not relieve pain as is the case with other types of ulcers.
- Indigestion and heartburn, or acid reflux.
- Nagging pain in the upper abdomen area below your breastbone.
- Episodes of nausea.
- A noticeable loss of appetite.
- Unplanned weight loss.
- Another less common symptom of a gastric ulcer is that about 3 in every 10 people are woken up at night by dull ulcer pains – this usually happens 3-4 hours after eating.

Sometimes ulcer pain can radiate to your back or to your chest - when this happens it is common for people to think they are having a heart attack!
5.1.6 The Symptoms of a Duodenal Ulcer

Check out the following symptoms to see if you have a duodenal ulcer. The signs and symptoms of a duodenal ulcer are almost opposite to the signs and symptoms of gastric ulcers - the differences are noticed mainly in the timing and extent of the pain. This type of peptic ulcer develops in the first part of the small intestine, called the duodenum.

- **Heartburn** is one of the most noticeable signs of a duodenal ulcer.
- You will also feel a burning or gnawing sensation in the top of your stomach.
- The symptoms of a duodenal ulcer are felt mostly before a meal. This happens when excess acid produced by hunger stimulation, is passed into the duodenum.
- Pain will be felt after taking aspirin or drinking orange juice or coffee.
- Another symptom of a duodenal ulcer is that about 5 in every 10 people are woken from their sleep during the night by sharp ulcer pains.
- With duodenal ulcers, taking a meal or an antacid usually results in a decrease in pain levels.

**Our advice on Duodenal Ulcers**

Rather be safe than sorry when it comes to health issues. The older you are, the greater the chance that you will be infected with *H. pylori*.

Although not everyone who has *H. pylori* will get an ulcer, it is a good idea to get rid of this bacteria, just in case you fall into the majority group who will get ulcers.

The upside with treating duodenal ulcers is that complications are quite rare. Complications are normally in the form of bleeding ulcers caused by the perforation of the intestinal wall, or an obstruction preventing the passage of food.

The downside is that if complications do occur from leaving your ulcer untreated, then you may become a candidate for emergency surgery soon.

5.1.7 The Danger of a Bleeding Ulcer

Recognizing the signs and symptoms of a bleeding ulcer can be quite tricky. You may be completely unaware you even have an ulcer because you are not experiencing any ulcer related pains. For most ulcer sufferers, this may seem like a painless and easy situation to be in. But in fact, it is potentially dangerous! The overall mortality rate from ulcer related bleeding is about 10%.
When your own Blood becomes a dangerous Painkiller

Not knowing that you have a stomach ulcer can allow you’ ulcer to get to an advanced (bleeding) stage faster than you know.

You could even have occasional painless bleeding episodes and anemia, signs that are easily written off to other possible causes. You may also have dizzy spells caused by loss of blood, but you could blame the dizziness on stress or maybe even lack of sleep - look out for these signs, they could spell trouble!

Stomach ulcers usually cause pain when they are exposed to gastric acid...but when an ulcer starts bleeding, the blood can lessen the effect of your stomach acids and decrease the pain.

About 1 in every 10 people with bleeding ulcers don't have any associated pain. If you happen to be that 1 person then you need to take careful note of other the signs that are much easier to notice.

If any of the following symptoms of a bleeding ulcer present themselves, you will need to move fast towards getting treatment.

The symptoms of a bleeding ulcer

- The passing of foul smelling black, tarry stools could be one of the first symptoms of a gastric ulcer or a duodenal ulcer that has started bleeding
- dark red blood in your stools
- If your ulcer is already at an advanced stage then repeated and different signs of bleeding can be identified.
- Vomiting of new blood which is bright red in color – this indicates that a gastric ulcer has started bleeding. This will be accompanied by repeated episodes of nausea.
- Vomiting dark and grainy blood that looks like instant coffee granules. The dark color indicates that this is old blood.
- unplanned weight loss
- intense and more localized pain in people with penetrating ulcers - the pain may also radiate to your back
- faintness and dizziness when standing up - this is due to loss of blood. Over a long period of time, you may become anemic and feel weak, dizzy, or tired all the time. This is typical of a slow bleed left untreated.

REMEMBER if you have been diagnosed with a bleeding ulcer or even if you have the slightest suspicion that you are bleeding from an ulcer, please do not hesitate to get emergency medical treatment right away!

If you have a bleeding ulcer you will need to

Get Immediate Medical Attention.

Bleeding ulcers can be dangerous and must not be left unattended!!

Treatment

Acid blockers are commonly prescribed to relieve pain but be warned - the relief is very temporary!

About 3 in every 10 people showing the symptoms of a bleeding ulcer will need surgery to stop the bleeding. If the bleeding is severe, then endoscopy is the most common surgical procedure used to stop the bleeding.

A doctor uses an endoscope to cauterize or seal the bleeding vessel using a heated electrical probe. Or he may close it off by injecting solutions into the bleeding vessel.
Doctors can also easily see the signs of all the different types of bleeding when using an endoscope. Blood clots, active spurting, slow oozing of blood from arteries, as well as swollen blood vessels that are not bleeding yet, can all be detected with the use of an endoscope.

Endoscopy is currently the gold standard for treating bleeding ulcers.

### 5.1.8 Stomach Cancer is closely linked to \textit{H. pylori}

Stomach cancer is twice as common in men as it is in women, and most people who develop this type of cancer are over the age of 50 years. Cancer of the stomach is very rare in people under 40.

#### Causes & Symptoms

Interestingly enough, both the causes and the symptoms of stomach cancer (also called gastric cancer) are almost identical to those of \textit{peptic ulcers}.

It is important to note that the chances are far greater that you will have a peptic ulcer if you are showing any of these symptoms, so do not be too alarmed!

Of course if your ulcers are already at an advanced stage, then you will need further medical advice to see if you are at risk.

Only a doctor will be able to give you a proper diagnosis. The \textit{diagnosis methods} for stomach cancer are very similar to the methods used for diagnosing peptic ulcers.

#### What are the Main Causes of Stomach Cancer?

Stomach cancer can be caused by a number of factors that damage the DNA in your stomach cells. When the DNA is damaged, healthy cells can grow out of control and form a tumor (a mass of malignant cells). These factors include:

- \textit{H. pylori} infection - lives deep in the mucous layer which coats the lining of your stomach. It is the primary cause of stomach ulcers, accounting for at least 80 percent of all stomach ulcers. And the World Health Organization have indicated that close to 50\% of new cases of stomach cancer can also be attributed to \textit{H. pylori} infections.

- \textit{Nitrates and nitrites} - these chemicals are added to certain foods, such as ham and bacon, sausages and other cold meats you normally find down at the deli. Nitrates and nitrites combine with other substances in your stomach to form carcinogens, which are known to cause stomach cancer.

- \textit{Salted, smoked or pickled foods and red meat} - in countries where consumption of salted meat and fish and pickled vegetables is high, the corresponding rates of stomach cancer are also high. Consuming high levels of red meat, especially when the meat is barbecued or well done, has also been linked to stomach cancer.

- \textit{Tobacco and alcohol use} - Both can irritate the stomach lining and are especially likely to cause cancer in the upper stomach area.

- \textit{Low income groups} - children and adults from low income groups are more likely to develop stomach cancer than are those in higher income groups. This is due to a number of reasons. The main problem is in poor countries with poor sanitation and unhygienic living conditions where \textit{H. pylori} spreads quite quickly.

\textbf{Tests show that 1 in every 7 people have a high risk of getting stomach cancer.}

If a person has had an \textit{H. pylori} infection constantly for 20-30 years, it can lead to cancer of the stomach. This is the reason that the World Health Organisation’s (WHO) International Agency for Research into Cancer (IARC) has classified \textit{H. pylori} as a “\textit{Class-I-Carcinogen}” i.e. in the same category as cigarette smoking is to cancer of the lungs & respiratory tract.
5.1.9 NSAIDs and Stomach Ulcers

NSAIDs (Nonsteroidal anti-inflammatory drugs) are more frequently prescribed than any other class of medication worldwide. The reason is that they are widely used for a number of common health conditions.

For example, Aspirin is commonly used to prevent cardiovascular problems, while prescription and over-the-counter (OTC) NSAIDs are frequently used for treatment of muscular pain, bone related discomfort such as arthritis pain, and inflammation.

One in every five Americans is treated with an NSAID every year. About 7 in every 10 people over the age of 65 use these drugs weekly and 3 in every 10 people use them daily.

We also know that nonsteroidal anti-inflammatory drugs cause ulcers. The average risks for gastric ulcers are nearly 4% with less than 2 weeks use of NSAID’s, and and 7% with more than 4 weeks use of these drugs.

For duodenal ulcers the average risks were 3.0% with less than 2 weeks use and 4.0% with more than 4 weeks use.

**NSAID Side Effects and Deaths**

The problem with nonsteroidal anti-inflammatory drugs is that people are unaware of the side effects and self-prescribe in ignorance, because these drugs are available without prescription. To give you an idea, 7% of men and 12% of women used prescription NSAIDs, while 20% of men and 30% of women used non-prescription NSAIDs.

The gastrointestinal consequences of long-term NSAID use are significant. A recent US study has shown that the NSAID-related gastrointestinal death rate is higher than the death rates of cervical cancer, malignant melanoma and asthma.

The gastrointestinal consequences of long-term NSAID use are significant. A recent US study has shown that the NSAID-related gastrointestinal death rate is higher than the death rates of cervical cancer, malignant melanoma and asthma.

In the United States over 16,000 patients die each year due to NSAID-related gastrointestinal side-effects and a further 100,000 patients end up in hospital. That equates to nearly 50 NSAID-related deaths and 300 hospitalizations per day - this is a situation of epidemic proportion!!

**How NSAIDs Cause Ulcers**

NSAIDs interfere with the stomach’s ability to protect itself from acidic digestive juices (gastric acid), and this is the primary cause of ulcers. Normally the stomach has 3 main defenses against gastric acid;

- the mucus layer that coats the stomach lining and shields it from stomach acid
- the chemical bicarbonate that neutralizes stomach acid
- blood circulation to the stomach lining that aids in cell renewal and repair.

NSAIDs messes up all three of these defense mechanisms. And when your stomach's defenses are down, even normal levels of gastric acids will damage the unprotected stomach lining and cause ulcers.

If you are taking these drugs and you think you have any symptoms of a peptic ulcer, please see your doctor for a diagnosis. Delaying this can lead to complications. Surgery may be necessary if your ulcer recurs or fails to heal, or if your ulcer starts bleeding.

**H. pylori, NSAIDs and Stomach Ulcers**

Both H. pylori and NSAIDs cause ulcers, and there appears to be a relationship between the two. You can see from the following that eradicating H. pylori in people who are taking NSAIDs is a good thing.
In a recent test, 300 patients who needed NSAID treatment were tested for H. pylori. 165 patients tested positive. Of these 165 patients, 80 were treated with nonsteroidal anti-inflammatory drugs without eradicating H. pylori. Another 85 were treated for H. pylori with antibiotics (only 58% effective) before starting NSAID treatment. Before treatment was started none of the patients had any trace of stomach ulcers. After eight weeks, endoscopy was performed and it was found that 26 of the 85 patients (or 30%) who had not had successful H. pylori treatment, had an ulcer. Of the 49 patients with successful eradication of H. pylori, only 1 patient (or 2%) had an ulcer. The results show that eradication of H. pylori should be recommended for those at highest risk (age related – older people are at higher risk) and also for anyone who has been being prescribed long-term NSAID treatment.

5.1.10 Treating Ulcers

If you have identified with the above symptoms, we would strongly advise getting a proper diagnosis from your Doctor. Get a definitive test for H Pylori. If this option is not available, or not desired, We recommend the following course of action…

First cut out ALL processed foods, caffeine, alcohol, cigarettes and sugar in all its forms. Identify your major stressors and set to work on minimizing them. Eat smaller meals that are made with simpler foods. Sip warm water through your meals. Discuss the medication you are currently using with your doctor, as many common medications like aspirin and ibuprofen can cause ulcers.

Do a simple acid test. This very simple acid test can help you see if you have too much or too little acid in your stomach. Mix a quarter teaspoon of fresh bicarbonate of soda into a small glass of warm water. Swallow this on an empty stomach first thing in the morning. If you belch dramatically and within one minute of swallowing this mixture, it is likely you have too much acid. If it takes two to three minutes to belch, your levels of acid are probably normal. If it takes longer than five or six minutes to belch, it is very likely that you have lower than normal levels of stomach acid. Following the advice below will help to correct this.

As those of you who are likely to be reading this Book have learned, digestive disorders, especially ulcers, are difficult to treat. Most of you have probably been exposed to the more conventional treatments offered by mainstream medicine. As you have discovered, these are only partially effective and temporary. Often many different drugs are required to treat the various symptoms and aspects of Ulcers: pain, nausea, indigestion, infection all of which require different drugs for their treatment. With the relatively recent discovery of H. pylori, the bacterium that causes the majority of stomach ulcers (90%), and an alarmingly high percentage of stomach cancer (50%), the usage of these various drugs has escalated. But yet, the accepted treatments are still fraught with side effects, both short-term and long-term. We now know that most people who are infected with H. pylori are also infected with Candida. We also know that Candida infections are mostly caused by antibiotic usage. Can you now understand why the modern treatment (of two to three double strength antibiotics) of H. pylori is so potentially harmful!

**Matula Herbal Formula™** is a profoundly healing herbal blend that has been discovered in South Africa. This amazing herbal blend tackles the problem of Ulcers from all angles without side effects. It is organic, indigenous and unique to this beautiful country, known for its abundance of healing plants. **Matula Herbal Formula™**, taken twice a day, will help to eradicate H. pylori, this has been proven both in the laboratory, as well as in clinical trials. It will also treat Candida, so often associated with H. pylori. It will reduce inflammation of the stomach or bowel lining, and repair ulcers normally within two weeks. **Matula Herbal Formula™** also reduces nausea, cramping, bloating and indigestion always found with ulcers.
When Matula Herbal Formula™ is used along with a good quality probiotic, like COMPLETE PROBIOTICS you can be sure to effectively eradicate H. pylori and recover from the associated effects caused by the H. pylori too. A good omega-3 oil, ANTARTIC KRILL OIL can help reduce inflammation in the bowel lining.

5.2 The Link between H. pylori, Low Stomach Acid and Atrophic Gastritis

We've all heard about excess stomach acid and heartburn, but what about the condition at the opposite end of the spectrum, low stomach acid (also known as hypochlorhydria)? It's believed to be involved in indigestion, premature aging, food sensitivities, nutritional deficiency, bacterial overgrowth, yeast infections, weak hair, skin, and nails, and a host of other conditions.

Who gets hypochlorhydria?
From approximately age 35 and on, most people begin to secrete less stomach acid. By the time people reach their 50’s, many nutritionally-oriented doctors estimate that over 50% of their patients have hypochlorhydria (low stomach acid). People with a history of H. pylori infection (the bacteria involved in stomach ulcers) and/or who have used protein pump inhibitor medications long-term are more likely to have hypochlorhydria.

Why is stomach acid needed?

- Without stomach acid, we can't digest and absorb the protein we eat. That's because stomach acid is needed to produce an enzyme called pepsin, which breaks down protein.
- Fat and carbohydrate absorption also rely on stomach acid. Stomach acid causes the release of secretin, which then triggers the pancreas to produce enzymes that digest fat (lipase), protein (protease), and carbohydrates (amylase).
- Stomach acid helps keep the digestive tract sterile, preventing the overgrowth of bacteria and yeast. Low stomach acid can lead to bacterial overgrowth or candida yeast infection.
- Stomach acid is needed to absorb properly absorb micronutrients, including iron

Conditions related to hypochlorhydria

- Acne
- Anemia
- Autoimmune disease
- Eczema
- Food allergy and sensitivity
- Hashimoto’s thyroiditis
- Irritable bowel syndrome (IBS)
- Osteoporosis
- Rosacea
- Psoriasis
- Rheumatoid arthritis
- Small intestine bacterial overgrowth
- Candida yeast infection
- Vitiligo
- Adrenal fatigue

Keep in mind that other conditions can also cause these symptoms and that it is important to consult a health professional for a diagnosis.

Be aware that most conventionally-trained doctors may not recognize this condition.

Symptoms and Causes of Atrophic Gastritis
The progression of atrophic gastritis can occur over a period of years and can be co-presented with erosive gastritis especially if there is regular use of non-steroidal, anti-inflammatory drugs (NSAIDs). Often the disease is largely without symptoms but nonetheless,
sufferers will often complain of **intermittent dyspepsia, abdominal pain, distention or bloating, and nausea or vomiting**. In addition, there are related sequelae resulting from the atrophy of the functional components of the stomach. Thus, loss of parietal cells causes reduction in acid production and intrinsic factor, **the latter making vitamin B12 deficiency common**.

The most common cause of atrophic gastritis and hence of lowered stomach acidity is **chronic infection by H. pylori**.

In general, the prevalence of H. pylori infection increases 1% for every year of life, and so 50% of 50 year olds are typically infected. This picture is similar for most industrialized countries, with populations of developing countries showing even greater frequency resulting from high infection rates in children and young adults.

**The link between Low Acid and Atrophic Gastritis**

Interestingly, as well as **H. pylori being responsible for reduction in gastric acidity via atrophic gastritis**, it is also now recognized that the initial infection with the bacterium *probably takes place only when the acidity level in the stomach is decreased*, albeit even on a temporary basis. Thus in two human inoculation experiments, infection could not be established unless the pH of the stomach was raised by use of histamine antagonists (Marshall et al., 1985; Morris & Nicholson, 1987).

**Indeed, it is now known that H. pylori, like most microorganisms**, is sensitive to gastric acid, but avoids the strongly acidic environment of the lumen *by infecting when acid output is temporarily lowered* (a common occurrence) and then migrating below the mucous layer in contact with the epithelium. In this way, it protects itself from acid output once it becomes normalized.

The increasing incidence of H. pylori infection with age indicates that once infection is established, **it is persistent**, perhaps lifelong in many cases, **and that it clearly survives normal antibiotic therapy**. The clinical outcomes of chronic infection with H. pylori are diverse but it is now estimated that in individuals with unresolved chronic infection...

- 80% will demonstrate atrophic gastritis
- 20% will develop duodenal ulcers
- 10% will develop gastric ulcers
- 1% will develop gastric/duodenal cancer

Moreover, of all cases of duodenal and gastric ulcers, an estimated 90% and 65% respectively are caused by H. pylori (Parsonnet, 1998).
6. Healthy Living

6.1 Introduction
Every day we are bombarded with nutrition and health messages and a seemingly endless array of concerns about lifestyle and diet. Healthy eating and a healthful way of life are important to how we look, feel and how much we enjoy life. The right lifestyle decisions, with a routine of good food and regular exercise, can help you make the most of what life has to offer. Making smart food choices early in life and through adulthood can also help reduce the risk of certain conditions such as obesity, heart disease, hypertension, diabetes, certain cancers and osteoporosis.

6.2 Key factors of a healthy diet

Enjoy the wide variety of foods
This concept is the most consistent health message in dietary recommendations around the world. We need more than 40 different nutrients for good health and no single food can supply them all. That’s why consumption of a wide variety of foods (including fruits, vegetables, cereals and grains, meats, fish and poultry, dairy products and fats and oils), is necessary for good health and any food can be enjoyed as part of a healthy diet. Some studies have linked dietary variety with longevity. In any event, choosing a variety of foods adds to the enjoyment of meals and snacks.

Eat regularly
Eating is one of the life’s great pleasures and it’s important to take time to stop, relax and enjoy mealtimes and snacks. Scheduling eating times also ensures that meals are not missed, resulting in missed nutrients that are often not compensated for by subsequent meals. This is especially important for school children, adolescents and the elderly.

Breakfast is particularly important as it helps kick-start the body by supplying energy after the all-night fast. Breakfast also appears to help control weight. All mealtimes offer the opportunity for social and family interaction. So whether it is three square meals or six mini-meals or snacks, the aim is to make healthy choices you can enjoy.

Balance and moderation
Balancing your food intake means getting enough, but not too much, of each type of nutrient. If portion sizes are kept reasonable, there is no need to eliminate favourite foods. There are no "good" or "bad" foods, only good or bad diets. Any food can fit into a healthy lifestyle by remembering moderation and balance.

Moderate amounts of all foods can help ensure that energy (calories) intake is controlled and that excessive amounts of any one food or food component are not eaten. If you choose a high fat snack, choose a lower fat option at the next meal. Examples of reasonable serving sizes are 75-100 grams (the size of a palm) of meat, one medium piece of fruit, ½ cup raw pasta or one scoop of ice cream (50g). Ready-prepared meals offer a handy means of portion control and they often have the energy (calorie) value listed on the pack.

Maintain a healthy body weight and feel good
A healthy weight varies between individuals and depends on many factors including gender, height, age and hereditary.

Excess body fat results when more calories are eaten than are needed. Those extra calories can come from any source - protein, fat, carbohydrate or alcohol - but fat is the most concentrated source of calories.

Physical activity is a good way of increasing the energy (calories) expended and it can also lead to feelings of well-being. The message is simple: if you are gaining weight eat less and be more active.
Don’t forget your fruits and vegetables
Many of us do not meet the recommendations for at least five servings of fruits and vegetables daily. Numerous studies have shown an association between the intake of these foods and a decreased risk of cardiovascular disease and certain cancers. An increased intake of fruits and vegetables has also been associated with decreased blood pressure. People can fill up on fresh fruit and vegetables because they are good sources of nutrients and the majority are naturally low in fat and calories.

Nutritionists are paying much more attention to fruits and vegetables as “packages” of nutrients and other constituents that are healthful for humans. The “antioxidant hypothesis” has drawn attention to the role of micronutrients found in fruits and vegetables like vitamins C and E, as well as a number of other natural protective substances. The carotenes (beta-carotene, lutein and lycopene), the flavonoids (phenolic compounds that are widespread in commonly consumed fruits and vegetables such as apples and onions and beverages derived from plants like tea, cocoa and red wine) and the phytoestrogens (principally isoflavones and lignans), are being demonstrated to have beneficial roles in human health.

Drink plenty of fluids
You need to drink at least 1.5 litres of fluid daily, even more if it’s hot or you are physically active. Plain water is a good source of liquid but variety can be both pleasant and healthy. Choose alternative fluids from juices, soft drinks, tea, coffee and milk.

Fats in moderation
Fat is a nutrient in food that is essential for good health. Fats provide a ready source of energy and enable the body to absorb, circulate and store the fat-soluble vitamins A, D, E and K. Fat-containing foods are needed to supply “essential fatty acids” that your body cannot make. For example, oil-rich fish and fish oil supplements are rich sources of the omega-3 polyunsaturated fatty acids (n-3 PUFAs) alpha linolenic acid (ALA), eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA). These, along with omega-6 polyunsaturated fatty acids (n-6 PUFAs) such as linoleic acid (LA) and arachidonic acid (AA), must be consumed in the diet. Bad fat however, especially hydrogenated and trans-fats, can lead to adverse health effects such as overweight and high cholesterol and increase the risk of heart disease and some cancers.

Balance the salt intake
Sodium is a nutrient and is present naturally in many foods. Sodium and chloride are important in helping your body to maintain fluid balance and to regulate blood pressure.

For most people, any excess sodium passes straight through the body however in some people it can increase blood pressure. Reducing the amount of salt in the diet of those who are sensitive to salt may reduce the risk of high blood pressure. The relationship between salt intake and blood pressure is still unclear and individuals should consult their doctor for advice.

Start now - and make changes gradually
Making changes gradually, such as eating one more fruits/portion of vegetables each day, cutting back on portion sizes, or taking the stairs instead of the lift, means that the changes are easier to maintain.

6.3 Why is physical activity so important?
Have fun doing your favorite form of physical exercise. The advise for increased physical activity is strongly linked to overall healthy lifestyle recommendations because it affects energy balance and the risk of lifestyle-related diseases. Over the past few years, many position papers have set out the importance of moderate physical activity for good health. These reports indicate that being physically active for 20 to 30 minutes daily reduces the risk of developing obesity, heart disease, diabetes, hypertension and colon cancer, all of which are major contributors to morbidity and mortality in western countries. In addition, in both children and adults, physical activity is related to improvements in body flexibility, aerobic endurance, agility and coordination, strengthening of bones and muscles, lower body fat levels, blood fats, blood pressure and reduced risk of hip fractures in women. Physical activity makes you feel better physically and encourages a more positive mental outlook.
6. 4 Supplementing your diet
In our fast paced lifestyle we often take short cuts when it comes to meals. If you miss meals regularly or in between rushing to make appointments on time you indulge on fast foods you can be sure that you aren’t getting enough nutrition. Over a period of time this will affect your immune system that will begin to make you feel lacking in energy. Once you begin to lack energy this is normally a warning sign that all is not well within your body.
7. Final Word

Well Done! You have just made THE most important step towards your ultimate Holistic Health. Your total healing is already in motion.

As you would have picked up, there are a great number of conditions in the gastrointestinal tract that have overlapping symptoms. This highlights the very important understanding that “the part cannot be well unless the whole is well”. Sadly, this is not always the approach of the medical industry. Now that you have a more complete picture of how the vitally important gastrointestinal system works, you are better equipped to work together with your Health Care Professional to achieve optimum health.

As we promised at the beginning of this Report, we will be sending you a series of emails. They will provide you with more supportive information about our successful treatment program and supportive information you will be able to use to effectively eradicate your H. pylori or healing any stomach ulcers. So please look out for our emails so that you can gain maximum understanding in your quest for good health.

Wishing you an abundant life and in good health,

Yours sincerely,

The Natural Health Team