



## NDN redactievragen aan Patrick Holford n.a.v. 2 seminars op 4 maart 2011

### Vragen betreft; voedselovergevoeligheid

1. a. Wat is uw mening over de selectiviteit en sensitiviteit van serum IgG4 en –IgG totaal voedsel screenings?  
b. Welke test vindt u in de praktijk het meest bruikbaar?  
a. What is your opinion about the selectivity and sensitivity of serum IgG4 & IgG total food screening.  
b. Which test do you find most useful in practice?

**Patrick Holford: There are no international reference standards available for assays that measure food-specific IgG antibodies. The only way that a particular food-specific IgG test can be shown to be valid is by carrying out clinical trials to determine performance in “real life”. The only food-specific IgG test on the market with clinical trials in place to demonstrate performance is the YorkTest FoodScan food-specific IgG test; this test picks up total IgG’s rather than just IgG4.**

2. Volgens de Nederlandse Landelijke Allergie Standaard is het bij een atopie niet zinvol dat borstvoedende moeders preventief allergenen uit hun voeding elimineren. Wat is uw mening hierover?  
According to the Dutch National Allergy standard is it not useful for atopic lactating mothers to eliminate preventive allergens from the diet.  
What is your opinion on this?

**Patrick Holford: If you are talking about the mother’s diet she should have eliminated her own allergens. If you are talking about the infant I favour not introducing foods with a known higher allergenic probability until about 12 months. This would include dairy products and wheat.**

- 3 In de Nederlandse KOALA-studie kwam naar voren, dat verlate introductie van allergenen (o.a. melk) in het 1<sup>e</sup> levensjaar de kans op een allergie vergroot. Wat is uw mening over de verlate introductie als preventieve maatregel?  
In the Dutch KOALA study showed, that late introduction of allergens (including milk) in the 1st year of life increases the chance of an allergy.  
What is your opinion on the belated introduction as a preventive measure?

**Patrick Holford: Thank you for alerting me to this recent study. I only have access to the abstract which states that ‘The development of atopic disorders in early childhood is associated with prenatal exposure to n-6 vs. n-3 fatty acids, but with inconsistencies between different manifestations.’ There is no mention of dairy products per se. In my opinion there is no evolutionary logic in giving an infant any milk other than human milk during the first year of life. This is known to enhance immunity, reduce allergic potential and help establish healthy gut flora.**

- 4 Wat zijn volgens u de belangrijkste maatregelen ter preventie van allergieën voor, tijdens en na de zwangerschap?

What do you think are the most important measures of the prevention of allergies before, during and after pregnancy?

**Patrick Holford: To respect that the gut has to form completely, and develop it's healthy gut flora. Based on the research there is nothing better than exclusive breast-feeding for at least six months to achieve this aim. This should be followed by mixed feeding and weaning onto a wide variety of foods with low-allergenic potential, ending with those foods that are not part of our long-term evolutionary design and have a high allergenic potential, namely wheat and milk.**

- 5 **Er is bezorgdheid over de veiligheid van sojamelvoeding bij jonge kinderen i.v.m. de mogelijke hormonale werking van soja-isoflavonen. Wat is uw mening over het gebruik van sojamelvoeding bij kinderen?**

There is concern about the safety of soy milk nutrition in young children due to possible hormonal effect of soy isoflavones. What is your opinion about the use of soya milk nutrition in children?

**Patrick Holford: We have generations of Chinese who consume soya milk without any pattern of significant hormonal related healthy problems. I personally favour using a combination of different milks, my favorite being oat, followed by soya and rice. I do not think soya milk is a problem unless a person is allergic to it. Early introduction to soya can precipitate developing an allergy.**

- 6 **Bij sommige allergische kinderen zien we een zeer slechte eiwitvertering. Heeft u adviezen ter versterking van de eiwitvertering?**

In some allergic children we see a very bad protein digestion. What would you advise for strengthening protein digestion?

**Patrick Holford: Ensuring adequate zinc status since zinc is a co-factor for the production of betaine hydrochloride (stomach acid). Eliminating allergens since these may interfere with digestion, gliadin, the often offending protein in wheat, being a common one. Possibly giving protease as a digestive enzyme. Probiotics help inoculate the gut, while glutamine feeds the intestinal mucosa. The combination of all three – digestive enzymes glutamine and probiotics, is most helpful.**

- 7 **Bij sommige kinderen triggeren vaccinaties de start van allergische klachten. Herkent u dit? Heeft u tips voor ouders en therapeuten om dit te voorkomen?**

In some children vaccinations trigger the start of allergic complaints. Do you recognize this? Do you have any tips for parents and therapists to prevent this from happening?

**Patrick Holford: There is a known inflammatory effect of certain vaccines, which may tip the gut's immune system into a more reactive state. Firstly, I would recommend limiting vaccines to only those absolutely necessary, giving them later in life, and singly. Secondly, not on the basis of evidence but logic, avoiding highly allergenic dairy and wheat products for up to a week after the vaccine. Giving a child probiotics before and after a vaccine may also be helpful.**

## Vragen betreft; voeding voor de geest

1. Voor een goede geestelijke gezondheid is een gezonde methylering (Homocysteïne) van groot belang.

Bij sommige mensen stijgt de B6-spiegel bij suppletie met B6 of P-5-P tot toxische hoogte.

Heeft u hier een verklaring voor?

Heeft u tips ter correctie?

For a good mental health is a healthy methylation (homocysteine) of great importance. In some people the B6 level increases to toxic heights with supplementation of B6 or P-5-P.

Do you have an explanation for this?

Do you have any tips to correct this?

**Patrick Holford: I have not seen B6 toxicity even at high supplemental levels, although it can occur above 500mg a day. Zinc is a required co-factor to convert pyridoxine into the active P-5-P form, so giving both would reduce the possibility of a build up of pyridoxine.**

2. Hetzelfde probleem zien we bij suppletie met foliumzuur.

Heeft u hier een verklaring voor?

Heeft u tips ter correctie?

We see the same problem when supplementing with folic acid.

Do you have an explanation for this?

Do you have any tips to correct this?

**Patrick Holford: There are two concerns about giving higher levels of folic acid. The first is the masking of symptoms of B12 deficiency. I also give both, for example in a homocysteine lowering formula. The second, as seen in countries which have fortified food with folic acid, is a potential increased risk of colon-rectal cancer. While folic acid helps prevent healthy cells in the gut from becoming pre-cancerous cells, there is evidence that it accelerates pre-cancerous cells becoming fully blown cancer cells. It is not known if this also occurs if folic acid is given with B12. In any event, I only give supplemental folic acid with B12, B6 and zinc, and higher levels only to those with raised homocysteine levels until these levels normalize.**

3. Het gebruik van SSRI's bij depressie. Afbouwen hiervan blijkt in de praktijk regelmatig erg moeilijk. Heeft u tips hoe mensen de afbouw kunnen vergemakkelijken?

The use of SSRI,s with depression. In practice phasing this out is frequently very difficult. Do you have any tips for people to make this reduction process easier?

**Patrick Holford: Firstly, doing everything else known to help depression – low GL diet, sufficient vitamin D, increasing EPA, chromium supplementation in those with atypical depression, exercise, counselling – then phasing 5-HTP in slowly, starting with 50mg a day, as you phase the SSRI out. It is likely that the withdrawal effects are largely due to serotonin depletion.**

4. Gelijktijdig gebruik van SSRI's met kruiden/aminozuren kan bijwerkingen geven. Bij welke supplementen ziet u weinig/geen bijwerkingen?

Simultaneous use of SSRI,s with herbs/amino acids can give side effects.  
Which supplements do you see little/no side effects?

**Patrick Holford: There is certainly good reason to not give both St John's Wort with an SSRI, nor 5-HTP or tryptophan. There are no other supplements that I am aware of that require caution if on anti-depressants.**

5. **Wat zijn volgens u de 5 belangrijkste maatregelen om cognitieve achteruitgang te vertragen?**

What do you think are the 5 most important measures to slow down cognitive decline?

**Patrick Holford: Lowering homocysteine to below 9, thereby improving methylation. Ensuring adequate intake of omega 3s. DHA appears to be the more important omega 3 fat in this regard. Ensuring adequate intake of phospholipids rich in fish and eggs. Following a low GL diet. Having an active lifestyle, meaning exercise, social interaction and learning new things.**

6. **Aminozuren kunnen bij een dysbiose worden omgezet in belastende stoffen, zoals tyramine. Wat is uw ervaring met het gebruik van aminozuren bij stemmingsproblemen bij mensen met een dysbiose?**

Amino acids with dysbiosis can be converted to an incriminating substance as Tyramine.  
What is your experience with the use of amino acids with mood problems in people with a dysbiosis?

**Patrick Holford: I have not really encountered this problem probably because we always focus on improving digestion, giving those with dysbiosis the necessary probiotics, digestive enzymes and glutamine.**

7. **We zien in de praktijk soms mensen met een verlaagd homocysteine.**

**Kunt u dit verklaren?**

**Welke gevolgen heeft dit voor de gezondheid?**

**Hoe is dit evt. te corrigeren?**

In practice we sometimes see people with a reduced homocysteine

Can you explain this?

What impact does this have for your health?

How can this be corrected ?

**Patrick Holford: This is generally not a bad thing. In those on the autistic spectrum you can have a sulphuration problem that leads to apparently normal or low homocysteine but respond to the same nutrients given for high homocysteine. Folinic acid would be a better choice than folic acid for these children. Jill James has published on this subject.**

8. **Volgens sommige onderzoeken werkt rode wijn preventief tegen hart- en vaatproblemen en diabetes. Een gezond vasculair systeem en insulinehuishouding is belangrijk voor een goede geestelijke gezondheid. Hoe denkt u over het gebruik van rode wijn ter bevordering van de geestelijke gezondheid?**

According to some studies red wine works as a preventive measure against cardiovascular diseases and diabetes. A healthy vascular system and insulin metabolism is important for good mental health. What are your thoughts about the use of red wine to enhance mental health.

**Patrick Holford: For many conditions, notably Alzheimer's and cardiovascular disease, light to moderate alcohol consumption may even reduce risk. Good quality red wine, high in resveratrol, appears most beneficial. This can form part of an optimal diet.**

**9 Volgens sommige onderzoeken heeft koffie een anti-oxidatieve werking en beschermt tegen diabetes.**

**Hoe denkt u over het gebruik van koffie ter bevordering van de geestelijke gezondheid?**

According to some studies coffee has an anti-oxidative effect and protects against diabetes.

What are your thoughts about the use of coffee to enhance mental health.

**Patrick Holford: The studies on coffee having some benefit in reducing diabetes risk are consistent and, yes, it is high in antioxidants. Even so, I recommend caution because it is a highly addictive substance and interferes with digestion. There is little grounds for caution below 100mg of caffeine a day.**

**10 Visolie kan ADHD en dyspraxie bij kinderen helpen verminderen.**

**Wat zijn uw eigen ervaringen hiermee?**

**Welke doseringen gebruikt u?**

**Kiest u nog voor een bepaalde verhouding tussen EPA en DHA?**

**Combineert u dit ook met b.v. GLA?**

Fish oil can help reduce ADHD and dyspraxia.

What is your experience with this?

What doses do you use?

Do you choose a certain ration between EPA and DHA?

Do you combine this with GLA?

**Patrick Holford: The most effective studies have used a combination of EPA, DHA and GLA. DHA, on its own, have not proven beneficial in several studies, although vital for the formation of the brain in foetal development. DPA, which can convert into both EPA and DHA, is present in seal and salmon oil, although there is virtually no data on this in relation to ADHD. I favour supplementing a combination of EPA, DHA and possibly DPA, totalling ten times that of GLA, the most potent omega 6.**