

Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 21/10/2020 10:11

Activity Date: 21/10/2020 10:10

Contact

Email or text

Hi Ruth,

I think Salicylates is definitely a problem for Seth. The second week of the holidays and last week were noticeably different. I started cutting things out last week but I'm assuming it takes a while for them to get out of his system. He was teary and had minor tantrums. Sleep has been an issue with him also, waking every night and doing a bed swap. I have ordered some more neuro c to see if that does make a difference also. I hope that is ok.

Thanks,

Susan

REPLY

Hi Susan,

That's both good and bad news. Good that we have a reason for the up-and-down moods, but sad that's it the salicylates doing it.

General rule of thumb is to exclude foods for 3 weeks. The first week is often terrible while there are withdrawal reactions, then week 2 you're starting to see some hope, and by week 3 things are starting to settle into a pattern of settled behaviours and moods.

Good idea to see if the Neuro C can work as an antidote, but it may not work because it has a couple of herbs in there and many herbs are high in salicylates. However lists vary as to content of salicylates in the different herbs.

If he seems to get worse on the Neuro C then you will know the sals content is too high!

SUSAN

Ruth, I also wanted to ask if cocoa was ok for Seth on the low salicylate diet? I have been putting it in custard and slices.

Thanks, Susan

REPLY

Yes! Cocoa is pure amines (not a combo of sals or amines) so perfectly fine :)



Ruth Fellowes Nutritionist Herbalist
Spectrum Health

Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 10/10/2020 22:24

Activity Date: 10/10/2020 22:23

Contact

Email or text

Add \$7.20 owing to any future invoices



Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 02/10/2020 09:18

Appointment Date: 02/10/2020 09:15

Core symptoms

MOOD

has been calm these days- even at school

BOWEL

GI restore stopped for a few days and he def does need it- more solid with it- possibly less smell

neuro C - without it might be a bit more teary over minor things but has also been good

SLEEP

on and off with sleep disruption

used to be every night

ENERGY

hard to gauge because he is on hols

still no complaints about fatigue

PAIN

OTHER

hasn't been having the GABA and L-theanine for about 3 weeks

Diet

FS diet is ok to follow

not fully compliant- but about 80%

meals are working well- both Owen and Seth like them- doing ok without tomatoes

has been happy with bananas and apples

snacks are the hardest and drinks

last 5 weeks he has gone back into lego and he is calm about it
not focused on video games all the time

had a cheeseburger from McDon- that night he was really silly-
that was the day he had choc sultanas

Herbals & Supplements

BODY SIGNS

Nails

Palmar

Eyes

Tongue

Skin/ hair



Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 28/08/2020 16:43

Appointment Date: 28/08/2020 16:30

Core symptoms

MOOD

FOCUS: emotions, inattention, anaemia?

BOWEL

finished the iron tablets and noticed the stools are less firm - but at least not as bad before his flatulence has gone a bit smelly again but only just recently

SLEEP

still bed swaps
waking around 2 or 3 am
then awake from 5 am
no bedwetting

ENERGY

getting tired more quickly

PAIN

OTHER

coeliac testing has been done but mum just needs to pick up the results- all clear but I'd like to see if the antibodies are elevated and to what extent.

Diet

Herbals & Supplements

last bloods in June don't say anything about iron
has been tested for coeliac and it is all clear (mum hasn't yet picked up the test results for me to view)
noticed his arms are maybe getting a bit bumpy so it might be good to do vit A for his iron absorption?
Long history of L haemoglobin since 2015 and he has done a lot of growing

BODY SIGNS

Nails

a few corrugations

Palmar

Eyes

Tongue

Skin/ hair

red ears are quite common



Ruth Fellowes Nutritionist Herbalist
Spectrum Health

Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 30/06/2020 21:55

Activity Date: 30/06/2020 21:55

Comment or research

should we do cofactors for iron absorption now? Eg vitA for iron and zinc absorption
Or lactoferrin 200mg- 1.6g

Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 29/06/2020 22:46

Activity Date: 29/06/2020 22:46

Comment or research

Blastocystis or D fragilis are often the scapegoats for digestive disturbances, such as the ones experienced by Seth (explosive diarrhoea, odorous flatulence and food sensitivities).

However it is important to consider that recent research is finding:

- * the use of antibiotics to eradicate 'infestation' does not bring better clinical outcomes
- * both are present in healthy individuals at a high rate, without any pathogenic symptoms
- * differential diagnoses need to be considered as causes for the digestive problems

In light of Seth's age it is perhaps preferable that we not resort to antibiotics (or the herbal antimicrobials which literature indicates are used as alternatives) but to investigate the DDx. The ones most cited as being relevant are:

- * SIBO. Seth is old enough that breath testing for glucose, fructose and lactose is an option. Overgrowth of colonic bacteria can consume glucose, fructose and sucrose and lead to malabsorption of fibres and carbohydrates and could well explain Seth's specific symptoms.
- * coeliac disease or non-coeliac gluten sensitivity
- * fructose intolerance (simple to assess from my end, and this would make the FODMAPS diet beneficial)
- * H. pylori infection (already been investigated twice)
- * IBD (although I recognise that this is not normally considered in children).

In light of the family history and as Seth is still consuming gluten, I think coeliac testing would be the simplest and most direct test to complete. It would be good to rule this out, or if appropriate to modify the diet and bring relief. I am also quite concerned that he mentions seeing blood in the stools approximately 3 times in the last few months.

My approach while we consider differentials, will be to supplement with probiotics and prebiotics to encourage balance to the gut microbiota and bring some relief to the bowels; to investigate fructose intolerance; and to minimise visceral hypersensitivity and residual inflammation, in case the D. fragilis and blastocystis growths are having an impact.

In summary, I am hoping for Seth to be tested for coeliac, and could we also check vit D status as I would like to use this as part of the strategy to minimise residual inflammation, as evidenced to be helpful for those with IBD.

Jason Hawrelak:

GF, low fructose, refined sugar, no snacking

6 weeks on herbs (clove 20%, oregano 20%, pomegranate 40%, thyme 20%)

PHGG 1 tbsp start low eg GI Restore

SB bd

curcumin 250mg bd

activated charcoal 3 caps, 1 hour after herbs

vit D

not essential oils/ enteric capsules because they don't have the polyphenols for specific action

Likely causes are:

fructose intolerances

H pylori esp if long standing nausea

residual inflammation from infection

CD = GF diet

curcumin, ibeorgast, PHGG for visceral hypersensitivity

Also see Jacques Duff on gut and ADHD and his use of Biomatrix:

2 hpd tsps + zinc citrate in drink bottle for all day long

after 2 weeks because it was tolerated, do 2 hpd tsps bd in 2L of water during the day.

After 4 weeks was able to tolerat fish oils, magnesium and other nutrients.

3 months and no pains.



Ruth Fellowes Nutritionist Herbalist
Spectrum Health

Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 27/06/2020 10:18

Appointment Date: 27/06/2020 10:15

Core symptoms

MOOD

BOWEL

discussion about final test results which is positive for both blasto and d fragilis.

Discussed treatment options and that I think we should test for coeliac and rule that out as cause for the digestive problems (and in the long run for his emotional health, inattention, and long term anaemia).

SLEEP

ENERGY

PAIN

OTHER

Diet

Herbals & Supplements

BODY SIGNS

Nails

Palmar

Eyes

Tongue

Skin/ hair



Ruth Fellowes Nutritionist Herbalist
Spectrum Health

Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 20/06/2020 14:42

Appointment Date: 20/06/2020 14:30

Core symptoms

MOOD

BOWEL

has been asked to come in re his stool results- so not sure why. Does he have a parasite? Could this be why there is malabsorption.

poos not as bad anymore with just x1 bile supplement
still smells as bad
not as explosive

SLEEP

ENERGY

PAIN

OTHER

Diet

Herbals & Supplements

BODY SIGNS

Nails

Palmar

Eyes

Tongue

Skin/ hair



Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 16/05/2020 11:12

Appointment Date: 16/05/2020 11:00

Core symptoms

MOOD

anxiety seems to be doing ok although Seth thinks its still bad

BOWEL

maybe not as smelly but still explosive and a brown colour
once there was blood?? smears seen on toilet paper.

frequent evacuation

is already lactose free

SLEEP

sleeping through the night more often

bed swaps only twice

but waking at 4am onwards

twice wet the bed

ENERGY

PAIN

OTHER

Diet

should he be gluten free?

Herbals & Supplements

BODY SIGNS

Nails

Palmar

Eyes

Tongue

Skin/ hair



Ruth Fellowes Nutritionist Herbalist
Spectrum Health

Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 18/04/2020 11:13

Appointment Date: 18/04/2020 11:30

Core symptoms

MOOD

overall his moods seem better

BOWEL

still messy and explosive
and putrid smelling

SLEEP

last few nights sleeping through- so less bed swaps
4am wake up though- when he's awake he's awake
by mid afternoon he gets a bit cranky
anytime before 5pm will do another GABA
will go onto 1 tsp GABA

ENERGY

PAIN

OTHER

Keep it cleaner Protein woolies is being used- only doing 1 tsp. Bring up to 3 tsp (17g of powder)

Diet

Herbals & Supplements

BODY SIGNS

Nails

Palmar

Eyes

Tongue

Skin/ hair

Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 14/03/2020 14:50

Appointment Date: 14/03/2020 15:00

Core symptoms

MOOD

changed schools Nov2019- but now been suspended due to aggression- a few incidents over 3 weeks period. This school is more consistent with dealing with behaviours and it has helped him settle much better. Glen Williams school.

also seeing it at home too now

at prior school it was getting out of control with his behaviours- suspected the teachers would deliberately push buttons and problems with the principal

seeing a psychologist who thinks ADHD is likely but not formally diagnosing

0-10 in speed of losing it, but then remorseful

BOWEL

his poos are really putrid smelling

loose stools

explosive

no more vomiting/ rumination happening much anymore- maybe due to change in school

- fats malabsorption an issue, but dyslexic traits present

SLEEP

unsettled sleep and back to waking too early- prob around the same time that school started

is worming regularly and it did help improve his sleep a lot

ENERGY

fluctuates- actually says he feels tired

PAIN

used to get a lot of leg pains

maybe a few headaches now and then

OTHER

his dad has gut stuff

history of pyrroles

Diet

fussy- quite rigid eating

vegetables are being hidden atm
ok with fruit

not a big eater- in general- although will happily eat plenty of his favourite sweet foods

BF - fruit and milo

grapes, bananas, strawberries,

LUNCH- marmalade sandwich, butter sandwich, fruit, plain chips (mostly), rice crackers with the choc on top, homemade treat food (tries to put good things in there)

DINNER -doesn't eat egg dishes but fine with pancakes or pikelets

mince dishes

tuna mornay with rice or pasta

Herbals & Supplements

BODY SIGNS

Nails

slightly rounded- low oxygen/ iron

Palmar

moderate to good

Eyes

moderate

Tongue

white coating mostly at back, with lots of spots at back

Skin/ hair

Record Seth Judd

Client D.O.B: 14/06/2009

Created By: Ruth Fellowes

Business: Ruth Fellowes Spectrum Health

Created On: 19/05/2019 15:03

Activity Date: 19/05/2019 15:03

| Seth Judd, Ruth Fellowes

Appointment 18-Apr-2018 1:00 pm

Note Last Modified 18-Apr-2018 2:40 pm

Bronwyn - chiro- mentioned about cortisol peaking too much for him.

Diagnosed with rumination syndrome- involuntary regurgitation/ vomiting thinks it is worse with dairy and maybe fruit.

Blood tests done- iron deficient. On a syrup for this. 10ml Ferrolax. Beginning of March began this.

SLEEP- waking too early! Going to be bed at 7 or 8pm. This is about 8hrs duration, but not long enough for his child his age.

ENERGY- feels tired at school when he has to work hard. Mental energy really low. Playing football but not very physically active.

BOWELS- regular, but mostly smelly (like something died).

APPETITE-not a big appetite apart from sugary treats. Not ready to eat until 7pm even though he wakes at 4pm. Doesn't have much of an appetite.

MOODS- Frustration and meltdowns at school but he is also waking up earlier 4am atm. TEACHER comments it is after lunch. Mum thinks he is just tired.

Eyes- significant convergence issue- training glasses coming. Doing exercises with Bron so this will cover this area.

Reading is a sticking point.

Gong to see a behavioural psych - for coping strategies.

H pylori breath test done- clear. However oes is at 0.5 so there is gut work to do.

Nails- ridged, faint white smudges, palmar- good, eyes- pale, skin- good, apart from mozzies.

Concerned that pyrroles primer has been going on too long without any assessment (more than 2 years) as minerals will be getting knocked around. Pyrroles score at 2015 was 41.2.

DIET- going to work on a histamine trial due to the regurgitation, and mozzie bites flare up.

| Seth Judd, Ruth Fellowes

Appointment 10-Jul-2018 11:30 am

Note Last Modified 11-Jul-2018 10:16 pm

Next week will have a paediatrician visit and will also check on his iron status then.

Low histamine diet has been difficult and not followed.

Tried lactose free milk with choc and he vomited with that. But he has lactose free milk with ovaltine and was fine. But icecream is consistent with making him vomit. as did a Mandarin. is fat absorption an issue?

Concentration still not good- will do it with one on one care, but not by himself. Going to get screened for dyslexia at the Irlen clinic.

Sleep- very restless, talks in his sleep, bed swapping, bed cloths are wrestled. Does get an itchy bottom- Seth tells me.

to do

CHECK for threadworms and treat, bring up iron if needed. Really need to work on bile health eg taurine, glycine, chondroitin sulphate to use

