



Transformation™ Enzyme Therapy Center Case Study: Collagenous Colitis

Chronic Diarrhea, which is diarrhea lasting for more than 3-4 weeks, is estimated to affect 1%-5% of the population. Fundamentally, diarrhea is caused by incomplete absorption of water from the lumen either by reduced rate of net water absorption or retained osmotic pressure intraluminally. Many conditions have been known to cause chronic diarrhea such as Ulcerative Colitis, Crohn's, Congenital Syndromes, and colon carcinomas to name a few so accurately diagnosing the cause is important in order to prescribe the best treatment.

One condition that causes chronic diarrhea is Collagenous Colitis, also known as Microscopic Colitis, which is a type of inflammatory bowel disease that affects the colon. It is mostly prevalent in middle-aged females, and the colon appears normal or almost normal on colonoscopy but the inflammation is visible when a biopsy of the colon is examined under a microscope. Signs and symptoms include chronic, watery, non-bloody diarrhea from 4-9 times a day that may begin suddenly or worsen over time and in rare cases can be more than 15 bowel movements.

The etiology behind collagenous colitis is unknown but it is thought to have genetic and environmental factors that play a role in its development. It is thought, but without strong evidence, that certain medications such as NSAIDS and proton pump inhibitors may cause or trigger the disease in some people.

Depending on the severity and symptoms, the treatment protocol may consist of avoiding medications that are associated with the disease, anti-diarrheal medication, or Budesonide for inflammation with the goal being only to lessen the number of bowel movements per day so as to improve quality of life. In severe cases that don't respond to treatment, surgery to remove all or part of the colon is recommended.

Patient Background

This patient is a 39-year-old female with chief complaint of chronic diarrhea of 15 years and has been just recently diagnosed with Collagenous Colitis and is being treated with Budesonide 9mg/day.

Office Visit: 3/28/19

Patient comes in for initial visit c/o chronic diarrhea for past 15 years and 10 years of chronic constipation before that. Patient has had colonoscopies, gluten free diets, meds, and many other things without success. Patient has eliminated apples, onions, garlic, and others due to FODMAP diet which alleviated approx. 70%.

Patient runs marathons and works out 7 days a week but has not found anything to completely resolve condition. Patient had a period of high stress last year which exacerbated her condition at work but has left job. Patient has multiple trips to the restroom due to diarrhea. Patient has had stool tests, urine tests, blood test, and allergy tests.

Patient takes isopure which is whey protein, BCAA, One a day multivitamin for women from Whole Foods and from GNC. Citrulline powder from GNC on running days. Patient before 15 years ago suffered from chronic constipation since childhood. Patient states she divorced 15 years ago and went through a lot of stress with her separation. Her episodes are from moderate to severe. We are recommending a food intolerance test to see what the patient is reacting to along with medical records and recent blood tests to review.

Office Visit: 5/1/19

Patient returns for follow up and ROF on blood test and food sensitivity test performed. Patient was not started on any protocol since initial visit and has had no improvement and continues with chronic diarrhea.

Blood Test Findings: Total Bilirubin 1.6H (.2-1.2), ALT 35H (10-26), T3 total 73L (100-180), RBC count 5.12H (3.9-4.5), HGB 15.8H (13.5-14.5), HCT 47H (37-44), D3 33 (50-100)

Food Sensitivity Panel from ELISA/ACT™ Findings: Strong Reactions to Barley, Anchovy, Mustard Greens, Beet, Propylene Glycol, Vegetable Glycerin, Thricothecium Roseum. Moderate Reactions to Cauliflower, Spelt, Nitrates, Xylene, Mace, Shrimp, Aspergillus Oryzae, Caffeine, Beryllium Oxide, Canola Oil, Millet, Carmine, Polyethylene Glycol, Whey.

Management and Protocol: Today patient is starting the *Thrive in 63* diet with only Vitamin D3, *GastroZyme* 2 caps 3 x day after each meal, *Liver Support* 1 cap 2 x day, and *Plantadophilus* 1 cap 2 x day. The goal is to stop the diarrhea and return patient to regular bowel movements. The patient was instructed to stop training for marathons until body heals enough to sustain such high competition. One thing to note is that she is reactive to the *Aspergillus Oryzae* species which is the source of the *GastroZyme* supplement she has been given. The patient was instructed to discontinue product if there are any adverse reactions, but we don't expect any since the capsule should not contain the actual *Aspergillus* species.

Office Visit: 6/11/19

Patient given follow up today and states she has had regular bowel movements for the first time since 25 years. Patient states she began with normal stool on May 9th, one week after beginning her protocol and believes she didn't feel improvement right away because she ate pistachios that day and had a bad reaction which worsened her diarrhea for days. After her bad reaction she states little by little for the next week she began forming normal stools. Since then she has not had diarrhea and she has been going from 2-4 times a day normally.

For the past 2 weeks, patient has begun training again for a marathon. Patient has gained 4 lbs, had a bout of depression last week but now feels a lot better. Her sugar cravings have improved and salt cravings have also improved. Patient NRG has improved, is falling asleep very well and staying asleep which was a problem before, menstrual cycle normal, and has not experienced headaches.

Patient states protocol is going very well and feels good with taking the enzymes and as a matter of fact she takes more than prescribed when she has gone out to eat. Patient is very happy she no longer deals with diarrhea on a daily basis and quality of life has improved 100%. Patient will continue

on *Thrive in 63* diet along with Vitamin D 10,000 IU per day, *GastroZyme* 2 caps 3 x day after each meal, *TPP Liver Support* 1 cap 2 x day, *TPP Probiotic* 1 cap in the morning and 1 cap at bedtime.

Discussion

Chronic diarrhea, including Collagenous Colitis, is of unknown etiology and has possible genetic and environmental factors to consider. In this case, after identifying the body's immune response to 315 items through a food sensitivity panel we were able to calm the immune reaction the patient was triggering on a daily basis. The goal of restoring normal bowel function has been reached which is a sign of improvement and the beginning of healing of the digestive tract. The vitamin D was given in order to support the immune system and increase her blood levels, the liver support was given due to high ALT, the probiotic was given in order to replenish good intestinal flora, and the *GastroZyme* was given to help soothe and heal the intestinal lining. The patient was given the recommendation to continue an all-natural, organic, GMO-free diet along with enzymes and probiotics for optimal gut function.

For more information, please contact:
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