TROUBLESHOOTING: CLEANSE PHASE

The 2 day cleanse results in significant symptom relief for around 90% of people. For the other 1 in 10 people I believe that pathogenic bacteria are still leaking into their bloodstream through the gut wall, even in the absence of food, and that the proteins associated with these bad bacteria are activating the immune response and therefore the subsequent attack on the joints.

The individuals who fall into this 1 in 10 category can find it harder to heal, since I feel that they are the ones with the most severe leaky gut, or greatest bacterial overgrowth, or both. One client in my online forum reported little relief after doing the two-day cleanse. She then had a stool test analysis, which found virtually zero detectable healthy bacteria in her intestines. I have further anecdotal evidence over the years that have let me to associate hard-to-treat cases with non-responders to the two-days cleanse. Does this mean this Program is not for them or they have no chance of healing? Not at all. However expectations need to be managed and healing from this point may take longer. Personally, if I were in that situation based on what I know now, I would focus my efforts on getting my medical treatment perfect (which is, of course, good practice anyway) by working closely with my Rheumatologist to find the right drugs to get my pain levels right down and my CRP and ESR back to the normal range. This way, pain is at an absolute minimum, joints are being protected, and with the low pain and swelling it sets up a good platform for some serious levels of exercise. Then, in parallel to this, I would eat a low-fat plant-based diet like I’ve described in this Program and, at a point in the future where the disease feels stable and ‘predictable’, then a slow and steady lowering of medications could be attempted with doctor sign-off and close observation of the monthly inflammation markers.

BASELINE AND REINTRODUCTION PHASE

Care needs to be taken by the Rheumatologist to avoid throwing fuel on the fire when administering medications. Research shows that prednisone, antibiotics and NSAID’s can significantly deplete gut wall integrity – via leaky gut, reduced protective intestinal mucosa or diminishing the populations of healthy bacteria. So proposed medical interventions with these particular drugs could shackle attempts to heal regardless of the quality of foods being eaten. So drug choices need to be made with care, taking all factors into account – not just external symptoms, but the overall affect the drug may have on the area of the body that we are most trying to heal.

The 10 day baseline/elimination phase follows immediately from the 2 day cleanse.

Typically, pain levels during the baseline phase are not as low as during the 2 day cleanse. Some pain returns to the body as food returns to the digestive system and the inadequacies of the digestive system are revealed. That is, food particles leak into the bloodstream once more and the immune system responds.

Thus, it is important to understand that some pain will be present during the baseline phase, but the expectation is that the pain will be at lower levels than where it was before starting the Program.

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For perhaps 1 in 10 people, they do not feel better at the end of the 12 days compared to how they felt before starting the Program. These people fall into 1 of 2 camps:

1. Got pain relief during 2 day cleanse, but significant pain remains after 12 days – see checklist below.
2. Did not see symptomatic relief during the 2 day cleanse. See Cleanse Phase troubleshooting comments above.

**Understand that pain moves around** – Often inflammation will dislodge out of a joint and end up in another. When this happens it’s hard to tell if we have improved since one joint is better whilst another feels worse. That’s why monthly blood tests are essential, so that a quantitative figure can be applied to the total inflammation in the body. Note that if a large joint is letting go of its inflammation, many other smaller joints may become affected – since the physical space of one large joint houses so much inflammation that it can transfer to multiple other joints of smaller physical size. (I saw this pattern over the years with my monthly bloodwork. My CRP would always be higher if only my knee was inflamed, compared to if only a bunch of little joints were inflamed. The bigger the inflamed joint the more total inflammation is in the body).

**Don’t load swollen joints** - Pressure during the day on the ‘affected’ joint. For example, carrying heavy items on inflamed elbows or putting lots of sideways pressure into ankle joints.

**Finish dinner early** – 7pm is the cutoff time. For ‘normal’ healthy people their digestive systems can tolerate late night meals. However, when you have a week digestion you need to avoid eating during the times of low digestive activity.

**Watch how you’re sleeping** – Beware that you’re not sleeping awkwardly on the affected joints. Try side sleeping vs back sleeping and if the RA is in your elbows or shoulders, you may find you’re aggravating it if you tuck your arms under the pillow or place them over your head at night. Investigate and see if you can see trends.

**Chew** – Make sure you let your jaw and teeth do a lot of the heavy lifting. This makes it easy on your troubled digestive system, like putting kindling into the fire to burn, rather than large logs.

**Review Medication Changes** - Have you changed medications within a few weeks of this process? If so, the lag time effect of coming off these drugs (or lowering these drugs) will present itself as 'new pain' during the 12 days when it's really just existing inflammation that is no longer being suppressed now showing up. This applies to DMARDS such as Methotrexate, Plaquenil (hydroxychloroquine) and Azulfidine (sulfasalazine), Biologics and lowering of NSAID dosages. Be honest and accurate with recollection of when these were altered last. This is the most common reason of all that people experience mixed results during the first week.

**Exercise** – Two types of exercises are required. Local ‘joint specific’ exercises can shift the circulating immune complexes out of a joint (for example, yoga poses on the lower legs for knee issues) whilst sustained cardiovascular exercises are needed to shift this inflammation out of the bloodstream (so that the inflammation doesn’t just end up in other joints). Both types of exercises are required for the large joints, whilst only the cardiovascular exercise is needed for the smaller joints (hands, ankles, fingers, feet, jaw etc). Bottom line is we must shift this waste out of the body. At least some 30min + of daily walking is helpful since the lymphatic (waste removal) system has no pump like blood does. This is an absolute minimum just for basic maintenance. However, to actually get significant results and quality pain relief from exercise, a minimum of 30
minutes of sweat-forming cardiovascular activity is required each day. If this is impossible right now, start slow with the walking (or yoga) and build up from there. I cannot overemphasize how important exercise is. If it wasn’t obnoxious I would just repeat the words ‘exercise more exercise more exercise more’ for 10 consecutive pages.

Go Green – Nothing beats leafy greens. Get them into you in double or triple the current quantity. Can't eat them plain? Introduce green smoothies now and see if that helps you move forward. Do the green celery and cucumber juices. Don’t delay. No excuses. This stuff works, just do it ok?

‘Good’ is actually ‘Great’ - in the early stages there is no 'zero pain' like you get with the 2 day cleanse. Watch the overview video in the Training Section about how this works. I did so much of my healing with low pain levels (not zero pain levels) and so if you have made improvements compared to where you were before you began this process then you are on the right track. More of the same is required.

It may just take a little longer - something like a meat-heavy diet sets you up for poor gut bacteria that thrive on more of those same foods. So your gut bacteria need time to reform numbers to digest some of these new foods. Some clients say that it took a few weeks before they started noticing improvements. Although this is fairly uncommon, it could well be the case for you also depending on how your unique gut health is.

Hit the toilet - If you want to see dramatic improvements in your RA then you must have regular bowel movements. Concentrations of healthy bacteria are significantly lower in constipated people, and constipated people also have higher levels of pathogenic bacteria, fungi and have a higher degree of intestinal permeability (leaky gut). Luckily, relief of constipation helps resolve these conditions.

The optimal number of bowel movements per day will differ from person to person. Generally, an elimination for every meal is a good guideline, thus producing 3 easy-to-pass bowel movements per day. Some people may go more regularly, and some a little less, but at least once per day should be an absolute minimum. Here's how to keep things moving like clockwork and keep joint pain low:

- As soon as you need to go, then go.
- Prevent toxic reabsorption by getting rid of the waste as soon as it makes itself known to you
- Exercise more. Simply walking more with move things along, or any form of exercise will help
- Drink more water. As poo moves through your intestines, water is taken from it back into the body. So to avoid hard, brittle poos that take time to pass you need to drink more water.
- If you’re really irregular, you could try some coffee enemas at home. These are just quality coffee, warm water, a home enema kit, and let gravity do the work. I don’t endorse regular colonics (at hydrotherapy centres) since without extraordinary after-treatment care this can deplete you of too much healthy bacteria

Heavily inflamed vs Damaged joints – If you have joints that have been affected by RA for many years and are now stiff, gritty or clicky then it’s likely they are somewhat damaged from long-term inflammation. These joints are unlikely to show improvements in the short term with diet since they are structurally altered. The aim with these joints is to establish suitable exercise
programs for each affected area to strengthen the soft connective tissue around the joint to make it more robust and stable in parallel with the Paddison Program.

Occasionally, it’s the pseudo grains – Very occasionally some people cannot even tolerate the gentle nature of the pseudo grains of buckwheat and quinoa. Although they are a 99/100 in terms of health, they do contain a lot of protein which may be upsetting your condition. Try separating them to test them individually and see if you prefer one to the other. Next, try substituting them with basmati rice for a few meals, whilst changing nothing else, and see if the reduction in protein helps. Failing this, try concentrating on the sweet potato for a day or two. This usually does the trick for even the most delicate digestive systems. Then, slowly challenge the pseudo grains back in bit by bit.

REINTRODUCTION PHASE

If you have hit a roadblock when you start reintroducing foods, then go through this checklist and implement all of it (or as much as you possibly can) and you'll move forward.

Note: some of these tips are also tips from the previous phase. But it can’t hurt to hear them again, and best to be listed below for completeness.

Back to basics – When pain strikes jump straight back onto your baseline meals such as the 2 grain mix, sweet potatoes or mega miso basmati meal and lots of no dressing salads (especially baby spinach). In less than a few days this should restore your pain levels back to low levels. Then you may proceed with introducing new changes and food testing once again. If you have already successfully reintroduced additional foods that you know are safe, you can usually eat these again within a few days and do not need to test them all again. Don’t hesitate to reset. Do it often and quickly. Think of it like a sword fight - a 'flare' is suddenly your opponent swinging a sword. Respond quickly in defending yourself and countering the attack.

Green Time - Get back into the celery and cucumber juice, at least one glass per day between meals.

Alternative to NSAIDs – These drugs will forever hold you back. Try to 'swap out' these tablets for something less harmful. Talk to your doctor about changing to paracetamol instead and see if paracetamol is a possibility for you. Even better, consider trying curcumin which is derived naturally.

Note that most NSAID’s including aspirin are only recommended for use for a few weeks at a time. If you simply cannot get off your NSAID’s then the only thing I know that offers equivalent pain relief is…

Bikram Yoga - Do it. Do it. Do it. Can I make this any clearer? Is there a class near you? If you are going twice a week, go three times. If you're going 4 times go every day. You HAVE to do Bikram Yoga if you aren’t making progress forward, even if it means taking a break for a few weeks from your regular routine and visiting a town that has it. It will provide such relief that you should probably be able to get off any NSAID’s, which will help you advance forward in your gut healing. Simply find a place and go.

Exercise More - If there is no Bikram Yoga near you, then it’s up to you to get your cardiovascular exercise in your own way. Exercising in an aerobic manner will alkalize you, clean

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out circulating immune complexes and detox your entire body. It’s natural, it’s good for your overall health and it simply works. If you are very incapacitated, start out very slow using body parts that are free from RA. Perhaps start with a light 10 min per day, then work your way up to preferably 30 – 40 min per day, so that you work up a decent sweat. You’re getting healthy again, and it feels good. Really good.

**Review Your Meds** - Are you on any kind of drug that has listed side effects of gastrointestinal irritation or stomach upset? Naturally this isn’t synchronous with our attempts to heal the gut.

Have you been taking prednisone for a long time? This drug has been shown to increase gut permeability, thus could be creating a 'one step forward, two steps back' situation. If the answer is yes, the approach may be to talk to your Rheumatologist about alternative drug treatments that do not hold your healing back. A DMARD such as Methotrexate, for example, could be discussed with your doctor.

Are you taking sulfasalazine? This drug has an antibiotic component. Could it be holding you back? It's hard to say - certainly before demanding a change of drugs with your Rheumatologist you could employ every other strategy listed here in the troubleshooting guide and you'll probably make great progress forward in any case. So it's not conclusive to me as to any negative effects of sulfasalazine so I'd be doing everything else I could to improve my condition first, and then if you're doing everything and still not making progress then it may be something to talk to your doctor about.

**Check Vitamin D** – Do you know your levels? If not, have it measured immediately. If your levels are below 150 nm/L then use sunshine and/or consider a liquid vegan vitamin D supplements to raise it slowly and steadily. Measure again in 4 months. Keep on this.

**Calm Time** - Reduce your stress load as much as you can. Can you spend some time outdoors in nature, even if it's a local park to sit and reflect? At least once a day, find a private place and sit alone. Put some earplugs in and breath deeply and slowly in and out through your nose for 10 peaceful minutes. Exercise also helps to lower stress - so this is yet another reason to exercise, in addition to these stress reduction techniques, so you can get out of your brain.

**Settle, Pettle** – Are you worried? I know this sounds like the same bullet point as the previous one regarding stress, but I have deliberately separated them for good reason. We tend to stress about things like work and we tend to worry about our health. I believe that being worried has the same fast-acting negative response on the digestive system [53]. So, if you're no longer making progress and you start to worry, you're working against yourself from the inside out to get back on track or 'get into the groove'. On the flipside, when we're in the groove we are happy and excited (the enemy of worry) and so our digestive process is supported and thriving. So if you’ve become worried, take massive action to turn it around. What makes you happy and excited? Do it. And do it now!

**Are you newly diagnosed?** From observation of others the disease can sometimes 'get away on you' quickly at the start until it finds it's own level of severity. During this time it can be very difficult to slow this process, regardless of the most diligent dietary and exercise efforts. If that is your situation, despite all of the information provided here, then an increase in medications should be discussed with your doctor to control your inflammation. Later, when things are under control and steady, you can discuss lowering medications with your doctor if your blood tests support this.
Ditch the oils - Have you omitted all oils in your foods and cooking?

Minimise the fat - Is there any source of high-fat foods in your diet, such as avocados, nut butters, nut milks, soy milks or anything else that is a non Paddison Program item?

Are high-protein foods gone? Is there any source of high-protein foods in your diet (other than the recommended buckwheat/quinoa) such as protein powders, non-sprouted nuts and seeds or non Paddison Program items?

Finishing evening meals early? Have you finished your meal every evening before 7pm?

Including seaweed? Are you eating your baseline meals with the seaweed included? Although it provides no calories, the seaweed in the meal is extremely effective and fast at increasing alkalinity. Potentially even snack on it between meals.

Sleeping cautiously? Try sleeping alone to spread out your limbs or experiment with side/back/stomach sleeping and look for patterns with what works best for various joints. Watch my video in ‘The Advanced Healing Package’ on this if you have knee troubles.

Drinking 2 litres of water a day? Drink between meals mostly, and a glass first thing in the morning is a good way to start the day.

Test reducing water intake with meals.

Try drinking a glass of OJ with meals - to increase HCL in your stomach to aid protein digestion? (It also increases potassium, vitamin C and iron absorption).

Consider Betain Hydrochloride supplements – This is a potential alternative to increasing your HCL in your stomach to aid protein digestion?

Have you lowered meds recently? For example, drugs such as DMARD’s and Biologics have a several week lag time. As these slowly leave your system, the ‘true’ state of your underlying pain will be revealed several weeks after you have made the dosage adjustment. If this is the case, you will need to wait until the drug levels have settled before doing any further experimentation instead of having clouded results.

Hit the toilet often - Are you bowels moving at least once per day? (Note – this is not applicable during the cleanse phase). Shift some waste by exercising. This will shake things up! If you can’t exercise enough yet, try some over the counter laxatives, fresh plumbs, or another home remedy that you have found that works for you, but avoid oil-based solutions.

Don’t self sabotage - Ensure you are feeding your mind with positive affirmations and expectations, coupled with realistic and time-based goals on your fridge, and have the support of your family members.

Tested Bromelain? Get help with your protein digestion. (Watch out for ‘fillers’ in the cheaper brands. Get 100% bromelain as the only ingredient).

Tested Potassium? Try adding Potassium with Magnesium to bridge a possible nutritional deficiency and to boost your natural cortisone production.
Are you eating fermented foods? Miso is the best. Even if you can’t find brown rice miso paste it is unlikely that soy miso will cause problems, due to the fermented nature of the food – so definitely try introducing it. It’s easy to store in the fridge, it can go in the 2 grain mix or basmati rice and is pretty easily available with a fairly long shelf life. It was my staple. Also test kimchi, sauerkraut or other fermented vegetables.