

# A recipe for health

Karen Ward endured crippling Crohn's disease for years—until she decided to eat her way to good health



Nutritional therapist Karen Ward describes herself as a 'Duracell Bunny'. When she's not advising clients on how to eat healthily at one of the three busy clinics she runs in County Cork, Ireland, the 40-year-old is giving nutritional talks and food demos in schools, sports clubs and health expos, or looking after her two young daughters, Abby and Aoife, alongside her husband, Steve.

But life was very different for Karen seven years ago. Her nights were spent doubled up in pain on the bathroom floor, while her days consisted of lying on the couch feeling "absolutely exhausted". The reason for her nightmarish existence? Crohn's disease.

Crohn's is a chronic condition that causes inflammation of the lining of the digestive system. The most common symptoms include diarrhoea, extreme tiredness, unintended weight loss, blood or mucus in stools and abdominal pain—pain that Karen now describes as "worse than childbirth" and "like having a ball of barbed wire in your gut that's constantly rotating".

There's no conventional cure, and medicine's only answer is powerful drugs to tackle the inflammation (steroids) or to suppress the immune system (immunosuppressants), which is thought to be working on overdrive in people with Crohn's.

If things get really bad, there's also the option of surgery—usually involving removal of the inflamed, damaged sections of the digestive tract—which around half of all Crohn's patients go through at some point. But that still doesn't fix the problem.

Karen had all of these treatments. And in February 2009, when a cocktail of drugs was failing to control her symptoms, Karen woke up after a 'hemicolectomy' that had cut away the whole right side of her bowel. Although Karen felt lucky to be alive, she was still looking at a lifetime of combination-drug therapy—something she felt her ravaged body wouldn't be able to handle.

Sitting in her hospital bed looking down at her breakfast of marmalade on white toast, cornflakes and a cup of builders' tea—part of her recommended diet—Karen had a "light-bulb moment".

"I wondered how I was ever going to heal my body with what looked back at me," she said. It was then that she made the decision to take control of her health and "not become another statistic".

### Rest and research

While recovering from the operation, Karen started to research her condition and read every journal article she could find on the subject. But it was a book called *Breaking the Vicious Cycle* by biochemist and cell-biologist Elaine Gloria Gottschall that changed everything for Karen. And if the 642 positive reviews on Amazon.com are anything to go by, it seems to have had a positive impact on the lives of many others too.

The book is all about healing the intestine through diet by avoiding foods that are tough on the digestive tract while eating more of the foods that support it. This made perfect sense to Karen who, despite meeting with several dietitians over the years, had never been given any specific dietary advice—other than to make sure to eat, as she was severely underweight. "All they told me was 'eat whatever you want,'" said Karen. "It didn't matter what it was."

It was a revelation, then, to read about the Specific Carbohydrate Diet (SCD) in the book—a diet intended for people with Crohn's disease, ulcerative colitis and other inflammatory bowel disorders. Developed by US paediatrician Dr Sidney V. Haas, the diet allows carbohydrates with a single unit of sugar (monosaccharides), but those with two or more units (disaccharides and polysaccharides) are completely off the menu.

As the website for *Breaking the Vicious Cycle* explains, "Complex carbohydrates that are not easily digested feed harmful bacteria in our intestines, causing them to overgrow, producing byproducts and inflaming the intestine wall." The diet is said to work by "starving out

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## The SCD diet

Several recently published studies support the use of the Specific Carbohydrate Diet (SCD) for Crohn's and other inflammatory bowel disorders. One retrospective evaluation of seven children with Crohn's reported that "all symptoms were notably resolved at a routine clinic visit 3 months after initiating the diet",<sup>1</sup> while another small trial found "clinical and mucosal improvements" in children with Crohn's on the SCD diet for just 12 weeks, and also after a follow-up at 52 weeks.<sup>2</sup>

But what exactly can and can't you eat on the diet? Here's a list of some of the foods that are allowed (legal) and not allowed (illegal) with the SCD, based on the book *Breaking the Vicious Cycle*.

LEGAL	ILLEGAL
Fish	Buckwheat
Fresh fruit	Bulgur wheat
Black beans	Butter beans
Hazelnuts	Cereals
Honey	Artichokes
Butter	Corn
Broccoli	Chocolate
Aged cheese	Rice
Poultry	Potatoes
Pork	Parsnips
Spinach	Soybeans
Squash	Turnips
Ham	Mung beans

### REFERENCES

- 1 J Pediatr Gastroenterol Nutr, 2014; 58: 87-91
- 2 J Pediatr Gastroenterol Nutr, 2014; 59: 516-21

these bacteria" and restoring the balance of bacteria in the gut (see [www.breakingtheviciouscycle.info/p/beginners-guide](http://www.breakingtheviciouscycle.info/p/beginners-guide)).

With the help of her sister-in-law, Hazel, a naturopath with experience of treating chronic illness through diet, Karen put together an eating plan based on principles of the SCD. She gave up all grains, refined sugar and dairy along with her reliance on processed foods.

Far from being restrictive, Karen found that her new diet was very freeing and an eye-opener. "I rediscovered my love of food and cooking. I literally felt like I was cooking my way out of this awful disease."

Colourful fruit and vegetables became a key part of Karen's diet, rather than the bread and other foods she'd learned her digestive system couldn't cope with. She also included lots of fermented foods and drinks, like kimchi, sauerkraut and water kefir, as they contain beneficial bacteria that are good for the gut.

On top of this Paleolithic-style diet, Karen took a variety of nutritional supplements to help with digestion and gut repair, including probiotics, the fatty-acid butyrate, vitamin A, digestive enzymes and the amino-acid glutamine.

### Ditching the drugs

It wasn't long before Karen started to notice an improvement in her condition, and five weeks after her operation, she was able to stop taking her medication. She also found that the sinus problems she'd experienced for most of her life (see "The antibiotic link, page 60) cleared up. "I could breathe through my nose for the first time," she said.

Karen even felt well enough to visit her sister in Dubai, albeit armed with her supplements, special SCD crackers and coconut milk.

But Karen was still concerned about how her body would cope without drugs, so she sought the help of acupuncturist Stephen Gascoigne, who turned out to be a qualified medical doctor too.

"He played a massive part in my recovery," says Karen, as he helped her get back to the high-energy person she once was.

Six months post-surgery, Karen's fatigue, pain and other debilitating symptoms of Crohn's were gone. "I felt great," Karen declares, "and I haven't had any pain since."

### Looking ahead

Inspired by her own recovery, Karen started thinking about how she could help others in the same situation, and it wasn't long before she spotted an ad in the local paper for an open evening at the College of Naturopathic Medicine (CNM), which offers natural-medicine training through seven colleges located across the UK.

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Karen had previously been a project manager at a high-tech telecoms company, but after it closed down, she stayed at home to look after her children full-time—while also trying to work out what to do with the rest of her life.

Stumbling upon the CNM ad was a case of "right place, right time", says Karen, and encouraged by her sister-in-law, she went along to the open evening to find out about the various courses on offer. She didn't need much convincing before signing up for a three-year course of nutritional therapy, and she qualified in 2013.

Today, Karen has her own clinic at her home in Oysterhaven, Cork, and specializes in helping people with Crohn's and other gut-related disorders, including irritable bowel syndrome and gluten sensitivity. She's

## The antibiotic link

According to Karen, her early childhood “set the scene” for her Crohn’s disease, which wasn’t actually diagnosed until Karen was in her early 30s.

She was a very “snotty child”, suffering from constant sinus problems and one infection after another and, as a result, was “always taking antibiotics”. Karen believes the drugs wrecked her digestive tract, which then paved the way for her inflammatory bowel disease (IBD).

Although Karen can’t prove that antibiotics caused her Crohn’s, there’s convincing research evidence linking childhood use of such drugs—which “have the potential to alter the composition of the intestinal microflora”—with IBD, which includes Crohn’s.<sup>1</sup>

In one study, antibiotic users were up to three times more likely to suffer from Crohn’s as non-users. And those who’d had seven courses or more of the drugs were seven times more likely to have the disease.<sup>2</sup>

### REFERENCES

- 1 Am J Gastroenterol, 2010; 105: 2693–6
- 2 Gut, 2011; 60: 49–54

I will always have Crohn’s disease, but whether it’s active or not is up to me

her own best advert—she hasn’t seen a doctor for anything Crohn’s-related for four years—but her husband, Steve, comes a close second. Now converted to a sugar- and gluten-free diet, he’s free of the back pain that plagued him for years. According to Karen, “He’s better at nearly 50 than he was at 40.”

Karen and Steve’s children are also testaments to a healthy diet. They don’t eat gluten or any processed foods, and have never needed to see a doctor. Karen admits she’s strict with their diet, but says it’s because she never wants them to suffer as she had. “I want the food I give them to be medicine, not poison,” she says.

And remembering what she went through is all the motivation Karen needs to stick with her anti-Crohn’s diet. On the odd occasion that she’s slipped up, her body reacted straight away or at least not long after, so Karen appreciates just how important it is to stay on track.

“I will always have Crohn’s,” says Karen, “but whether it is active or not is up to me—and I find that pretty empowering.”

Joanna Evans



## Useful contacts

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