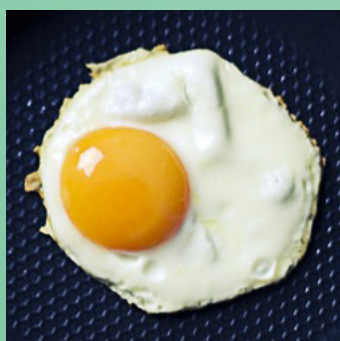




the
PALEO AUTOIMMUNE PROTOCOL
REINTRODUCTION
quickstart
GUIDE



What is The Paleo Approach?

The Paleo Autoimmune Protocol (also known as the autoimmune protocol or AIP) is a more specific version of the paleo diet aimed at regulating the immune system and giving the body the opportunity to heal from the damage of autoimmune disease. It works by addressing four key areas known to be important contributors to immune and autoimmune diseases. Drawing on insights gleaned from more than 1,200 scientific studies, these diet and lifestyle recommendations specifically target:

- **Nutrient density** (by focusing on consuming the most nutrient-dense foods available, which enables a synergistic surplus of micronutrients to correct both deficiencies and imbalances. A nutrient-dense diet further provides the building blocks that the body needs to heal damaged tissues.)
- **Gut health** (by supporting the growth of healthy levels and a healthy variety of gut microorganisms and removing foods that damage the lining of the gut while endorsing foods that help restore gut barrier function.)
- **Hormone regulation** (by addressing dietary factors like eating too much sugar or grazing rather than eating larger meals spaced farther apart as well as lifestyle factors like how much sleep we get, how much time we spend outside, how much and what kinds of activity we get, and how well we manage stress.)
- **Immune system regulation** (by restoring a healthy diversity and amount of gut microorganisms, restoring the barrier function of the gut, providing sufficient amounts of micronutrients, and regulating the key hormones that in turn regulate the immune system.)

The first dietary recommendation for those with autoimmune disease is to adhere to a strict paleo diet with no cheating. To be clear, this means: no grains, no legumes, no dairy, no refined sugars, no modern vegetable oils, and no processed food chemicals.



While other people may be able to enjoy the occasional bowl of rice or corn chips or even ice cream, if you suffer from an autoimmune condition, you are most likely not one of these people. Gluten-containing grains should be banned for life. Other grains and legumes can be very problematic for those with autoimmune conditions. Dairy of any kind (even grass-fed ghee which can still have trace lactose and dairy proteins!) should be avoided initially.

This may be true for the rest of your life but some people may be able to reintroduce many foods after their diseases are in remission. Foods can be triggers, including: eggs, nuts, seeds, nightshades, gluten cross-reactive foods, fructose in excess of 20g per day, alcohol, NSAIDS, non-nutritive sweeteners, and food additives. These foods are also omitted from the Paleo Autoimmune Protocol because they cause gut irritation, cause gut dysbiosis (overgrowths are most common), act as carrier molecules across the gut barrier, stimulate the immune system, increase gut permeability, and/or cause inflammation.

In addition, it's important to ensure that your blood sugar levels are well managed. This does not mean low carb. It just means not high carb. Perhaps even more important than removing foods that negatively impact gut health or stimulate the immune system is eating a nutrient-dense diet. Micronutrient deficiencies are the strongest diet-related factors contributing to increased risk of autoimmune disease. If you have an autoimmune disease it is highly likely that you are deficient in a number of nutrients.

So, just as some foods should be eliminated, there is also a focus on eating more highly nutrient-dense foods like organ meat, fish and shellfish, green and colorful vegetables, fruit, cruciferous vegetables, sea vegetables, quality meats and fats, probiotic foods, and bone broth.

However, the Autoimmune Protocol is not a life sentence. Reintroducing some foods after your health has improved can be a big boost to quality of life for many people. Being able to eat eggs for breakfast or bake with almond flour or enjoy a square of dark chocolate can make a huge difference in terms of being able to sustain your healthy new habits. However, don't be too eager to start reintroducing foods. Generally, the more time you give your body to heal, the greater the likelihood that you will be able to reintroduce some foods successfully. This guide will explain when to reintroduce foods, how to reintroduce foods safely, and what kinds of food reactions to look out for.



REINTRODUCING FOODS



At a bare minimum, you should be strictly compliant with the AIP for at least one month (three to four months would be better) before reintroducing foods. And you should definitely see significant improvements in your symptoms first, with evidence that your gut has healed substantially and that your immune system is no longer attacking your body (which will be apparent by how you feel).

It is very important to make sure that your stress is well managed, that your activity level is appropriate, that you are getting plenty of sleep every night, and that you are spending time outside every day before starting food reintroductions, because these all affect your body's ability to tolerate foods as you reintroduce them.

Unfortunately for some, permanent damage to organs or tissues may mean that a full recovery is not possible, but it doesn't mean that food reintroductions are impossible. Even though you have successfully regulated your immune system and healed your gut, you may, for example, continue to require thyroid hormone replacement therapy if you

have Hashimoto's thyroiditis, or you may not completely regain your balance if you have multiple sclerosis.

If you are in this camp, you can gauge whether or not you feel ready for some food reintroductions after all of the following are true:

- You are able to completely digest your food (even if you still need digestive-support supplements) and do not suffer any gastrointestinal symptoms
- Your autoimmune disease is no longer progressively getting worse.
- You are able to manage your autoimmune disease without DMARDs, steroids, or NSAIDs.

When you introduce particular foods is ultimately your choice. How you feel is the best gauge, and only you will know if you are ready. A word of caution, though: don't let cravings influence you.

Your decision should come from feeling good and seeing improvement in your disease.

how to **REINTRODUCE FOODS**

Reintroducing a food after eliminating it from your diet for a while is called an “oral food challenge test,” an “oral challenge,” or simply a “food challenge.” The suggested procedure for a food challenge detailed here assumes that you are not allergic to these foods—that is, you do not have an IgE-mediated reaction to them. If you have a diagnosed allergy to a food and want to perform a food challenge to see if your allergy persists, consult with your doctor.

Food challenges are done one food at a time, once every three to seven days. If you generally tolerate new foods well as you challenge them, you can reintroduce them faster (every three to four days). If you are sensitive to many foods, you should reintroduce them more slowly (every six to seven days, or even longer).

Reintroducing foods can be tricky because non-IgE reactions can take anywhere from an hour to a few days to manifest (although symptoms generally appear one to four hours after consuming the food and peak within four to twenty-four hours).

Remember that symptoms can occur even a couple of days after you eat the food. If your symptoms are delayed, it can be a little tricky to determine whether or not there is a link to the food you are challenging. If you aren't sure, go on to the next food (without incorporating the other one back into your diet) and then revisit that particular food in a couple of weeks. Don't reintroduce a new food if you have an infection, had an unusually strenuous workout, got less sleep than normal, are feeling unusually stressed, or are under any other circumstances that may make interpreting a reaction difficult.



REINTRODUCTION 101

1. First, select a food to challenge. Be prepared to eat it two or three times in one day (but not again for a few days).
2. The first time you eat the food, eat half a teaspoon or even less (one teensy little nibble). Wait fifteen minutes.
3. If you have any symptoms, don't eat any more. Next, eat one teaspoon of the food (a tiny bite). Wait fifteen minutes.
4. If you have any symptoms, don't eat any more. Next, eat one and- a-half teaspoons of the food (a slightly bigger bite).
5. That's it for now. Wait two to three hours and monitor yourself for symptoms.
6. Now eat a normal-size portion of the food—either by itself or as part of a meal.
7. Do not eat that food again for three to seven days (and don't reintroduce any other foods in that time, either). Monitor yourself for symptoms.
8. If you have no symptoms in the next three to seven days, you may reincorporate this food into your diet.



Alcohol

Alcoholic beverages are an exception to this protocol for reintroductions: you will have just one small portion on the challenge day. Drink a small glass and make sure that the beverage is gluten-free. The maximum you should drink is eight to nine ounces of cider or gluten-free beer, five ounces of wine, three to four ounces of fortified wine (like sherry, port, or Madeira), two to three ounces of liqueur, or one to one-and-a-half ounces of spirits. Wait at least one week before having another glass. You can gradually increase the frequency of indulgence to about twice a week. (It is unlikely that those with autoimmune disease will tolerate alcohol in larger doses or more frequently, but you are welcome to test this for yourself.) Keep in mind that you will feel the effects of alcohol sooner than you used to. Please drink responsibly.

WHAT DOES A FOOD REACTION *look like?*

Reactions can vary wildly and include any of the following:

Gastrointestinal symptoms: tummyache, heartburn, nausea, constipation, diarrhea, gas, bloating, undigested food particles in stool

Symptoms of your disease returning or worsening

Mood issues: mood swings, feeling low or depressed, being less able to handle stress, increased anxiety

Increased mucus production: phlegm, runny nose, or postnasal drip

Aches and pains: muscle, joint, tendon, or ligament

Food cravings for sugar or fat, or desire for caffeine

Reduced energy, fatigue or energy dips in the afternoon

Pica (craving minerals from nonfood items like clay, chalk, dirt, or sand)

Dizziness or lightheadedness

Changes in skin: rashes, acne, dry skin, little pink bumps or spots, dry hair or nails

Sneezing

Itchy eyes or mouth

Coughing or increased need to clear your throat

Headaches (mild to migraine)

Trouble sleeping: either falling asleep or staying asleep or just not feeling rested in the morning

Even having just one of these symptoms may indicate that you are sensitive to a food.

If you are testing a food that would normally be consumed in small amounts (such as a spice), the most you should eat is a normal serving size. This means scaling back the amount in step 2—so instead of starting with half a teaspoon, you would start with a pinch. Alternatively, you can cook a dish that uses that food and scale your portion up or down to consume the recommended amount of the new food.

Sometimes symptoms can creep up on you. It is easy to want a food to be tolerated so badly that you ignore your body's reaction to it until you have been eating that food for so long that you just can't ignore the symptoms anymore (which may take several weeks). This is especially easy to do when symptoms are mild and fairly nebulous (such as mood changes and fatigue). In this case, it may be difficult to retrace your steps and determine the real culprit. Look to any foods you have been eating frequently since reintroduction. Eliminate all possible candidates (which might mean the last six or more foods you reintroduced). When in doubt, roll back to the full-on Paleo Autoimmune Protocol for a few weeks or until your symptoms resolve completely, and then start food reintroductions again (being more critical and more patient this time, and waiting longer between reintroductions).

You might be able to tolerate a food if it's eaten occasionally, but not if it's part of your everyday diet. It may be difficult to determine which foods these are, how often you can tolerate them, and how much of them you can eat. These are often the foods that cause a slow development of symptoms after reintroduction and the same ones that sent you back to square 1 when you reintroduced them. If you aren't sure if a food is causing a reaction, it's best to avoid it until you have finished reintroductions and have found a maintenance diet that works for you. You might then reintroduce these gray-area foods at

irregular intervals and in small portions, always monitoring yourself for symptoms of a reaction. You may wish to keep many of these reintroduced foods in reserve as occasional indulgences. For example, even though you used to drink several cups of coffee a day, you may choose to keep your coffee consumption extremely minimal even if your challenge was successful. Maybe coffee will now be a treat you save for Sunday brunch. Some of the foods excluded from the Paleo Autoimmune Protocol (like coffee) create the most havoc when consumed frequently, in large quantities, or in the presence of a disrupted gut barrier, hormone imbalance, and an overactive immune system. This means that thinking of these foods as occasional treats is a good way to enjoy them while avoiding the downside that comes with habitual consumption of them. After all, if giving up coffee was hard for you, do you really want to get sucked back into an emotional or physical reliance on it? Also keep in mind that some of these foods may never be well tolerated, even as a once-in-a-blue-moon indulgence, so you may just decide not to challenge any of the foods most likely to be problematic and assume that you are healthier without them.

Which foods you tolerate may change over time. If you reintroduce a food now and have a reaction to it, that doesn't necessarily mean you will never be able to eat that food. Especially if your reaction is mild, you may want to rechallenge that food in six months or a year. Also, new food sensitivities may develop. It is possible that a food that you successfully reintroduce now won't work for you in the future. (This usually occurs in tandem with increased stress, decreased sleep, infection, or other assaults on your gut health and immune system.) If a food stops working for you, it's important to recognize that as early as possible and exclude it from your diet.

SUGGESTED ORDER OF *Reintroduction*

When it comes to food reintroductions, there is no right or wrong way to choose where to start. My suggested order of food reintroductions takes into consideration both the likelihood of reaction (based on what science says about how that particular food interacts with the gut barrier or the immune system) and the inherent nutritional value of the food. There are four stages. The first stage includes foods that are most likely to be well tolerated or are the most nutrient-dense. The second stage includes foods that are less likely to be well tolerated or are less nutrient-dense. The third stage includes foods that are even more unlikely to be well tolerated. The fourth stage includes foods that are most likely to be intolerated and that you may never wish to challenge.



Challenge all the foods in stage 1 that you want to reincorporate (except any that you are allergic to or have a history of severe reactions to) before moving to stage 2. Follow the same protocol before moving from stage 2 to stage 3 and then from stage 3 to stage 4. You don't have to tolerate all the foods in stage 1 to be able to move to stage 2, but if you don't tolerate many (or most) of the foods, take a break from new food reintroductions for a few months and then rechallenge those stage 1 foods. If you still react to them, wait a few more months and then start challenging stage 2 foods (keeping the intolerated ones from stage 1 out of your diet).

Stages of REINTRODUCING FOODS

- egg yolks
- legumes with edible pods (green beans, scarlet runner beans, sugar snap peas, peas, etc.)
- fruit-and berry-based spices
- seed-based spices
- seed and nut oils (sesame seed oil, macadamia nut oil, walnut oil etc.)
- ghee from grass-fed dairy



Stage 1

- seeds (including whole, ground and butters like tahini)
- nuts (including whole, ground, and butters like almond butter) except cashews and pistachios
- cocoa or chocolate
- egg whites
- grass-fed butter
- alcohol in small quantities



Stage 2



Stage 3

- cashews and pistachios
- eggplant
- sweet peppers
- paprika
- coffee
- grassfed raw cream
- fermented grass-fed dairy (e.g., yogurt and kefir)

Stage 4



- Other dairy products (e.g., grass-fed whole milk and cheese)
- chili peppers
- tomatoes
- potatoes
- other nightshades and nightshade spices
- alcohol in larger quantities
- white rice
- traditionally prepared legumes (ideally soaked and fermented)
- traditionally prepared gluten-free grains (ideally soaked and fermented)
- foods you have a history of severe reaction to
- foods you are allergic to

The foods in stage 4 might normally be allowed (at least as infrequent treats) on a standard Paleo diet, a primal diet, or a traditional-foods diet, such as one based on Weston A. Price Foundation guidelines. Especially if your autoimmune disease does not remain in full remission throughout the process of food reintroductions, you may not want to challenge any of the foods in stage 4 (or even stage 3).

Some foods that are similar are divided into two or more stages. This includes nightshades (stages 3 and 4), dairy products (stages 1, 2, 3, and 4), and both nuts and seeds (stages 1 and 2). If the foods in these “families” are not tolerated in earlier stages (for example, if ghee causes a reaction), then do not challenge the other foods in that family in later stages (that is, do not challenge butter, cream, fermented dairy, or other dairy products). If you don’t want to challenge a food (because you don’t like it or because you suspect, given your history, that it may be particularly problematic for you), then don’t. You don’t have to challenge any at all if you like how you are feeling and just aren’t tempted by your old foods. There is no nutritional advantage to adding these foods back in. What’s important is that you find something that works for you.

Yes, food reintroductions can be a long process, but reintroducing foods too quickly may cause a flare in your autoimmune disease, which has the potential to set you back for much more time than it would have taken to reintroduce foods carefully and methodically.

How to **KEEP TRACK**

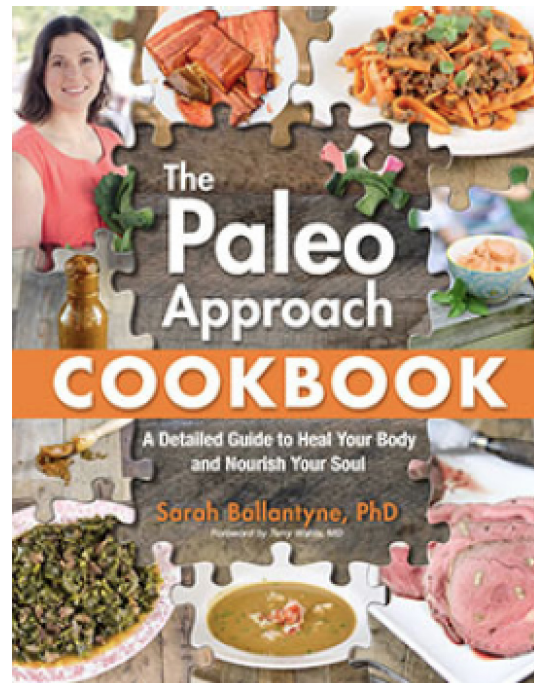
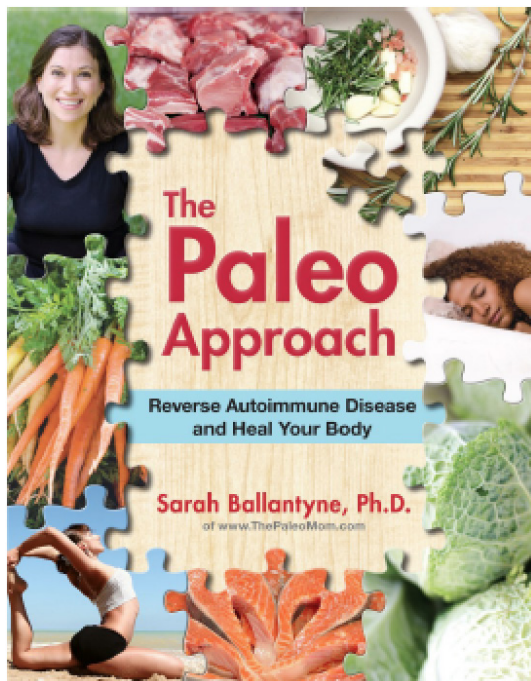
Keeping a food journal can be very helpful in identifying which foods are problems for you. The most basic way to do so is simply to make note of every time you introduce a new food, start a new supplement, or eat something that isn’t part of your normal routine. If you have a reaction, it’s a simple matter of checking what out-of-the-ordinary foods you’ve eaten in the last week.



In the case of mild reactions that make identifying problem foods more challenging, it’s worthwhile to keep a more detailed journal. Write down all the ingredients of a meal and what time you ate. Also document what symptoms you experience and when, whether you think they are related to food or not. These more detailed records can help you or a health care professional identify patterns and links between foods and symptoms that might not otherwise be obvious.

WANT MORE RESOURCES ON THE AUTOIMMUNE PALEO PROTOCOL?

Check out my two book on the Paleo Autoimmune Protocol!



And check out these other AIP resource pages on my website!

