



YEAST (CANDIDA) OVERGROWTH AND ITS TREATMENT

Your clinical situation indicates that you have a significant overgrowth of yeast, usually *Candida albicans* but sometimes other species are involved, in your sinuses, intestinal, and/or respiratory tract. This is typically the result of many possible factors including severe stress, extensive antibiotic exposure, multiple pregnancies, use of birth control pills, diabetes or "pre-diabetes" and high sugar/processed carbohydrate intake that could have occurred at any time in your life, even in childhood. The overgrowth will persist, however, if one of the above causes is still ongoing. It is my experience that people who continue to hold on to past wounds, both physical and psychological, or have ongoing patterns of feeling trapped or victimized, have an especially strong tendency to hold on to yeast. One of the main problems is that, people who have a *Candida* overgrowth will have allergic and inflammatory reactions to many foods that cause innumerable problems all over the body. In fact, the more often you eat the food, the more likely it is that you will react to it. The biggest problem is usually gluten, but other foods like dairy, corn, and soy are frequent culprits. That is why we need to give you a therapeutic diet until you are much better.

In your case, the yeast problem appears to be significant enough that we are going to attempt to kill the yeast with medication. Bear in mind, if you had a blood test and it was negative, it does not mean that you do not have a *Candida* problem, only that your body is not producing antibodies to try to kill it. If the blood test was positive, however, we can frequently use that as a marker to tell how well your treatment is progressing and whether more medication is needed.

If I think you have a particularly severe case, I will start with the drug nystatin, which is not a "statin" drug used to treat cholesterol, even though the name is similar. This is the same medicine used to treat babies for thrush. It is not absorbed into the body and stays in the intestinal tract but, since this is the usual place that many people have the worst problem anyway, is very helpful for most patients. Usually, after a month or so of nystatin, we will then add fluconazole, whose old brand name was Diflucan. This drug is stronger and gets into the blood stream and, as a result, all over the body including into the sinuses and lungs where yeasts commonly thrive as well.

Another frequent problem is that people will be having allergic and inflammatory reactions to the proteins in the wall of the yeast cell itself and not realize it unless they have had specific allergy testing for *Candida*. As a result, when medication is started to kill the yeast, the sudden release of these proteins into the body from the dying cells can cause a reaction called a "die-off" reaction. There are many potential symptoms of die-off whose severity can range from none at all or very mild to quite severe, depending on the person. These reactions are more common when the fluconazole is given but, in people with severe cases, can even be the result of nystatin treatment. Common die-off symptoms include headaches, flu-like symptoms, aches and pains, intestinal bloating and gas, loose stools, and rashes. These are temporary and **are almost never** a side effect of the medication.

The symptoms will usually resolve within 2-3 weeks, even when the medication is continued, so if they are mild enough that you can hang in there with them, please try to do so. If they are too severe, however, please notify me and we will make appropriate changes to your regimen.

One other matter I need to address is that many doctors, pharmacists, and alternative practitioners will tell patients that fluconazole will "destroy" their liver. This is because the only patients who were originally treated with it were those with severely depleted immune systems, such as those with

advanced AIDS or cancer patients with advanced leukemia or undergoing chemotherapy. These were obviously very ill people to begin with and their livers could not handle the fluconazole. That is why we regularly monitor your liver tests while taking the drug and recommend that you take a supplement of **alpha lipoic acid 100 mg. twice a day** while you are on the fluconazole as extra liver protection. I will tell you, however, that in 13+ years of treating hundreds of patients with fluconazole, I have had only one show an elevation of her liver enzymes on blood tests and these returned to normal within a month after stopping the drug with no long term effects. Therefore, I consider it a very safe drug to use and it is safer and works better than other similar drugs in its class, like ketoconazole, that you will read about if your search on the internet.