

Health Tips

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with

Dr. D



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Health Tip: Wheat allergy vs. Gluten sensitivity - Are these the same?

Staff of life

n. pl. **staves of life or staffs of life**

A staple or necessary food, especially bread.

Increasingly, people seem to avoid eating wheat. In some instances, it is because of severe gastrointestinal symptoms that improve when wheat is removed from the diet. In others, avoiding wheat is necessary to prevent life-threatening allergic reactions. Perhaps even more common than these two situations are those who avoid eating wheat in order to prevent unexplained health problems such as fatigue, weight loss and anemia. Are all of these people suffering from the same condition, or is there a spectrum of illness that is due to wheat ingestion?

Allergy vs. Intolerance: Many people consider themselves allergic to something when actually they are intolerant. There is a major distinction between the two. Being intolerant to a food usually means that after eating it, an unacceptable after effect occurs, not a true allergic reaction. For example, someone who is lactose intolerant does not have enough of the enzyme, lactase, to digest the amount of lactose they consume. After ingesting milk or milk products, a number of symptoms including nausea, cramps, bloating, gas, and diarrhea may occur. This is different from an allergic reaction. With true allergies, a series of biochemical events occurs including the production of a special type of antibody known as IgE which signals the immune system to release histamine and other chemicals. Histamine is one of the major contributors to the development of allergic symptoms such as runny nose, hives, and wheezing.

Wheat allergy: Wheat is a fairly common allergy-producing food. The specific allergens contained in wheat are mostly its protein constituents, such as albumin, globulin, gliadin and gluten. Wheat allergy most commonly affects children, but it can occur in adults also. Allergic symptoms usually begin within



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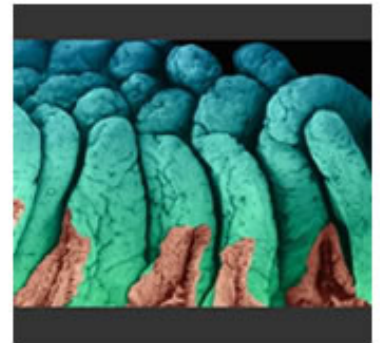
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minutes to a couple of hours after eating wheat and include hives, facial swelling, abdominal cramps, and wheezing. The most serious type of allergic reaction to wheat is called anaphylaxis and can be a life threatening problem. Anaphylaxis is characterized by extreme constriction of the airways and a drop in blood pressure which can lead to shock and loss of consciousness. Following an allergic reaction, there are typically no long term consequences, although a repeat exposure could trigger the same chain of events all over again. Diagnosis of wheat allergy is primarily clinical (medical history, family history, food history), supported by appropriate laboratory tests, including a blood screen for allergens (RAST test) and/

or skin prick-testing. Sometimes an elimination diet is used to make the diagnosis and can simplify the diagnosis, assuming the individual has the same reaction every time wheat is eaten.

Gluten sensitivity: Generally, when this term is used, it is referring to someone with Gluten Sensitive Enteropathy (GSE), also known as celiac disease. People with GSE cannot tolerate gluten, a protein found in wheat as well as in barley and rye. As compared to an allergic reaction, exposure to gluten produces a different type of antibody response (IgG and IgM). This immune response produces inflammation and damage of the tiny fingerlike projections in the small intestine known as villi, where nutrients move through the walls of the small intestine and into the bloodstream. When the villi are damaged, these necessary nutrients are unable to be absorbed into the bloodstream, leading to malnourishment. Typical symptoms associated with GSE include diarrhea, abdominal pain and bloating. GSE can also present in less obvious ways with symptoms such as irritability, depression, fatigue, anemia, skin rash, tingling in the feet (neuropathy) and joint pain.



Diagnosing celiac disease involves screening for the characteristic antibodies produced after ingesting wheat proteins and, in most cases, a biopsy of the small intestine to look for damage to the villi. It has been estimated that upwards of 2.5 million people in the US have celiac disease with the majority of these being undiagnosed. There is a strong hereditary predilection for developing GSE with a 1:20 chance if you have a first-degree relative with the disease.

Final thoughts: One major similarity between wheat allergy and celiac disease is that treatment of both conditions involves avoidance of wheat and wheat products. In the case of celiac disease, once gluten is removed from the diet, symptoms resolve fairly quickly as does the inflammation in the small intestine. Since wheat allergy can be triggered by several proteins contained in wheat it is important to avoid eating wheat altogether.

Some people just seem to feel better when they do not consume wheat. With an abundance of gluten-free products at the market these days, it is getting easier all the time to painlessly eliminate wheat from one's diet. As long as they are receiving adequate nutrition, there is really no reason to consider the "**staff of life**" an essential component of the diet.

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11719 Hinson Road, Suite 130 Little Rock, Arkansas 72212

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