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November 29, 2011 ~ Scroll down for full newsletter or follow the links:



Ask Heather » Seven Deadly Sins of IBS Doctors - Is Your Doc Guilty?

Special Letter » 95 Years Old and a Broken Neck from IBS

IBS Recipe » Get Yourself Stable! Will's Dreamy Lemon Rice Pudding

Research & Press » <u>Dr. Oz Features Peppermint for IBS</u> »<u>Fecal Transplant for IBS. No Sh*t?!</u>



Have questions? Call toll free (866) 640-4942. Outside the US (206) 264 8069.

Enjoy the newsletter!
Heather Van Vorous & Heather's Tummy Care
Celebrating 10 Years of IBS Business!

Did a friend send you this newsletter? Sign up here for your own free subscription.



Will's Dreamy Lemon Rice Pudding

This is unlike any rice pudding you've ever had before. It's my husband's creation, and so light and creamy it's practically a mousse. It is the perfect food for IBS, full of soluble fiber and with almost zero fat. It's terrific for helping to stabilize your digestion and break an ongoing cycle of IBS attacks.

Best of all, it's delicious any time of day or night. You will simply not believe something so luscious, smooth, and rich could be such a safe staple. I like to double this recipe and make a big batch on weekends, so I have breakfasts and snacks for the upcoming week.

Makes 6 Servings

1/4 cup **Acacia Tummy Fiber**

3 cups soy milk (rice milk will not give as creamy results)

3 cups water

1/4 teaspoon salt

1/2 teaspoon canola oil

1/4 cup granulated sugar

5 organic egg whites, whipped until they just barely hold soft peaks

3 cups cold, cooked short grain white rice, such as calrose or sushi rice

Zest of 1 lemon, grated or minced (do NOT use lemon juice)

- 1 teaspoon vanilla
- 2 tablespoons chopped raisins (optional)

Add the Tummy Fiber to a small bowl, and whisk in just enough of the soy milk to dissolve the fiber. In a large stockpot,* over medium heat, bring soymilk and Tummy Fiber mixture, remaining soy milk, and water just barely to a boil. With a metal whisk add in the salt, oil, and sugar.

Ladle several very large spoonfuls of the hot milk mixture into the bowl of egg whites while whisking constantly. This will temper (blend without scrambling) the eggs. Add the tempered egg whites back to the saucepan of milk and whisk thoroughly, cooking for 2-3 minutes.

Add rice and cook, whisking frequently without scraping the bottom of the pan, until mixture thickens slightly, about 20-30 minutes (pudding will thicken further as it cools). Remove from heat and add zest, vanilla, and raisins. Serve warm or chill.

*Because the whipped egg whites in the recipe rise significantly as they cook, it is essential that you use a large stockpot or the pudding will boil over.

Are you just learning how to eat for IBS? A little intimidated at the thought of special IBS recipes? Not quite sure just what makes these recipes special in the first place? Don't worry! Get Eating for IBS and find the answers to all your auestions.



Travel Packets for IBS

Certified Organic Acacia Senegal ~ Pure Soluble Fiber

The prebiotic fiber that relieves both diarrhea and constipation!**

100% Acacia Senegal ** Never Low Grade Acacia Seval

Special Letters

95 Years Old and a Broken Neck from IBS

Hi -

My 95 year old mother has been suffering with IBS for over 40 years. Numerous doctors

have been consulted and have said there is nothing they can do for her. They just said have more fiber.

I have frequently searched the internet for help but never found much. Her IBS has gotten so bad that she was having diarrhea and severe cramping almost every 4 days and frequently experiencing light headedness.

Her last bout she passed out on the toilet and broke her neck. While in ICU I decided to search the internet again and Heather's website came up. What a Godsend.

I immediately got the <u>Tummy Fiber</u> and started my mom at 1/2 tsp twice a day. I have slowly increased it to where she is now at almost 1 tbsp per day and I have also restricted her diet (much complaining about that).

She went to rehab and is now in an assisted living facility until I am sure her IBS is under control. She has not had an episode for 3 weeks now. Every day without an episode is such a gift. If this continues, you have given her her life back. Other than the IBS she has nothing wrong with her (except for the broken neck). She walks a mile a day, drives, handles her own finances, lives independently, has perfect hearing, good eyes sight, and is mentally sharp.

I hope to reintroduce some foods to her diet since she is so unhappy with her selection and at 95 she isn't a very adventurous eater. I hope she will be able to have a little red meat once every week or two. That will make her much happier.

Please know that I am spreading the word and hopefully many more sufferers I hear about directly or indirectly will finally find some relief. Shame on all the GI doctors out there!

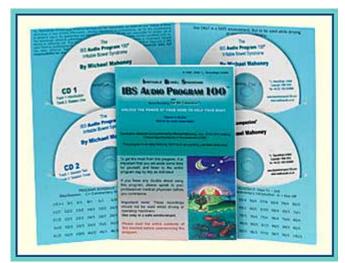
Doris W.

Thank you so much, Doris! Please give your mom a huge hug from me! ~ Heather

Did you miss the recent letter from Diana, who <u>wrote us an update following her</u> <u>letter from a year ago, as she now considers herself 90% cured!</u>

Researchers call gut-directed hypnotherapy a "cure" for IBS!

The Best Gut-Directed Self-Hypnosis Program for All IBS Symptoms



Gives an average 85% reduction of pain and bowel dysfunction symptoms.

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Rx News & Research

Fecal Transplants Show Promise for Gastrointestinal Ills

This may sound disgusting, but doctors say "fecal transplants", which were once shunned by the medical establishment, are proving useful against a range of gastrointestinal ailments. Researchers presented findings at the recent American College of Gastroenterology annual meeting in Washington, D.C. and reported that the therapy can ease severe irritable bowel syndrome and nasty bacterial infections.

Fecal microbiota transplant (FMT) involves taking feces from a donor, typically a spouse or relative though it could be anyone, after a light colonoscopy prep. That sample is then mixed "with some saline so that it's a consistency that can be aspirated into 60 cc syringes," explained Dr. Mark Mellow, one of the researchers presenting findings at the meeting.

The patient then undergoes a routine colonoscopy during which the mixture is inserted. The idea is that this new, transplanted population of healthy flora will correct the patient's underlying problem and it does seem to work.

Go here for full article.

Dr. Oz Features Peppermint for IBS

Dr. Oz, formerly of the Oprah Winfrey show, discussed Irritable Bowel Syndrome on a recent show, and featured peppermint oil capsules for IBS relief. <u>Go here to watch the Dr. Oz video</u>. **Learn more about peppermint oil caps for IBS**.

~ Heather's Tummy Tamers Peppermint Oil Capsules ~



Peppermint Oil Caps Called "Drug of Choice for IBS"

Our Peppermint Oil Caps have the added benefits of fennel and ginger oils, and they help *prevent* abdominal pain, gas, and bloating!



Seven Deadly Doctor IBS Sins - Part 1

We're kicking off our special series on IBS Basics this week. While you must see a doctor for an initial IBS diagnosis, once you are diagnosed your doctor cannot manage your IBS for you. Instead, you need to have a partnership relationship with your physician and make sure you're working with someone who can truly help you overcome your symptoms.

Unfortunately, this is easier said than done.

This week, we'll tackle part one of the most common (and significant) areas where IBS patients need help from their doctors, but don't get it.

I call this list the **Seven Deadly Doctor IBS Sins**.

Obviously, it's best to work *with* your doctors in the following areas, and not fight against them. But, if that's just not possible, the best solution I know is to persist in finding a new (informed, empathetic, and helpful) doctor. Hang on to your computer, because this can be a bumpy ride.

1. Diet. Though it is well-established that fats and insoluble fiber foods (particularly wheat bran) can exacerbate Irritable Bowel Syndrome symptoms, while soluble fiber foods and **soluble fiber supplements** can help, IBS patients are still often told that "diet doesn't matter". They are also often advised to "eat more fiber" without being told of the distinction between insoluble and soluble fiber foods.

Lack of **proper dietary information** is by far the number one frustration I hear from IBS

patients. Many of them report anger and disillusionment with their doctors for not providing accurate diet guidelines and additional dietary resources and referrals.

2. Hormonal issues. Three-quarters of IBS sufferers are female, and <u>hormones play a role</u> in both the exacerbation and mitigation of IBS symptoms. IBS patients report a real need for understanding how pregnancy, hormonal birth control methods, and menopause can affect their IBS.

However, they tell me that they aren't given information about this aspect of IBS from their GI doctors, nor do their ob/gyns take IBS into account when addressing prenatal care, contraception, post-partum issues, or menopause. As a result, this is an area where many women with IBS feel completely lost.

3. Alternative medicine. Over 50% of IBS patients turn to alternative medicine for help, and studies have shown spectacularly successful results from qut-directed hypnotherapy (it's actually been called a cure!).

Acupuncture and yoga have also demonstrated good benefits with little to no risks.

IBS patients report a great deal of curiosity about trying alternative medicine for their symptoms and they would like to discuss these options with their doctors. However, they also tell me that their physicians rarely address these topics unless prompted and even then can't provide detailed information or resources.

4. Medications. IBS patients repeatedly report being given inappropriate or ineffective medications for IBS symptoms. Men and women with diarrhea-predominant IBS have been given prescriptions for Zelnorm, which was strictly for women with constipation-IBS and contraindicated for diarrhea. Many patients have questions about anti-depressants and anti-anxiety medications, but find that their doctors are unaware of how best to use these drugs specifically for IBS.

Patients commonly report that their doctors don't key medications to their IBS symptoms, and that their doctors seem surprised by the frequency of side effects or lack of good results.

In a nutshell, while there is an obvious need for effective IBS patient education, much of the feedback I receive from people indicates that *physician* education must come first.

Doctors now have decades of IBS research studies and a wide range of **treatment options** to discuss with their patients. Your physician can and should be your ally in the battle against IBS - so choose your doc carefully!

Coming next time, the remaining Seven Deadly Doctor IBS Sins!

~ Heather

Did you miss the recent Ask Heather and how to beat bloating?



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- * Organic Acacia Tummy Fiber ~ for IBS Pain, Diarrhea and Constipation!
- * Peppermint Oil Tummy Tamers with Fennel Oil ~ prevent bloating and gas!



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of stress and anxiety related IBS

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