Your health today and tomorrow

FunMedDev Ltd

Patient:

Date: Thursday 29th November 2018

Comments:

- You have exposed a number of ailments when we first met: borderline prediabetes, pollakiuria, toes numbness, yeast infections, belly fat, dry mouth, high blood pressure, reduced libido since a couple of years, poor sleep pattern... You concluded with the words "lots of crumbling things"! I am sorry to say the same about your biological results showing a large array of deficiencies and metabolic dysfunctions.
- I confirm glycosylated haemoglobin (HbA1c) narrowing prediabetes threshold; it is confirmed by rather high fasting glucose, insulin, and triglycerides. They are all linked to an excessive intake of fast sugars, fructose, alcohol, gluten grains, other grains such as rice and corn, starches, and more globally carbs.
- The issue comes from the clash between your diet high in sugars and carbs on one side, and your apoE genotype E3/E3 on the other side. I like to label it as the *hunter* type that requests high-*fat*/low-carb diet. Sadly, you have not obeyed your genomic blueprint and you have opted for the wrong starchy fuel.
- Worse than that, you present very significant gluten sensitivity uncovered by your IgA reaction against deamidated gliadin: 5 shows much closer to cœliac disease threshold (7) than to normal values (under 1). Besides, gliadin (within gluten complex of proteins) increases intestinal permeability, whereas we see clear trend towards a "leaky gut" that adds grains, alcohol, and hot & spicy foods to the blacklist.
- We face additional mistakes, i.e. indulging in high cholesterol foods, especially dairy products (cheese, ice cream, butter) and red meat (beef and pork). The latter also provides too much iron together with wine and beer. Beer ticks all the boxes: iron, alcohol, sugar, œstradiol in hops, and gluten in barley. To help you manage such changes, I suggest you see my nutritionist who will provide a nice <u>eating-plan</u>.
- We must address huge excess of ferritin because it can damage multiple organs including liver (which is already showing the first signs of inflammation or "*fatty liver*"), brain, testicles, spleen, kidneys... You ought to undergo either blood donations or <u>bloodletting</u>. Significant oxidation of LDL cholesterol brings an undisputable cardiovascular risk that we address with dietary advice (*anthocyanins*) and curcumin.
- The OGG1 homozygous variant genotype, i.e. having inherited the weak gene version from both parents, massively justifies practicing tons of sports. However, it should also push you into intermittent fasting, which will represent an excellent means to improve your metabolic markers. I supplement resveratrol.
- The 4-month treatment aims at: replenishing key missing nutrients (such as vitamin D already deficient before winter starts); improving sleep quality (with GABA/GADPY, magnesium/MGTDL, progesterone/UTHG for 3 months only); reinforcing your metabolic drive (with adrenal & thyroid glandulars, the latter showing compulsory to compensate for homozygous variant DIO2 genotype); raising libido (with DHEA compound capsules); fighting constipation and inflamed gut (with strong probiotics & allicin cleansing).

Georges MOUTON MD