

A black and white microscopic image showing Candida yeast cells. The image features several long, thin, branching hyphae. Attached to these hyphae are numerous small, round, oval-shaped yeast cells. Some of these cells are in pairs, while others are in small clusters. The cells have a distinct, bright outer boundary, giving them a glowing appearance against the darker background.

Candida: the untold story

Candida overgrowth is caused as much by unresolved emotional trauma and heavy metal toxicity as it is by anything we consume, says Niki Gratrix. And there is now compelling evidence that these factors play a role not only in candida, but quite possibly in every chronic illness.

Since you're reading this magazine, chances are you've heard of candida and know that sugar, yeast and antibiotics are three things to steer clear of if you want to avoid it. You may also be aware that we all "have candida" in the sense that we all have the yeast known as *Candida Albicans* in our systems, but that when we speak of candida we are usually referring to an *overgrowth* or imbalance of this yeast.

I'll get onto the critical information you most probably *don't* know about candida in a moment, but for now let's spend a little longer on the basics. You're probably aware that candida symptoms can include sugar cravings, bloating, fatigue, "mind fog", spaciness, headaches, irritable bowel syndrome, alcohol intolerance, thrush, PMS, and aching muscles and joints, amongst other things.

You may even know that some complementary and alternative practitioners believe candida is a factor in all major chronic illnesses, from depression and ME or CFS [Chronic Fatigue Syndrome] to cancer and Aids. That remains controversial, but what we can all agree on is that we won't experience optimal health while we are playing host to an overgrowth of candida.

Among other things, if the candida manages to grow through the intestinal wall, the condition known as "leaky gut" can develop, where undigested food particles enter the bloodstream. Also, moulds and fungi generally produce biotoxins which have their own negative side effects. The overall result is that the immune system is then constantly under pressure, so increasing the propensity to more infections. As digestion becomes more compromised people can then become nutrient deficient leading to other symptoms including depression, anxiety and blood sugar imbalances.

Many practitioners put any patient suspected of having candida on an extremely strict and rigid anti-candida diet. Such a diet typically cuts out all sources of sugar and all forms of yeast and fungi. Of course, you're not missing anything essential when you ditch the refined sugar, bread and alcohol, but anti-candida diets also typically cut out *all* fruit and *all* fermented foods, too – denying the patient two classes of food which have many proven health benefits, and also making the diet considerably harder to follow.

The restrictive nature of the diet can have negative consequences on mental/emotional health, which we'll get onto shortly. In addition to that, even the strictest anti-candida diet may not always deal with the root of the problem. Why? Because candida is often about a lot more than what we ingest.

And here we come to what I'm willing to bet you did *not* know about candida: that while certain substances undoubtedly feed candida, they alone do not cause it to multiply out of control. In order for that to occur, two other factors are usually present: heavy metal toxicity and unresolved emotional trauma. As I will show in this article, the three are intimately interrelated.

So if you have been following a strict anti-candida diet, but to no avail – or if you suspect you may have candida so have been worrying that you really ought to cut out, for example, fruit – it may be that you would benefit from putting less energy into being rigid about your diet and more energy into looking at where your psychology might be negatively affecting your biochemistry.

I have met patients who have followed a strict anti-candida diet so religiously that they haven't had a piece of fruit in years – including, incredibly, one who did this while following a 100% raw diet. And these are patients who were still not well when they came to me; who were *still* exhibiting the classic signs of candida overgrowth, plus anything else they originally presented with. Other patients who consult me report that they *do* get better after several months on a strict anti-candida diet, only for the symptoms to return every time they relax the regime.

As a biochemically-focused nutritional therapist, what I have learned about the effects of stress and emotional trauma on health has fundamentally changed the way I approach giving nutritional

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advice. It started when I began to notice a troubling phenomenon in CFS/ME patients who came to me whilst on strict anti-candida regimes prescribed by other practitioners.

These patients (who were already anxious and stressed due to their illness) had in some cases had it drilled into them not only that eating certain foods would make it impossible for them to get better, but also that *one* wrong step could trigger a relapse – and, worse, that if they weren't getting better that was because they weren't being strict enough with their diet.

A significant number of these patients had developed such an obsessive attitude to food as a result of this that they had to be referred to psychology practitioners to undo this conditioning. For some this was as serious as a full-blown eating disorder. In other cases, attempting to follow such a plan had added to the stress level of an already stressed patient – and once you know what stress does to your biochemistry (more about that later) you will know why that is guaranteed to have been making the problem worse.

That's not to say that there isn't merit in following an anti-candida eating plan. There absolutely is. My point is, people on a rigid plan need to be asking themselves whether it has worked after, say, three months. If it hasn't, it's time to look at other possible solutions.

The link between heavy metal toxicity and candida

In the early 1990s, world-leading integrative practitioner Dr Dietrich Klinghardt published a paper making the link between heavy metals and microbes such as candida, citing the role of mercury toxicity in chronic candidiasis (thrush) as an example.

Twenty years on, we now know *why* heavy metals attract candida. And that is because heavy metals like mercury are so damaging to the human body that the body literally brings in moulds and fungi to encapsulate them and render them less >>>

What are heavy metals?

“Heavy metals” are chemical elements with a specific gravity that is at least five times the specific gravity of water. Specific gravity is a measure of density of a given amount of a solid substance when it is compared to an equal amount of water. There are 23 heavy metals that can be toxic to humans: antimony, arsenic, bismuth, cadmium, cerium, chromium, cobalt, copper, gallium, gold, iron, lead, manganese, mercury, nickel, platinum, silver, tellurium, thallium, tin, uranium, vanadium and zinc.

Small amounts of these elements are common in our environment and diet and are actually necessary for good health, but large amounts of any of them may cause problems. The most common heavy metals found in humans are cadmium, lead, arsenic and mercury. Aluminium, although not a heavy metal per the earlier definition, is also a chemical element of concern due to its prevalence and toxic effect in humans.

Below I have briefly summarised the main routes of exposure for these five metals, all of which can build up to dangerous levels in the human body.

Sources of aluminium	Sources of arsenic	Sources of cadmium	Sources of lead	Sources of mercury
<ul style="list-style-type: none"> • Acid rain leeches aluminium out of soil and into drinking water • Aluminium cookware • Antacids • Antiperspirants • Food additives 	<ul style="list-style-type: none"> • Water supplies worldwide, leading to exposure of fish • By-product of pesticide production • Paints • Fungicides • Wood preservatives 	<ul style="list-style-type: none"> • Cigarette smoke • Fertilisers • Fungicides and pesticides • Water, soil and air pollution • Refined grains • Shellfish, tuna • Organ meats • Soft drinks • Tea and coffee • Batteries 	<ul style="list-style-type: none"> • Paints • Cosmetics • Hair colourings with lead-based pigments • Old plumbing • Leaded petrol • Lead-glazed pottery • Mining and smelting 	<ul style="list-style-type: none"> • Non-organic fruit, veg and grains – they are often treated with mercury based fungicides • Some vaccines • Amalgam fillings • Atmospheric pollution • Seafood

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harmful. Because mercury is capable of killing a human quickly while mould kills only slowly, the body prefers mould and so brings that in as a self-protection mechanism.

Klinghardt’s theory also explained why some patients would get very bad die-off symptoms when being treated for candida alone – it was simply the storm of mercury releasing. Treat the metals at the same time as the candida and die-off symptoms could be dramatically reduced.

So the next question is, “Why are heavy metals accumulating in people?” The first reason is an obvious one – levels of heavy metals in the environment have vastly increased in the last few hundred years due to industrialisation and pollution. The second major reason some people particularly accumulate heavy metals in their bodies is due to genetics: some 15% of the population have a reduced capacity to detoxify and clear out heavy metals.

At this point we are still in the realms of what most complementary and alternative practitioners know and understand. But as I work from both a biochemical *and* a psychological perspective, I’d like to share that the heavy metals and candida link is not the end of the story – something Klinghardt himself started to realise all the way back in 1984.

In that year, Klinghardt’s secretary had her amalgam fillings removed with no protection from the released mercury (as little was understood in those days about safety mechanisms during amalgam removal) and she soon started showing symptoms of severe brain dysfunction. Klinghardt tried injections designed to push out the mercury, but urine testing revealed they had been wholly ineffective.

Then it occurred to him that she was suffering with a long-term psycho-emotional issue – an early childhood trauma – so he treated that with a brief psychotherapy similar to the Emotional Freedom Technique (EFT). She cried and had a big emotional release.

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The next day she was *much* worse, suggesting stored mercury had mobilised. So he gave her another shot and the metals in her urine measured the highest ever tested in the lab. It was a major breakthrough and, after much additional research by Klinghardt, it eventually led to The Klinghardt Axiom: "For each unresolved emotional trauma there is an equal amount of toxins stored in the body, and an equal amount of pathogenic microbes that the body cannot eliminate." *This* explains why people can be on strict anti-candida diets for years and still have candida.

After six years of clinical practice I now believe that 99.99% of us have experienced some form and degree of emotional trauma, whether we are conscious of it or not. I also believe a recognition of the prevalence of emotional trauma, and the ways in which it affects our health if left unresolved, will soon sweep across the complementary and alternative medical world.

Emotional trauma

If we meet a sabre-toothed tiger, biochemical changes occur to increase our chances of survival – changes which were only designed to last for a short period. We've all heard of the fight-or-flight stress response, but our modern "sabre-toothed tigers" (job stress, relationship stress, etc) are often with us all the time, meaning stress becomes chronic, with a cascade of negative effects on the body.

I discussed these effects in detail in the Summer 2010 issue of *Get Fresh!* In summary, chronic stress leads to reduced secretion of stomach acid and pancreatic enzymes, which itself makes it easier for candida to multiply. Stress also eventually leads to adrenal fatigue, which leads to lowered immunity – something else which makes it much easier for candida and other pathogenic organisms to proliferate.

But while we've all heard of the fight-or-flight response, few people realise there is also a flight or fight *and freeze* response. The freeze response happens whenever an individual is unable to psychologically "integrate" a traumatic event as it was too overwhelming. When this happens, it becomes "frozen" into the emotional body and stays there – unless and until it is revisited and released.

Later, other events retrigger the trauma and the common response is what many people will notice as an over-reaction to something that they may rationally understand is fairly benign or non-threatening. For example, we all have times when we notice that we're acting like a small child. Whether that be with irrational fear, guilt or stubbornness, we can sense that we are responding like a 3-year old!

My not-so-strict anti-candida diet

As mentioned, I am not a believer in extremely rigid and restrictive anti-candida diets. But if candida is a problem for you there are certain foods I would recommend cutting out, and I've listed them here.

PROCESSED SUGAR in all forms, and all foods containing it. This includes some foods that do not say sugar anywhere on the label, including maple syrup, agave syrup, yacon syrup and honey.

REFINED GRAINS including white flour, granary flour, white rice, white pasta, cornflour and cereals (unless wholemeal or wholegrain).

ALCOHOL in all its forms.

DAIRY products including not only cow's milk, cream and cheeses but also goat's and sheep's milk and products containing them. This is because dairy products contain lactose which promotes candida growth.

MORE THAN THREE PIECES OF FRESH FRUIT DAILY – but up to three pieces is fine for most people.

DRIED FRUIT as its sugar is much more concentrated than that in fresh fruit.

YEAST and all foods containing or derived from it. This includes bread products, Marmite, many stock cubes, monosodium glutamate and some vitamin tablets (check that the labels state "yeast free").

PEANUTS and peanut butter – avoid these completely because they can be high in mould.

ARTIFICIAL SWEETENERS as these may feed candida as effectively as sugar.

PRESERVATIVES including citric acid, which may burden the immune system.

See the section "Defining emotional trauma" [overleaf] for a more in-depth discussion of what it is, and of the difference between overt and covert emotional trauma, plus examples of both.

The ongoing effect of unresolved emotional trauma is that it creates a chronic tension in the body. Many people experience this largely unconsciously. Where the trauma is considerable, panic attacks, phobic reactions, compulsive behaviours and the inability to relax are all common symptoms.

Trauma points in the emotional body create blocks to the normal flow of energy in the body. The internal tension is a source of chronic stimulation of the sympathetic nervous system, with all the implications of that on the body (as summarised earlier).

In addition, when you remember that the emotional body is a *real* thing with electrical properties, magnetic currents and light waves then the health implications are vast. Practitioners who are sensitive to energy and can see and detect energy bodies often describe trauma as a "tear" in the aura.

Let's now consider the most *basic* discoveries of the science of psychoneuroimmunology. The emotional body transmits energy and information which tells the brain and the autonomic part of the nervous system what is going on. The brain and the autonomic nervous system (ANS) respond to these messages from the emotional body. >>

Defining emotional trauma

Overt emotional trauma is anything that most people would acknowledge to be a traumatic event – for example, natural disasters, accidents, and the loss of loved ones, as well as anything which could be identified as obvious physical, mental or emotional abuse, whether in childhood or adulthood. Additionally, Post-Traumatic Stress Disorder among war veterans is now a fairly widely known phenomenon.

Covert emotional trauma, in contrast, is any form of trauma that would not generally be recognised as such by the average person today. However, this does not make the trauma any less real to the individual, and nor does it stop it being frozen into the emotional body just like any other trauma, if that individual finds it too overwhelming to integrate at the time. Another point to note about covert trauma is that something which traumatises one person may not traumatise another. It all depends on the state of the person at the time of the real or perceived event.

A period when a lot of trauma occurs is during the “imprint” stage of childhood development, which is between the ages of 1 and 7 years. As children we are less able to articulate our needs, or to understand and integrate events around us, hence we are more easily traumatised. During this imprint stage our personalities and coping strategies for life develop and crystallise in response to real or perceived events around us – hence events in early childhood can literally be with us for the rest of our lives.

So one example of covert trauma is when something which was benign and non-harmful is interpreted by a small child as something traumatic. This can include being left alone and therefore feeling abandoned when your mother simply had to leave for a short time to attend to something. A parent shouting to stop a small child doing something which could be dangerous to them is another example – if the child isn’t old enough to understand, this can be experienced by them as a very traumatic event.

As many readers will agree, we live in a society that is both spiritually and emotionally illiterate, and predominantly focused

on the material. At heart, we are sensitive, empathic spiritual beings yet many of us feel we are emotionally invisible to people around us and to the society we live in. And in my opinion, society’s current value system, which essentially turns humans into objects – reducing them down to dispensable units for the production of profit, objects of sexual desire, or anything else which strips them of their true humanity – is in itself traumatising, and a form of energetic abuse.

Some psychotherapists have observed that covert trauma can actually be *worse* than overt trauma, because at least overt trauma is widely recognised as such, which helps patients to understand, accept and integrate what has happened to them. Covert trauma, on the other hand, goes by and large ignored. There is no validation; no permission to go through the healing processes.

Of course, emotional trauma is often “acted out” through the most personal of consumer products we can buy – the food that we put into our very bodies. Many people unconsciously channel their anxiety into what they eat. Extreme versions of this scenario play out in diagnosable eating disorders like compulsive overeating, bulimia and anorexia.

Living in a chronic state of tension requires some form of release and many times food is used as the release mechanism. For example, many people who feel a lack of calmness and sweetness in their lives will develop cravings for sugar and other sweet foods, consuming these excessively.

People may also feel so empty and disconnected inside that they tend to crave foods which resonate at the same energy level, hence they are attracted to foods empty of nutrition and living energy, such as crisps, biscuits, cakes and all the other lifeless processed and refined foods.

If you recognise any of the above patterns in yourself, the very last thing you need is a set of rigid and restrictive dietary guidelines and the belief that you must follow them or you will never get better. The real key to your health is to be found in addressing your emotional trauma.

Unresolved emotional trauma in the limbic system of the brain creates abnormal electrical circuits there. These abnormal impulses travel down the central nervous system into the tissues and organs and then create severe abnormalities in both in the intra and extracellular environment, including pH changes, conductivity changes, and changes to receptors on cell walls. To cut a long story short, these cause heavy metals to start to accumulate, and then the microbes – such as candida – move in.

So I would suggest that when it comes to detoxifying, releasing unresolved emotional trauma is at least as important as – and possibly more important than – juicing, raw food or any other biochemically-based approach.

There are brief psychotherapeutic techniques which are specific for treating emotional trauma, including the Emotional Freedom Technique (EFT), Neuro-linguistic Programming (NLP), Mental Field Therapy (MFT) and Eye Movement Desensitisation and Reprocessing (EMDR). I also recommend techniques using psycho-kinesiology or bodywork – like Rosen Therapy, which can be very effective in releasing emotional trauma.

So, in summary, if you are dealing with candida – or, for that matter, just about any chronic illness – consider that unresolved emotional trauma may be playing as big a part as anything you are consuming. If you have a seemingly intractable case, and it feels like a losing battle, I strongly suggest you consult a practitioner who works from a fully holistic perspective. Just be sure to ensure they are fully qualified and accredited – for example, if they are working

as a nutritional therapist check that they are a member of BANT [The British Association for Applied Nutrition and Nutritional Therapy].

When you understand that almost all of us are being held back by unresolved emotional trauma, and what a profound effect this has on not only our psyche but also our biochemistry, the epidemic of health issues we see around us today is no longer a mystery. ■

In the next issue, Niki continues her discussion of the ways in which emotional issues affect health in her groundbreaking article: Are you suffering from an energy body virus? Understanding ‘energy vampires’, consciousness and sex.



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How to find out whether you have candida

Stool testing is the primary method of testing for candida – and it is also the test that I use the most in my practice, alongside adrenal stress testing. It can tell you whether or not candida, leaky gut, parasites and many other problems are issues for you, and it can get to the root cause of so many of the woes of the ‘walking wounded’ today – people who’ve been to the doctor and had tests and been told there’s “nothing wrong”.

Note that the stool testing that your GP or a gastroenterologist would perform is *not* the same as the testing described below available from the ‘functional’ labs used by complementary and alternative practitioners.

If you are suffering from any of the following, ‘functional’ stool testing can reveal the underlying problems: candida symptoms, food intolerances, IBS, constipation, diarrhoea, indigestion, reflux, bloating, nausea, fatigue, allergies, headaches, PMS, acne and poor skin health, leaky gut, chronic infections and low immunity, stomach pain and joint pain.

Note that gastrointestinal imbalances can exist without obvious symptoms too. Many chronic illnesses today are associated with them, including rheumatoid arthritis, multiple sclerosis, osteoarthritis, lupus, chronic fatigue syndrome/ME, depression and much more.

I use the test devised by the lab Diagnostechs, based in the US, and available from their UK agent, The Red Apple Clinic. Their Stool and Saliva Test costs approximately £220. It includes testing for candida and fungal overgrowth, parasites, good and bad bacterial levels, pancreatic enzyme output status and four common food intolerances, among other things. This test is very comprehensive, and includes testing for many other imbalances as well as candida.

The top biochemical factors which create poor gut health are a diet excessively high in refined sugar, overuse of antibiotics and long-term use of non-steroidal anti-inflammatory drugs such as ibuprofen and aspirin. Infections, intestinal parasites and surgery can also be factors. And since stress switches off pancreatic enzyme and stomach acid production, a truly holistic approach to health is obviously the way to go.

Stomach acid is another key test I recommend in cases where candida is suspected. Why? Because when stomach acid levels fall, protein is not digested properly and as it moves out of the stomach into the small intestines, this partially undigested protein feeds bad bacteria, causing candida and a host of other problems.

This often, in turn, leads to what acid is being produced in the

stomach getting into the wrong place – i.e. into the oesophagus, when gas pressure from indigestion pushes the acid upwards. This is how low stomach acid can actually cause ‘excess’ acid symptoms.

A critical issue to understand is that most symptoms which intuitively you would think were due to high stomach acid levels are in fact resulting from *low* levels. Direct symptoms of chronic low stomach acid include the abovementioned reflux, plus heartburn, indigestion, bloating, food intolerances, chest pain (linked to acid in the oesophagus), nausea when taking supplements on an empty stomach and proneness to stomach bugs.

You can also have low stomach acid and be ‘asymptomatic’ – but present with seemingly unrelated problems such as candida symptoms, fatigue, CFS/ME, low immunity, feeling “toxic” and more.

Low stomach acid can lead on to protein, vitamin B12, iron and other mineral deficiencies. Low stomach acid is *much* more common than high stomach acid because ‘stress’ switches off gastrointestinal secretions as it switches off the parasympathetic side of the nervous system which is known as the ‘rest and digest’ mode. Stressed people are stuck in sympathetic mode, and this explains why it’s possible to be eating a ‘perfect’ diet but still be nutrient deficient.

One thing to mention here is that occasionally stomach pain or burning is caused by the stomach ulcer bug *Helicobacter pylori*. The bug can burrow through the mucosal lining, causing exposure of acid to the stomach lining – which also burns. This can be tested and ruled out by completing the stool test mentioned earlier, or on its own with your GP.

Remember – stomach acid is the first line of defence for the immune system. Acid kills microbes and literally sterilises the gut. When acid is depleted, enteroviruses and bugs can enter the system more easily. As up to 80% of immune system cells are actually centred in the gut, a problem with stomach acid can set up conditions for not only candida but also immune system imbalances and other systemic problems.

Testing for stomach acid can be done directly with Acumen Labs. It requires only a saliva sample and the cost is £60. For the more adventurous, Nutri Link’s Gastro Test costs just £15.32 and can be done at home. The catch is that it involves swallowing a pill on the end of a piece of string then pulling it back out of your stomach! It works by testing the pH in your stomach directly but obviously this approach will not be for everyone!

Email Niki@NikiGratrix.com to order the Acumen Test. Find out more about the Gastro Test at www.Nutri-linkltd.co.uk.