

Health & recovery

THE NEWSLETTER ABOUT INTEGRATIVE MANUAL THERAPY

Issue 6

Gluten Sensitivity: An Integrative Manual Therapy Perspective

- by Ralph Havens, PT

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This month's newsletter is one of the most important pieces of information and research review that doctors and the lay public need in order to help their patients, families, and others lead healthy and pain-free lives.

Over the past 9 years, I've studied and used Integrative Manual Therapy (IMT) to help my clients, family, and friends. During that time, I've noticed an alarming trend of an increased incidence of chronic conditions, especially in the nature of auto-immune conditions, allergic reactions, and sensitivities which affect their pain conditions. However, I've also seen how using IMT has helped them overcome and recover to clear these conditions and has allowed a full return to pain-free living.

One important finding over the past few years is how gluten has been affecting people and how, by eliminating gluten, people are better able to recover. Following are two brief success stories to give you an idea of the scope of the problem and the solution. Then you can read from leaders in the field of Integrative Manual Therapy, Physical Therapy, Chiropractic, Naturopathy, Nutrition, and Massage Therapy about the science and the trends of the increasing incidence of gluten sensitivity.



Ralph Havens, PT, OCS, IMTC
Owner Mission Hills Physical Therapy

The first is a story of a 69-year-old runner who asked for help. Here is his report of the results of his first gluten-free week:

"How I lowered my blood pressure standing in a parking lot..."

"If anyone other than Ralph had told me I could get rid of some of my pains and perhaps improve a beat up 69-year-old body, I would not have listened. But I have such great respect for Ralph that I decided to go on his gluten-free diet... at least for a few days."

"Frankly, I thought such things were more psychological than logical. I no longer feel that way."

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"My blood pressure has been running about 145/90... five days after going on the gluten-free diet, it was down to 125/79. That is absolutely amazing. So much so, in fact, I didn't believe it, so I tested and retested and got the same results... even using different machines.

"But there was more to it than that; I have had nasal congestion for as long as I can remember that began clearing up on the second day and is 80% better now as I am on my eighth day of being gluten-free.

"What I really was asking Ralph about was getting rid of some pain, from arthritis and running 76 marathons; that has also improved and, more importantly, I think I'm running better now than I was just a couple of weeks ago.

"I am a gluten-free convert... thanks Ralph, very, very much."

- L.W.

The second story is about another runner. On one run he asked me if I

could look at his leg; he had been having 6 months of chronic hip, thigh and knee pain. This was a recurrent problem from the past, having affected him over the years. Upon questioning him, I found out that he also had gastric reflux, low back pain, and chronic, severe eye sensitivities (he couldn't read or watch TV at night due to headaches and eye strain/pain).

After the run, I assessed him and found evidence of gluten sensitivity, emailed him the research, and suggested a gluten-free diet. Without even having to make an appointment or receive official treatment, he followed the recommendation, and, within a week, his leg no longer hurt.

Within 2 months, he no longer had eye pain/strain; he could read and watch TV at night without difficulty; his low back pain was eliminated; and he said that he hadn't even realized it, but he had been depressed and now felt happier than he had in years. He reported his girlfriend noticed the difference as well.



One important finding over the past few years is how gluten has been affecting people and how, by eliminating gluten, people are better able to recover.

So what is going on here? What is this gluten-free phenomenon? Why are so many stores carrying gluten-free items now, and why is everyone talking about it? The guest writers in this newsletter will give research and information for you, and my hope is that it will reach the people who need the help.

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SUCCESS

I can admit that in the past I have been sold snake oil. I have a whole cabinet full of "miracle cures" and another spilling over with various prescriptions from doctors. I gave up on both a long time ago, especially about 3 years ago when my MS was constantly flaring up, each time robbing me of the use of my legs and landing me in the hospital for months. Ralph and company were able to ease the pain in my lower back, which in the hospital required IV pain meds. This was tremendous, but the most progress came 5 months ago when I eliminated gluten from my diet. Ralph provided me with a wealth of information and research from highly regarded medical journals. This eased my neuroscience-oriented mind, and the snake oil alarm in my head never went off, there were no red flags, and instead of the fake hope I'd experienced before, I felt real hope.

My life began 26 years ago, took a turn at 20 with my MS diagnosis, stalled completely 3 years ago, and began again 5 months ago. I remember telling Ralph after being gluten free 2-3 months that I felt I had already made up for the 2 1/2 - 3 years I was in and out of the hospital. Within a month of going gluten free, I knew something wonderful was happening - life was livable again, constant fatigue replaced by constant energy, and the spasticity in my legs I had experienced daily was gone. Even my neurologist, who does not speak in non-pharmaceutical terms, could not find any trace of it. His response to all of these positive changes after gluten-free: "You can't argue with results like this!"

Doctors and MS groups look at me with jaws dropped to the floor. I make sure and tell them about having gone gluten-free. I see such a high likelihood for fast improvement that I recommend at least trying a gluten-free diet to all my friends with MS, other neurological problems, and even those who are healthy but say they "could be better." It can't hurt to try, and you never know just how amazing the results might be. - E.J. April 2009

Pain and Symptoms of Arthritis Gone with Gluten

- by Kimberly Burnham, PhD

Back pain, sacroiliac joint symptoms, knee and hand pain attributed to arthritis, may in fact be symptomatic of a gluten sensitivity and resolve with a gluten free diet. In the Scandinavian Journal of Rheumatology, researchers reported on two cases of adult silent



According to the recent medical literature, people with the following conditions may benefit notably from a gluten-free diet:

- Multiple sclerosis
- Parkinson's disease
- Osteoporosis
- Type 2 and Type 1 diabetes
- Neuromyelitis (inflammation of the nervous system)
- Peripheral neuropathies
- Rheumatoid arthritis
- Seizures
- Autism
- Ataxia (loss of balance)
- Down's syndrome
- Cognitive problems (brain fog)
- Anemia

celiac disease [severe gluten sensitivity with no digestive tract symptoms] presenting with arthritis of the knee and the sacroiliac joint, respectively. In both patients the arthritis was relieved on a gluten-free diet. (Slot, 2000).

A gluten-free diet is a way of life for the person with celiac disease, when a severe gluten sensitivity manifests as a symptomatic digestive disorder. According to the University of Chicago Celiac Disease program (2006), one out of every 133 healthy adults in the United States has celiac disease and the accompanying digestive problems if they eat anything with gluten (the protein component in grains such as wheat, barley, rye, and spelt). No one needs to tell them to stay completely off of gluten. But what about people with joint pain, brain fog, loss of balance, or other neurologic and autoimmune disorders? All of these things have also been linked with gluten consumption.

According to the recent medical literature (Helms, 2005), people with the following conditions may benefit notably from a gluten-free diet:

Joint-related Conditions

- Rheumatoid Arthritis
- Sjogren's syndrome.
- Osteoporosis.
- Autoimmune Disorders.
- Type 1 and Type 2 Diabetes
- Thyroiditis (inflammation of the thyroid)
- Inflammatory Arthritis.

Circulatory

- Anemia and other circulatory conditions
- Blood-related conditions

Nervous System Conditions

- Brain Fog and Cognitive Problems
- Multiple Sclerosis
- Parkinson's Disease

- Depression
- Neuromyelitis (nervous system inflammation)
- Peripheral neuropathies (nerve damage to arms, hands, legs and/or feet)
- Seizures
- Autism
- Ataxia (loss of balance)
- Late-onset Friedreich Ataxia
- Down's Syndrome

From the Journal of Rheumatology comes information linking rheumatoid arthritis (RA), Sjogren's syndrome and other inflammatory arthritides to gluten sensitivity. One journal article noted, "the data provides evidence that dietary modification may be of clinical benefit for certain RA patients, and that this benefit may be related to food antigens [allergies] eliminated by the change in diet." (Hafstrom, 2001). Another researcher found an increased prevalence of raised auto-antibodies, including rheumatoid factor in patients with gluten sensitivity. This selective increase of IgA rheumatoid factor suggests that rheumatoid factor production in patients with gluten sensitivity primarily results from immunological activation in the gut mucosa [digestive system]." (Sokjer 1995).

In a 2006 article in Trends Immunology, researchers said, "interestingly, many of the important features identified in celiac disease, including HLA association, target organ T-cell infiltration, disease-specific auto-antibodies and the distinct targeting of in vivo modified antigens, are also present in rheumatoid arthritis." (Molberg, 2006).

The moral of the research is: avoid gluten for better joint health and pain-free function.

The Auto-Immune Connection of Gluten Sensitivity and Thyroid Function

- by Dr. Thomas O'Bryan, DC, CCN, DABCN

When the winter season comes upon us, many will turn down their thermostats at night to save fuel; it reduces our gas bills and saves some dollars over the long term.

The thyroid gland controls the 'thermostat' in every cell of our bodies—how 'hot' the cell works, how much fuel (calories) the cell burns in a day. Want to burn more calories? Turn up the thermostat. Want to burn less calories? Turn down the thermostat. But for many, they don't seem to have control over their body's thermostat (cold hands or feet, occasionally wear socks to bed, can't lose a few pounds no matter how hard they try,...). One of the potential causes of a thermostat that has been turned down in your body is an allergy to gluten.



Most of us know that an allergy to gluten can cause symptoms in the intestines. And many have heard of an allergy to gluten causing symptoms outside of the intestines. Here we will have discussion on one of the mechanisms by which this occurs and how it affects the thyroid gland.

The National Institutes of Health tells us that Auto-Immune Diseases (the

immune system attacking our own body tissue) collectively affect more than 24 million people per year in the U.S. To put this in perspective, Cancer affects nearly 9 million people per year and Cardiovascular Disease about 22 million people. And we know that only about 1/3rd of the people with an Auto-Immune Disease are diagnosed. That means about 72 million people are suffering with a self-destruction process (antibodies attacking our own tissue). That puts Auto-Immune Diseases at the top of the list of the most common diseases in America today. And yet to most of us, it's unknown. Why? It's not looked for. Our medical system waits until the signs and symptoms are severe enough with organ failure and irreversible damage before we identify it.

A growing number of studies have revealed that the body makes these antibodies directed against itself—otherwise known as auto-antibodies—years, and sometimes a decade, before autoimmunity causes clinical disease. These early indicators (auto-antibodies) have been confirmed in diseases as varied as vitiligo (depigmented skin), autoimmune hepatitis, Type 1 diabetes, Celiac Disease, autoimmune thyroid diseases, atrophic gastritis (inflammation of the stomach), pernicious anemia, alopecia (hair loss), and hypogonadism (lack of function of ovaries or testes). A clinical disease does not exist until there has been so much tissue damage that people begin showing symptoms. But if the antibodies are present years before the accumulative damage has gotten so bad to cause a diagnosable disease, wouldn't it make sense to be looking for these early indicators? In fact, have you been tested for these antibodies? Armed

with such predictions, patients could start fighting the ailment, thereby preventing or delaying symptoms.

Furthering the case for early detection through antibody testing, research also suggests that the duration of gluten exposure may be significant. In one study of children with Celiac Disease younger than 6 years old, 4.3% had elevated anti-thyroid antibodies, whereas of children over 6 years old, 27.7% were positive, suggesting, again, that duration of gluten exposure (the length of time a child eats wheat and doesn't get tested for a sensitivity) is an important risk factor for development of thyroid autoimmunity. The sooner you check your children for the early indicators, the better your chance of preventing a potentially life-long debilitating disease.

Arguably, the most common autoimmune disease is also the only one where the 'cure' is known and uncontested. When an allergy to gluten (found in wheat, rye, barley and spelt) stimulates the production of auto-antibodies to the intestinal tissue (anti-transglutaminase or anti-endomysium antibodies), Celiac Disease is the diagnosis. And this autoimmune disease is readily put into remission and disappears with a life-long avoidance of gluten in any form. That includes the wheat often found in soy sauce, the barley in beer....

For some, gluten causes an 'alarm reaction' in the immune system with a "call out the troops, load the guns and fire away" type of attack response (upregulating macrophage pro-inflammatory gene expression and cytokine production). Numerous pain syndromes and autoimmune diseases



have been associated with an 'alarm response' to gluten intake. From peripheral neuropathies (numbness and tingling in the arms and legs) to crippling migraines and ataxia, from acute myocarditis (inflamed heart) to chronic pancreatitis, from vitiligo (loss of pigment-white spots-in the skin) to Primary Biliary Cirrhosis (gall bladder problems), from Multiple Sclerosis to Rheumatoid Arthritis, in sensitive individuals, gluten can initiate this autoimmune response.

So which organ is vulnerable to this autoimmune attack, this calling out of the troops? The target tissue seems to be determined by one's genetics (the blueprint you were born with) and all of the mitigating factors (accumulated exposures we've had in our lives such as toxic chemical accumulation, excess stress hormone production, poor food choices...). This response may affect tissue throughout the body and has been identified with brain and peripheral tissue, liver epithelial cells, pancreatic beta-cells, thyroid tissue, bone cells, skin tissue, skeletal muscle and myocardium.

As an example, 57% of patients with neurological dysfunction of unknown cause have elevated antibodies to gliadin (a protein in wheat). Only 35% of this group also have evidence of intestinal damage (Celiac Disease). The remaining 65% have gluten sensitivity and elevated antibodies to the brain (cerebellum) or the nerves in the arms and legs, a situation analogous to that of the skin in Dermatitis Herpetiformis. It appears that wheat can directly stimulate an autoimmune attack on the brain and nervous system in sensitive individuals.

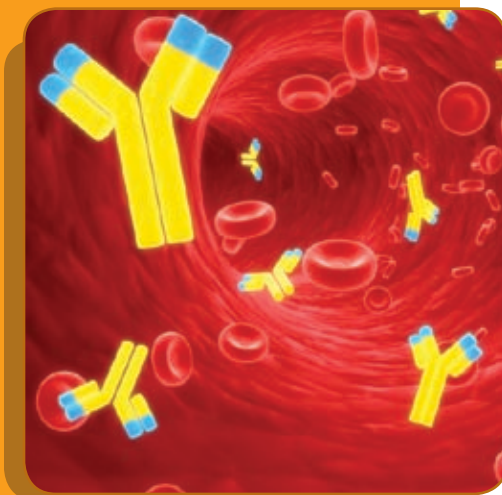
Another common tissue vulnerable to antibody production from wheat ingestion is the thyroid. Depending on the study you read, as many as 65% of patients with Celiac Disease will also have elevated antibodies to their thyroid (Hashimoto's Disease). And we know that people diagnosed with Celiac Disease have three times the risk of developing thyroid disease (usually low thyroid function) with or without developing an autoimmune disease of the thyroid.

On a gluten-containing diet and don't feel great (tired, cold, sluggish, depressed)? For those who do not develop antibodies

Organ-Specific vs. Non-Organ-Specific Auto-Immune Disorders

In general, autoimmune disorders can be classified as either organ-specific or non-organ-specific. In organ-specific autoimmune diseases, antibodies are specifically directed against targets localized in a particular organ or tissue and are often detected in the blood. Examples of organ-specific autoimmunity include: for

the thyroid- Hashimoto's Thyroiditis or Grave's Disease; for the pancreas-Type I Diabetes; for the heart-Myocarditis and Cardiomyopathy; and for the muscles-Myasthenia Gravis. In contrast, the non-organ-specific autoimmune disorders are characterized by the presence of antibodies directed against multiple targets (not specific to a particular organ). This results in the involvement of several organs or endocrine glands and is often characterized by the presence of specific circulating immune complexes. Non-organ-specific autoimmunity includes diseases such as Systemic Lupus Erythematosus (SLE), Rheumatoid Arthritis (RA), and Scleroderma.



to their thyroid with gluten allergies, but do develop low thyroid function, 71% of them will return to normal thyroid function on a gluten-free diet. That means their thermostat gets turned up, and they start burning more calories.

For those individuals who do develop thyroid antibodies, elimination of gluten within 1 year results in a return to normal levels of thyroid antibodies for 20% of them. For those who still had elevated thyroid antibodies after 1 year on a gluten-free diet, 60% of them now had normal thyroid function with the elevated antibodies. And of those who did not achieve normalization of their thyroid function on a gluten-free diet, 80% of them cheated on the diet. What that suggests, is that if you have allergies to gluten and you have thyroid dysfunction (whether it's low or high thyroid function, or autoimmune thyroid dysfunction), the

odds are in your favor that 1-year of a gluten-free diet, not "mostly gluten-free", or "pretty much gluten-free", but 1 year of a completely gluten-free diet may help get your thermostat working the way you want.

For more information on Unlocking the Mystery of Wheat and Gluten Intolerance, please go to www.thedr.com. There you can find information and a DVD that can inform you of the Physiological and Neurological effects that wheat and other grains have on the entire body. Sueson Vess, author, food coach and consultant is also on this DVD with information of how to successfully have a Gluten-Free Diet.

An IMT Discovery:

Gluten Allergies are Related to the Cecum of the Large Intestine.

By Sharon Giammatteo, Ph.D., P.T., I.M.T.,C. and Thomas Giammatteo, D.C., P.T., I.M.T.,C. (Excerpted from the article)

As a clinical practice, we are very concerned with what is happening with gluten!

Over the past several years, there has been an alarming increase in gluten-induced severe pathology. Some of these pathologies include: gluten ataxia (loss of balance); gluten-sensitivity-induced neuromyelitis optica (auto-immune inflammation of the optic nerve and spinal cord); Burkitt's lymphoma (lymphatic cancer) and others. Typical complaints include pain, perhaps at the right hip, and joint swelling. Often, the complaints are gastrointestinal (GI tract)-related with the signs and symptoms appearing to be similar to Celiac Disease (CD).

In 2004 it became evident to us that gluten sensitivity was becoming an increasingly widespread problem. European articles began highlighting this problem in 2001. In the US we began finding articles supporting our theories and findings in 2004. Today, many scientists contribute to the literature on gluten sensitivity and gluten intolerance.

Since 1984, as part of our diagnostic process, we have been using Myofascial Mapping (MM), a soft tissue approach to identify areas of pathology in the body. For the past two-and-a-half decades, our students, graduate Physical Therapists, and other manual practitioners have been performing MM on their patients, and we have collected and analyzed much of this diagnostic information.

By 1996, we determined that when MM showed positive for problems in the cecum and ileocecal valve, it indicated gluten sensitivity. We developed the

following protocol and have followed it since: 1) a strict elimination diet of gluten for 3 months; 2) nutritional supplementation of zinc, manganese and chlorophyll; and 3) IMT to reduce and eliminate apparent problems affecting the cecum.

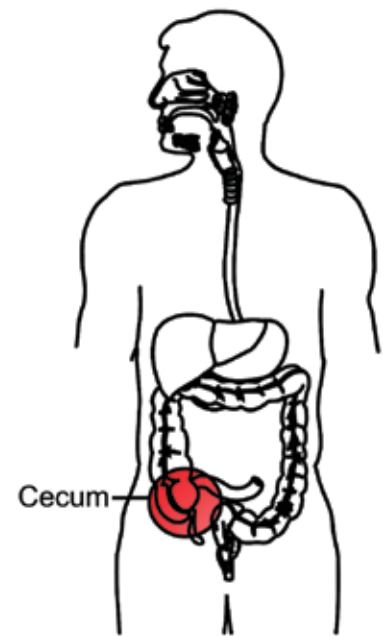
In 1996, over 80% of patients having problems with the cecum responded well to this protocol. The remarkable results with this approach show that a program of gluten elimination plus IMT would result in decreased pain, decreased swelling, and improved digestion.

By 1999, approximately 20% of patients were not responding as well as expected. We discovered that people not responding to the protocol did respond positively by adding the IMT allergy component to their treatment program. For these patients the elimination of gluten was extended to one year, and they often chose to extend their elimination diet of gluten indefinitely.

By 2003, we began to see a change in mapping (MM) at the cecum. The percentage of remarkable results decreased from approximately 80% of patients to 60%. We were seeing more and more patients having trouble at the cecum.

Searching through the available literature, we found limited materials on gluten sensitivity. Since 2004, as mentioned above, the amount of information available has increased and become more widespread.

Our IMT practitioners continue to investigate current research and contribute to further clinical research. Our clinical research results are disturbing. We have noted that the number of persons with positive MM at the cecum has increased. Currently, we



have found that almost 100% of patients test positive for gluten sensitivity!

Some patients show bizarre signs and symptoms. One example is an 11 year old girl who first came to our clinic in a wheelchair. Our diagnostics indicated that she had a severe gluten-sensitivity-related reaction which was an underlying cause of her neuromuscular disorder. Following the evaluation, we recommended a strict elimination of gluten. After three days of eliminating gluten from her diet, she returned to our clinic to begin her IMT treatment program. When she arrived, she was without her wheelchair. She actually walked into the clinic!

Another example is of a 70 year old woman who suddenly developed an ataxic gait (this walking pattern resembles a 'drunken sailor'). After 4 weeks of a strict elimination of gluten, she began walking normally.

We have documented hundreds of patient improvements following our program of IMT along with an elimination of gluten.

The alarming increase in gluten-induced severe pathology over the past several years is a serious problem affecting many, many people. Fortunately, there is more information readily available than ever before, a method of testing for gluten sensitivity, and a protocol that works to reduce and eliminate the resulting problems.

Meet our Featured Authors



Sharon Giammatteo Ph.D., P.T., I.M.T., C.

Sharon Giammatteo is President of CenterIMT, Center of Integrative Manual Therapy and Diagnostics, a network of health care clinics in the U.S., Canada and Europe. She is also President of Dialogues in Contemporary Rehabilitation (DCR), the learning, resource and research center for IMT™ in Connecticut. DCR presents over 150 seminars around the world each year. Their authorized Connecticut School of Integrative Manual Therapy is situated in Bloomfield, CT.

Sharon earned a PhD investigating manual and cranial therapies for the neurologic client; her graduate studies included advanced physical therapy and clinical neurosciences. Sharon developed Integrative Manual Therapy™, the Integrated Systems Approach™ and Integrative Diagnostics™. She

has taught on 5 continents as an expert in orthopedics, chronic pain, pediatrics, and neurologic and geriatric rehabilitation. Please contact her at: www.centerimt.com

Thomas Giammatteo D.C., N.D., P.T., I.M.T., C.

Tom Giammatteo is Director of Operations for CenterIMT and Vice President of DCR. Dr. Giammatteo holds undergraduate degrees in both Physical Therapy and Human Biology. He received his Doctorate of Chiropractic Medicine from the National College of Chiropractic and earned a Certificate of Meridian Therapy and Acupuncture. In addition to his teaching fellowship, he was a clinical specialist in Orthopedic and Neurologic Rehabilitation for the National College of Chiropractic. Dr. Giammatteo was on staff for three years at the Upledger Institute's Healthplex Clinic and Brain and Spinal Cord Dysfunction Center in Florida. He currently practices in Connecticut and throughout the United States, specializing in sports medicine, orthopedics, neurologic, pediatric, and medical patients. He has presented around the world to physical and occupational therapists, chiropractors, allopathic physicians, osteopaths and naturopaths.



Kimberly Burnham, PhD

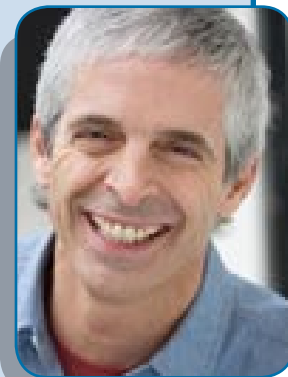
Kimberly Burnham has a PhD in Integrative Medicine (2006) with a focus on Integrative Manual Therapy and Parkinson's disease. Before starting her private practice in West Hartford, CT, she spent 11 years working for the Center for Integrative Manual Therapy and Diagnostics. Of her work as a massage therapist, Integrative Manual Therapist, and Matrix Energetics practitioner, she says, "I am fortunate to see so many positive changes, changes that many would consider miraculous or impossible. Those experiences have ingrained in me the ability to see the possibilities and to know that healthy living and pain-free well-being are possible." Please contact her at www.KimberlyBurnhamPhD.com



Dr. Thomas O'Bryan, DC, CCN, DABCN

A graduate of the University of Michigan and the National College of Chiropractic, Dr. O'Bryan is a Diplomate of the National Board of Chiropractic Examiners, a Diplomate of the Clinical Nutrition Board of the American Chiropractic Association, and a Certified Clinical Nutritionist with the International and American Association of Clinical Nutritionists. He is a Certified Practitioner in Functional Biomechanics and a Certified Applied Kinesiologist. An active member of multiple professional organizations, Dr. O'Bryan has received numerous distinctions, including Chiropractor of the Year (1988) in Chicago, and is adjunct faculty of two universities. He is also a tri-athlete and a second-degree black belt in Aikido.

Dr. O'Bryan was recently selected as one of 5 nationally recognized presenters on 21st Century Endocrinology: Thyroid and Adrenals as Sentinel Organs for his presentation on the widening web of celiac disease and thyroid dysfunction at the 2007 International Symposium for Functional Medicine. You can contact him at 1-877-GLUTEN-1 (458-8361) or (630) 836-9900 • drTom@theDr.com • <http://www.thedr.com>



Web Site Link to references for all articles in this newsletter
http://theburnhamreview.com/Mission_Hills_Gluten.php

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Gluten Sensitivity

AN IMT PERSPECTIVE

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