

Reader reports from the Food Intolerance Network www.fedup.com.au

("aggressive", "aggression", "violent" keywords only)

[1327] Salicylates and the changing face (March 2015)



I could not resist sharing these photos of my little girl about 2.5yo pre-diet. On the left is the face we saw most days, all day. On the right is her now, the new girl. She has just started school and her teachers have said how great her behaviour is in class. So, for those just starting this journey of discovery, keep up the good work, be patient and good results will come.

The Pre-diet girl showed signs and symptoms very similar to severe ODD, ADHD, with anger, over emotional, anxiety, inability to concentrate on a task, several tantrums a day with each lasting anywhere up to 45 mins, self harm, irritability, aggression, frustration, laughing when inappropriate, waking screaming and going to bed screaming, very frequent wees (incontinence), aching limbs at night, blocked nose/sinus, itchy skin (no rash) sleep disturbance, lacking energy, sensitivity to touch, sounds, smells (Sensory Processing Disorder). We changed her diet just prior to her 3rd birthday and within two weeks we saw a completely different child. Even her little face changed. She became a calm, normal, loving, happy, intelligent, creative child. Her behaviour changed to what we would call normal 3 yr old. The odd tantrum, but not lasting long. The other issues she was also dealing with, just about disappeared or were greatly reduced ie sensitivity to sound/touch, aching limbs at night, incontinence, making toilet training possible. If they returned, we knew that we had gone over the salicylates threshold. We stick to a diet with her of low/mod sals. Knowing her diet, we can sneak in the odd strawberry or other higher sals foods here and there. No preservatives, additives, msg, artificial colours for her where at all possible. She

is my third child, first child from second marriage. My other two children have no issues like this. Oldest has lactose intolerance. Youngest from second marriage has lactose intolerance too. Having ulcerative colitis now at 44, I realise that I had my own food sensitivities as a child and continue as an adult. I admit though, that we have not done strict challenges - Jan on facebook

[1325] 160b: Annatto and frightening headbutting (March 2015)

My 7yo son headbangs and headbutts with annatto. Actually he generally becomes a right little monster with it. I avoid it like the plague. I sometimes will allow other additives in small amounts if I absolutely have to, but I will not allow annatto under any circumstances after the last episode with it.

When did he first start head banging? He never was a child that had particularly bad behaviour. I only took all the additives to see what would happen, and now that he is additive free, I get exceptionally bad behavioural spikes with additives. Some additives he can tolerate small amounts of, and some there is now pretty much a zero tolerance level, eg sodium benzoate in medicines. He didn't really head bang as an ongoing thing, but on occasion in the middle of a tantrum or when he was particularly frustrated he would do it at the age of about 2 or 3. He also appears to be gifted, I am thinking of having him assessed. It had stopped until I saw the annatto effects in January.

Which products (e.g. yoghurt, ice cream) have you noticed are a problem? I have only seen a reaction that I am absolutely sure was due to annatto involving headbanging once, and that product was Magnum Minis. As soon as I attended your talk last year, I stopped my kids having additives, especially colours, immediately. I did give him ice cream once that had annatto, and we had some issues at school on the Monday, but he had also had artificial colours, preservatives and flavour enhancers that weekend (we were away and I thought it would be ok for the weekend, discovered I was wrong!) so I can't be sure that he did react to the annatto then. There was no head banging after that weekend, but he did punch someone. That appears to be a reaction in him to flavour enhancers and preservatives as a general rule though.

How did you first realise that annatto was causing the problem? He has been additive free since July 2010, and this reaction happened in January 2011. He had had no other additives other than the annatto. He has not had annatto since, and the behaviour has not repeated.

Why do you say that "I will not allow annatto under any circumstances after the last episode"? My aunt gave both my kids a Magnum Mini after lunch, just the plain chocolate and ice cream one, which I had not given them since starting additive free. My son was ratty and annoying that afternoon, but I put that down to being tired, as we had had an early start flying from Sydney to Adelaide. That night she allowed them another one after dinner. The next day, I was at the supermarket, and my son and daughter had a disagreement about something, and he just lost it and headbutted her, followed by headbutting the shelves and the floor of the supermarket, and proceeded to follow me around the shop screaming at me, and headbutting several shelves along the way. No amount of talking or threatening of punishment had any effect. I told him that I was leaving and walked out of the shop, and about 5 minutes later he came screaming out looking for me because he realised he had no idea where he was, and he headbutted my leg. I physically restrained him in his car seat and waited 10 minutes for him to

stop thrashing and screaming. He was generally painful for the next 24 hours. He had not behaved like that since he was 2. I knew there was annatto in the magnums, but I thought a small amount would be OK, which clearly it wasn't. I bought chocolate coated ice creams which didn't contain the annatto, and there were no further issues. He has not had annatto since, and we have not seen any behaviour like this again. He really hurt his sister, she had a bruise for a week. He had never ever headbutted another child in his life before then, and his sister is half his size. I'm not willing to risk that again, so I check everything that could possibly contain annatto before he has it, yoghurt, cheese, ice cream, margarine etc.

Any further observations? Flavour enhancers make him aggressive. Preservatives appear to remove his impulse control. Artificial colours make him hyperactive and aggressive. But none of them make him behave the way he did after the annatto. After that episode, I would rather give him any other additive than annatto. I can usually overcome issues that the other additives cause, but not the annatto.

I only did the diet to see what would happen. He wasn't a particularly badly behaved child, he was challenging, but he could be gifted, so challenge is part of that. Now that I have stopped the additives, I can see the sorts of problems that other people have, because he appears to be rather sensitive to them now. He is a more calm and reasonable child, and is certainly better behaved than most kids I know. His behaviour didn't stand out compared to the other kids before, but it certainly does now, he is much better than other children, and I can see the effects of the additives in other kids now that I didn't see before.

Another interesting thing I noticed when I stopped the additives is that he lost over 2kg in weight in about 6 months. He was a small, skinny child to start with (he was 19kg when I started the diet, dropped to 16.7kg, and now is 19.4kg), and the weight just fell off him. It took him a further 6 months to catch it back up, and he eats like a horse, and has done since I stopped the additives.

Thank you for everything you do, you are amazing - Alice (report received December 2011)

[1323] Salicylates and sleepwalking (March 2015)

I have a 5yr old daughter who is intolerant to natural foods. She becomes violent when she eats carrot and it can last for a few weeks on and off. She also cannot tolerate most fruits and unlike the violence from the carrot she acts drunk when she has fruit. We now limit her vegies, only give her bakers delight breads as we found she reacted to the vinegar from the supermarket breads and we have her on failsafe butter too.

Since changing her foods we have a happy child who is now more relaxed, we can now speak to her without her going off. She is calmer and much nicer child.

We have noticed that when we feed her something with salicylates she also sleepwalks very badly. Another thing, before we changed her diet she had ear infection after ear infection. I had her to an ear specialist who thought she needed an op but now looking back since changing her diet she only has an

infection as often as a normal child - Mel (report received August 2011)

[1320] My young son has learnt his "happy" and "cranky" foods, but perfumes are the worst (March 2015)

My 3yr old son Jack is salicylate and benzoate intolerant. I began this journey after googling head banging and your website appeared with a wealth of information on annatto160b. I eliminated everything we were consuming Kraft cheese, yoghurt, ice-cream etc and noticed a drastic improvement. My toddler no longer banged his head on the floor or the walls.

After doing a supervised elimination diet, we spent the greater part of last year learning about failsafe eating and adapting our lifestyle accordingly. We went through the stage of convincing pre-school and family members that salicylate intolerance really does exist and after providing them with fact sheets from your web site they are more understanding.

Jack has learnt his "happy" and "cranky" foods and even asks if certain foods have salicylate or colours in them. A great learning tool was the weekly grocery shopping. The fruit and veg department became our classroom as we would talk about salicylate and foods that make us feel happy or cranky. The curiosity of a then 2yr old is amazing.

Benzoate was our hidden problem though. It was not until severe reactions to phenergan and valium that we joined the dots. Jack required a CT brain scan so sedatives were prescribed. After giving Jack valium, 6hrs later and we were still driving around with a 2yr old singing Playschool songs in short hand and stating I feel funny. Finally he fell asleep - yes that lasted for all of 15mins, we got the scan done and he was still bouncing off the walls at 11pm that night!

I have since learnt that poor Jack has been reacting his whole life. Baby panadol, bonjela, infacol - yes all salicylate and or benzoate as ingredients! In reality we have been making things worse for Jack by giving him over the counter medications that people use everyday in an attempt to ease pain.

Since managing most of the food issues we are now noticing reactions to chlorine, air freshners (at Nan's) and perfume (visiting aunts). A weekend visit to relatives has become a minefield of scents and hidden benzoates.

Like others I have read about we too notice a difference in behaviour after weekly swimming lessons in a chlorinated pool. After many attempts we have finally got Jack to wear goggles, but he seems to compulsively lick or drink the pool water (I am assuming he is getting some kind of fix from it). The level of aggression following lessons is what led us to draw the link.

It is a constant battle with one so young who cannot fully verbalise what he is feeling, he just reacts with kicking, hitting, head butting, talking gibberish and constantly rubbing his nose and playing with his tongue. Jack's reactions last 8 days and at the end of the reaction he gets very upset and clingy.

Dealing with food intolerance can be very isolating. When you hear comments that your child is a "horrid vicious child", as I have had said to me, it is upsetting. Or being told it would be good if you came to the birthday party late so we can have all the GOOD FOOD (junk full of colours and preservatives) before you arrive.

Perseverance does pay though and family and friends are noticing the difference. My parents can now distinguish between toddler behaviour and a chemical reaction. I would like to say a BIG THANK YOU for all the time and effort you put in to providing us novices with such a wonderful resource. There seems to be an endless amount of information we need to process in order to protect our children and your web site and cook books have been of tremendous assistance. Your efforts keep us sane!

UPDATE 3 years later: to re read our story (above) made me cry. I had forgotten just how far we have travelled on this journey to a new way of living. We still have our good and bad times, but food is under control, it's just inhaled salicylate/benzoates that cause us the most grief.

Jack is now 6yrs old and in year 1 at school. I spent a considerable amount of time educating the principal and his teacher last year on food intolerance and fortunately they were open to being educated! The Principal even made note of a new student having chemical intolerance in the school newsletter, and requested parents be aware that wearing fragrance in the classroom would have an adverse effect on one of the students.

As we all know this doesn't guarantee people will abide by the request, but after years of slogging away, to have the Principal accept the literature we provided him & be willing to assist, was a relief. He did liken food /chemical intolerance to when nut allergy firstly came about. He remembers a lot of scepticism re nut allergy & was willing to accept that food intolerance was a real issue for Jack; the greater community just wasn't aware of it.

The school toilets with the automatic air fresheners are our biggest problem at school. Again though the Principal arranged for Jack to use a toilet in the administration block that did not have an air freshener. This worked for most of kindergarten, but kids being kids the teasing about being different has kicked in, so now Jack is unwilling to go to the administration block for bathroom breaks (which is understandable).

Most of the kids in his class are fine about Jack having his own treats for special occasion days at school, but there are always 1 or 2 kids who like to remind him his food is different (yes, tastier/healthier and home made!). I take cup cakes to school at the start of each term for class birthdays and leave them in the freezer. The lady who runs the school canteen has been lovely, and lets me take homemade pizza or chicken nuggets in and she heats them up, so Jack can have a lunch order just like the other kids.

On reflection we have been blessed with the staff we have encountered at school. I have gotten quiet good at smuggling my homemade chicken nuggets and French fries into McDonalds birthday parties. I did approach them about re-heating nuggets for me, but food safety standards wont allow them to. Now I heat them just before I leave and travel with a heated medipack in an insulated lunch bag. Then there is another one with an ice brick in it for the homemade ice cream cake!

As I said food is the easy part. Shopping centres, toilets, theatres and hotels are still places we try and not frequent too often. Even going to the Doctors is an issue, with other patients in the waiting room wearing fragrance, the hand sanitisers and air fresheners.

We love our Rainbow Air and are no longer scared about staying in hotels. Though I still do spend a lot of time researching establishments that we can access without going through lobbies/foyers and elevators. Caravan parks with cabins or your old fashioned single story motels are safest.

Again Sue, I want to thank you for your tireless efforts in guiding us and reminding us we are not alone. To be honest the bad days can be really bad when trying to calm a child high on chemical overload. It is exhausting. To know others in this forum understand and are experiencing similar is comforting. Those in my circle of friends try and understand, but until you see an outburst first hand, you can't fully understand. - Nicole by email

[1312] 160b annatto: One-liners (March 2015)

She was only 10months when she started reacting I couldn't believe such a small baby could be so violent. ..- Jennifer

All I know is that my 5 year old cannot tolerate this at all, bed wetting, aggression, risky behaviour like running out in front of cars and just all round horrible naught behaviour of course a huge amount of food had this reaction but I have found 160b one of the worst for him (microwave popcorn oh good Lordy it's revolting the reaction) - Debbie

My 11 month old would bounce her head repeatedly off the tiles she was aggressive punching walls etc snacking kids twice her size at daycare. At only 11 months old I was so scared that she had some really issue but cut the 160b and she is an angel - Jennifer

[1300] Chlorine and behaviour/health issues - facebook thread (February 2015)

My mr 2.5 is like an annoying mosquito after swimming lessons. We are total elimination diet (2 years now), gluten and dairy too. We have found a magnesium chlorine pool better- he is super violent if he goes near a public chlorine pool. I find an Epsom salt and bicarb bath as soon as we get home helps a lot but it is not immediate. I schedule our swim for 11.30, we come straight home and bath. I let him stay in as long as I can "practice his swimming". He is normally exhausted so I shove some lunch into him- I won't lie, occasionally this is just toast in the bath . Then he will normally have an early afternoon sleep. Wakes up much much more manageable. He is still more busy and poor concentration but less tears and tantrums - Emma

[1299] Do amines make you emotional? - facebook thread (February 2015)

Yep, and irritable. I get even more emotional and aggressive if I have salicylates - Linda

I am emotional therefore I eat amines (chocolate) lol. My daughter goes silly and aggressive and does things without thinking through like jumping off and over couches and chairs and what we call bull at a gate behavior! - Shay

[1286] ADHD: “three weeks on failsafe and all his symptoms have stopped” (November 2014)

My son has been on ADHD medication for 5 years (he's now almost 12) - while it served its purpose in the beginning, in the last 12 months he'd been aggressive, had a racing heartbeat and severe verbal and physical tics. Two weeks off his medication and three weeks on failsafe and all his symptoms have stopped and his teacher says he's more focused in class. I wish I had of been informed of the diet option before being told medication was the only solution. What's safer for our children? Dosing then up in medication (even if it is working) or changing their diet. I almost feel I was a lazy parent for taking the easy medication option without even looking at possible alternatives - Larissa

[1257] Separated parents and failsafe - thread from facebook (February 2014)

We have the same issue. It's impossible but at least my stepsons' mother values "natural" foods. But her refusal to believe in Twin One's MAJOR amine intolerance is ridiculous. She TOLD him to eat the chocolate cake then complained she didn't want custody of him because he was too aggressive and violent. Got nowhere with dietician letters etc. Mediation not an option either. SIGH it's hard. Shawna your suggestions are great - Megs.

[1251] Maybe alcohol's not the problem –'brain snaps' due to additives (January 2014)

I was sitting at home, reading about 'alcohol-fueled' violence in Sydney, while listening to my seven- and five-year-old having a Category 5 tantrum outside as they recovered from the preservatives and artificial flavourings and colourings they'd been plied with at family holiday functions.

Then I had what may or may not have been a Eureka moment. I'm sure someone has brought this up before, but it could it be that ingredients other than alcohol in beer, wine, spirits and mixed drinks could be at least partly responsible for the so-called 'brain snaps' which have led to recent violent and tragic incidents?.

While I was contemplating this, I was drinking a 100% natural, preservative-free beer. I do this not because I like spending the extra money or think it gives me street cred. I do this because I've had some terrible experiences with some mainstream beer and mixed drink brands. I have had what some might term brain snaps, not leading to any violent behaviour on my part, but certainly reckless in terms of self-harm. I've also had massive headaches and allergic reactions from these drinks and, when I've told other people about this, some have described exactly the same symptoms.

I'm not saying everyone who drinks the same products would have the same reaction, just as preservatives and colourings affect my kids more so than others we know, who can scoff every candy cane on the Christmas tree and still remain so placid and angelic, perhaps they should be used to decorate the top of it.

I'm also not saying that alcohol should be disregarded. Even if other ingredients are only a factor, the alcohol obviously lowers inhibitions and reduces the ability of adults to moderate altered moods and feelings of unease - bringing them back to the unfiltered child-like state of my two, who don't have the skills or the desire to curb their tantrums and will start fighting, sometimes physically. Or it could be the interaction of these alcohol and these chemicals creating an altogether different situation. I'm no scientist so that's just speculation.

Then there is the question of what impact the snack foods being eaten with the alcoholic drinks might have. And this is before we even bring in other factors like caffeinated alcoholic beverages, other drugs, the ingredients of high-protein dietary supplements and steroids.

Or perhaps I'm completely wrong and it's just a coincidence that I'm blowing out of all proportion. However, I'm thinking if they're serious about doing something to reduce these violent incidents, they would be as keen as anyone to ensure they're targeting the right ingredients and that the right approach is taken. – Michael, NSW

Sue's comment: While we certainly agree that additives in drinks, mixers, snacks and fast foods can contribute to temper outbursts and removing them would be a giant step in the right direction, this particular issue is complicated by the fact that all alcoholic drinks except gin, vodka and whisky are very high in natural salicylates, amines and glutamates. I can't see the general public wanting to embrace a message that says "drink only gin, vodka and whisky - and don't mix your vodka with tomato or fruit juice" although for a certain proportion of the population - possibly the ones in the news – this could make a huge difference. It would be good to see more awareness about food intolerance at an earlier age so that people know what affects them long before they get to legal drinking age.

See also story [304] "Last weekend I assaulted my wife and did horrific damage to her face ... I had been drinking most of the afternoon, then consumed two strawberry sundae tubs of icecream ..." Was it artificial colours or the very high salicylates in strawberry flavouring or both? We don't know, but this story illustrates what Michael says, that a combination of alcohol plus food intolerance could be potentially lethal [read more](#).

[1229] 160b: Massive meltdowns (facebook thread, October 2013)

I don't know about the health complications all I know is that my 5 year old cannot tolerate 160b annatto at all: bed wetting, aggression, risky behaviour like running out in front of cars and just all round horrible naught behaviour of course a huge amount of food had this reaction but I have found 160b one of the worst for him (microwave popcorn oh good Lordy it's revolting the reaction) – Deborah

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[1199] Some reports on low salicylates (June 2013)

Some of these reports came from readers after a Medical Journal of Australia article questioning the value to low salicylate diets. Details of the article can be seen at <http://fedup.com.au/news/breaking-news/immunologists-knickers-in-a-twist-about-salicylate-elimination-diets-for-children>

- We've noticed a HUGE difference in our son's temper tantrums and violent tendencies! - Julie, NSW
- They can come and study my violently sal intolerant kids. At 6 months, one of my sons cried for 8 hours after eating a small serve of mashed pumpkin. Even tiny amounts of mod sal foods like carrots and sweet potato brought on massive rashes and stomach aches. Wish sceptical people could see this stuff - Veronica

[1194] One-liners (March 2013)

I have to tell you your books and DVD have been a Godsend! We've noticed a HUGE difference in our son's temper tantrums and violent tendencies! We have told everyone we know about you and your research. Thank you! - Julie, NSW

[1159] Hoping for something better and I believe I have found it (October 2012)

I have a five year old who has epilepsy as well as well as host of behavioural and learning problems. From reading your book I think he may have a food intolerance problem because he gets sick when he eats pizza or hot chips. I can't get in to see a dietitian for the elimination diet for five months. At the moment I have eating only from the shopping list in your book. It has only been 5 days and I think I can see an improvement. I am worried about the medication that he is on (Tegretol) as I have read that it can cause some of the aggressive behaviour that he exhibits. I have looked through some of the other medications used for epilepsy and it doesn't seem that any them would be suitable.

2 weeks later: I have had had my son on the diet for about 2 weeks now and have good success. The last 3 days he has been wonderful and I am hoping that it continues. I borrowed your book (Fed up with ADHD) from the library and love it.

Next day: I took my son to his paediatrician yesterday. We are changing him from Tegretol liquid to white Epilim tablets which seemed to be the one with the least additives and hope it all goes well. We have had 4 really good days now, the best he has ever been. I don't think his doc could believe the difference in him because all the time they have only ever offered medication for his behaviour which I refused hoping for something better and I believe I have found it. – Sonia, by email Feb 2007

[1125] Conduct Disorder -hitting/kicking/swearing/yelling/pushing - gone (September 2012)

It's been about 6 weeks now that we've had our son eating failsafe. In fact, the whole family to different degrees. Our soon to be 5 yo son was diagnosed with Conduct Disorder over a year ago, however the behavioural problems have existed for two years - hitting/kicking/swearing/yelling/pushing etc. Considerably violent and unpredictable outbursts. We've been to see all kinds of people, Paediatrician,

Psychologist, the Children's Developmental Service, more recently a Psychotherapist. All this has cost us a fortune and made some difference, although not significant and not consistent.

This last weekend has been one of the best we've had in two years, we have our beautiful, kind and gentle son back. The change is significant. At his kindy, ALL the staff have noticed, not just his own teachers. If only we had looked more closely at his diet two years ago. Thank you, thank you, thank you - Megan by email.

From [1117] One-liners after Fedup Roadshow (August 2012)

My son has been off most artificial additives since 2005 and we can really see the difference when we let him have things occasionally such as at birthday parties. He is now 9. I'm sure he would have been put on medication had we not discovered your website. Now I'm keen now to do the full Elimination Diet to check for anything else, and particularly to see whether salicylates and amines have an impact on my other children - they don't seem to react to anything artificial, but there is more anger, aggression and irritability in my house than I think is reasonable so it is worth a try. - Melinda by email.

[1107] ODD: Our whole house/lives revolve around him (April 2012)

I have an almost 5 year old son who I believe has ODD. I am yet to get this diagnosed (awaiting appointments) but would lay my soul on it that this is the case. He is the youngest of 3 children (all boys - 12, 11 and 4) and has been difficult from the word go. Things are just becoming more obvious and scaling to a higher level the older he gets. At first we were told (12 months ago) that it's a development stage he will grow out of but this just does not seem to be the case.

Our whole house/lives revolve around him. To say he dictates the household dynamics is an understatement. For the last 4 years of his life, my husband and myself have felt it was us who had the problem.

Something we were doing wrong, something we weren't doing enough of. We have read so many self help books to assist us in being better people, more controlled, more patient, more understand towards others and more at peace with our struggles. We have questioned ourselves as people and our abilities as parents everyday of our lives since he was born. Whilst this has not been of waste (improvement of any kind can only be for the better), we are now realizing that it is not us. We are not bad people and not what creates the problems.

After researching what is happening to him and his behaviors, I have stumbled across ODD, which I have never heard of before. He fits this mould to a tea. Not just four of the symptoms, but all of them and not on a weekly basis but on a daily basis, several times a day.

What I would like to investigate is the option of elimination diet to establish whether food plays a part. Definitely there are better days than others which leads me to believe certain foods may be a contributor considering there are variations to his behaviour. I have not documented nor memorized these instances as I had not even considered this could be a contributor.

Could you please help me in my quest to educate our family and assist my son with what could possibly mean a major difference in our lives?

8 weeks later:

The diet has been working really well. We hired the Fedup dvd from our local library and got the whole family to watch it so everyone could understand the effects of foods in health and behaviours and also what we were trying to achieve. We also purchased the Failsafe Cookbook for recipe ideas as well as the many helpful guides around good choice/bad choice products which became very useful when grocery shopping.

We started with small changes that were a daily consumption. Stuff like breads, milk, spreads, cereals, drinks. These items were traded for better choice products. We didn't remove anything without replacing it first with a healthy alternative. It was important for the children to understand that they were not being deprived of anything but instead by being aware of what they were eating and making better choices, they could still enjoy all the food groups including sweets.

The positive results were almost instant. Our problem son was becoming less of a problem right before our eyes. He became more emotionally in control, less aggressive within his outbursts and far more affectionate than ever before. I started getting hugs and kisses and told several times a day how much he loves me (which by the way in his words is twenty fifty hundred - I'm assuming that's somewhere near infinity). Such simple changes with so much benefit. As a family unit, we have all changed for the better. I can't say there isn't a household member who hasn't noticed at least one benefit within themselves or each other.

It brings tears to my eyes to know that something so simply had controlled our lives for far too long and left myself and my husband questioning our abilities as people and parents. I thank the heavens above everyday for stumbling across your website which provided our family with the tools to make the changes we needed for a better, loving life. For the first time in 5 years, we can now finally bond with our son. Instead of being the control of the family, he has joined with the rest of us in becoming part of the family.

I spread the word everytime food is brought up in conversation. Not just for the benefit of children like my son but for the health and benefit of all people. My only hope now is others out there are able to be introduced to this information, somehow, someway.

Thank you for all you offer families and all the best in your quest with educating the world. – Carina by email.

[1103] Amines make him angry and violent (February 2012)

I'm a mom to a very amine sensitive teen boy and your books, website and DVD have been a big help to us. I think without the knowledge you imparted through your books, there's a good chance my son would have become a violent young man, because under the effects of amines he gets so angry. But, with the diet, he can enjoy life and we can enjoy him! - Kelly

[1046] 319: Four weeks of hell from 319 (TBHQ) in gluten free bread (from submission to FSANZ 2006)

Our six year old son is intolerant to many preservatives, colours, flavours, gluten, dairy and food chemicals. Unless we control what we feed him on his very restricted diet, he reacts behaviourally and cannot learn at school or go forward in his treatment by his paediatrician.

Earlier this year, we were giving our son a gluten free bread mix which states on the packet, "preservative free". We had reason to trust this product because it was listed on the 'safe shopping

guide' issued by the Australian Royal Prince Alfred Hospital, supplied by our dietitian.

This product was wonderful with it being so versatile in producing pancakes, bread, crumpets, wraps and pizza bases all from this one mix. Our son was able to enjoy more variety without feeling deprived. Once I increased the dose of this product for our son, i.e. pancakes for breakfast, French toast for lunch and a wrap for after school, within a day he displayed explosive behaviour and was unreasonable.

We did not suspect foods as it was listed as safe and the company was a reputable company.

We rang our paediatrician who advised us to cut down on his supplement. After a week there was no change, even at school our son's teacher was noticing a big difference in behaviour and learning. The paediatrician advised a blood test, another week passed for the results which in turn came back within normal range. Only then did we suspect foods. The Food Intolerance Network always advises their members to check products containing fats or oils for hidden synthetic antioxidants. I rang our supermarket to double check if there were any changes in their sunflower oil that we use, and they advised there were none. I then rang the bread company and spoke to their Quality Operations Officer. I asked if there were any synthetic antioxidants in their product in question, he said he was pretty sure there wasn't. We insisted that he double check because we were at wits' end and we were ready to have our son's head scanned because he was so aggressive and erratic in his behaviour. The man rang back in shock and was very apologetic, because the oil which was supposed to be 'pure canola oil' as stated on the ingredients list, in fact had synthetic antioxidant 319 in it.

We were relieved but angry, our son was put through four weeks of hell, not to mention us as well, because he could not control what he was doing, and it took well over a week for the affects to wear off. We had our good boy back and he even said, "Mummy please don't give me bad food any more"!

When our son has had foods with hidden synthetic antioxidants in them, we consider the reaction our son displayed as life threatening, for example, when our son becomes enraged with fury, usually over something trivial, he has run out onto the road. Another time when I was driving down the mountain on hair pin bend roads, enraged, our son got hold of my hood on my jacket and was pulling on it while I was doing my best to manoeuvre the car down the road without hitting the guard rails and going over the cliff. We believe that these antioxidants should at all times appear on the label. – L....., NSW (Thanks to this mother, Laucke's gluten free bread is now free of nasty antioxidants)

[1037] 320: Unlabelled antioxidants in vegetable oil (from submission to FSANZ 2006)

Our very aggressive five year old improved dramatically on the elimination diet. We were quite surprised and relieved that he passed most of his challenges except for a few additives such as artificial colours. However, after several weeks of excellent behaviour, he gradually deteriorated to the stage where he was uncontrollable, breaking windows and punching others. We were at a loss to explain the downturn. Eventually, we found the culprit - unlabelled BHA 320 in vegetable oil used in a gourmet garlic paste that we had started to use more frequently. There was no effect when it was eaten occasionally, but it caused catastrophic results when used every day. – reader from the NT

[993] Low salicylate versus low fructose diet (March 2011)

My 4 year old son' behaviour has always been challenging, but has been particularly bad in recent weeks. After complaining of bloating, diarrhoea etc a breath test revealed that he was fructose intolerant

(Note: about 50% of people have a positive breath test, so it is not very useful - see Fructose malabsorption factsheet at <http://fedup.com.au/factsheets/additive-and-natural-chemical-factsheets/fructose-malabsorption>). So we started on the strict fructose elimination diet. My GP asked me a couple of weeks later how the diet was going. I responded that it was going well and that my son had not complained of bloating, stomach pains, etc since. However the thing I had noticed the most was his improved behaviour. I'm sure my GP thought I was a little odd, and commented that it wasn't something he'd heard of before but perhaps my son's behaviour is better because he doesn't have tummy pains. I wasn't convinced.

After a few weeks, we started a challenge by reintroducing the high fructose foods. He seemed to tolerate them well as long as he doesn't eat too much fruit each day. However, his behaviour has been foul! He seems more angry than ever, and last week I was wondering if he may be ODD. The Magic 123 which worked well for so long, now has no impact as he is just so defiant.

So, I started FAILSAFE eating 6 days ago. We haven't done it perfectly as his diet is very restricted due to food allergies and the fructose intolerance. But I've removed the high salicylate items, particularly tomatoes, strawberries and cantelope; and we're really just having the good ol meat and 3 veg for tea every night. I've cut his fruit intake to 1 serve every 2-3 days.

Day 1 perfect behaviour although it was still like walking on egg shells.

Day 2 bad morning, good afternoon.

Day 3 good behaviour a little less eggshells!

Day 4, 5, 6 great behaviour.

When things are good he is the perfect gentleman, well-mannered a real angel. But when things aren't going his way he still gets grumpy but most of the time he can now control the anger. A week or more ago, he just couldn't.

Update 3 months later after doing the elimination diet with a dietitian: Things went really well for some time. However, my son was desperate for some of the non-failsafe foods, particularly tomato sauce and jam. So I gradually caved in, and allowed him to have some. Initially it was a little bit every few days, then a little each daily. Although I'm still careful with his diet, he mustn't be able to tolerate even these quantities as we've started to notice some of the same old behaviour. The salicylates seem to have a cumulative effect on him. Whilst his behaviour hasn't been as aggressive or defiant, I'm certainly noticing that he is loud and unsettled. He can't concentrate on playing with his toys, but instead races around the house and jumps on the furniture! So this week were back on failsafe - strictly! – Carly, by email.

What the researchers say: (See page 14 of the RPAH Elimination Diet Handbook 2009 available from www.allergy.net.au): 'Having excessive amounts of fruit especially fruit juice and dried fruit can cause symptoms such as bloating, reflux, abdominal discomfort, wind and diarrhoea. Although incomplete fructose absorption can cause stomach and bowel symptoms, it does not cause other symptoms such as headaches, fatigue or skin rashes ... improvement of symptoms after going onto a low fructose diet is most likely to be due to the simultaneous reduction of intake of natural chemicals in fruits and vegetables'.

[991] Speech: Diet got rid of disfluency and stutter (March 2011)

My 5 year old son has suffered from disfluency in his speech since he started to speak! He was an early speaker, and was putting sentences together very early, but would always talk in a very monotone evenly paced voice, a trait we are now told is quite common with kids who have auditory processing issues. We have recently had him diagnosed with a 'severe' figure ground problem. [the louder the background noise, the more trouble he has in processing what he hears - his actual hearing is perfect] I put 'severe' in italics, because he was tested at a time where he was not baseline; at a time where other factors were in play. Both the audiologist and the speech pathologist had other explanations for the stutter, which was most common at the beginning of sentences. Once he got started, the speech was more fluent, but still monotone.

The speech pathologist said his brain was moving faster than his tongue. He had an amazing grasp of language at an early age and his tongue would catch up with time. We discussed techniques in 'smooth talking' and 'bumpy talking', but aside from that the advice was that he would grow out of it.

The audiologist said that the processing difficulty could be linked to the stuttering as a delaying tactic while the rest of the information becomes accessible.

I don't disagree with these experts, but as time has gone on, I am convinced that other factors are more responsible for these symptoms than either of the explanations above.

We noticed, over time, that sometimes his stutter was worse than other times. A noisy environment always made things worse, supporting the figure ground hearing assessment, but at other times there seemed to be no obvious contributor. Tiredness, we thought? Perhaps new developmental stages?

We had already suspected that colours and preservatives made him 'high' and had eliminated all of those anyway. I made most things from scratch and bought very little processed food.

In about April of this year, we happened upon the 'Fed Up' information. We had just had about 3-4 weeks of hell at home. I was tearing my hair out and the tension in our house with the behavioural problems was unbelievable. His stutter was so bad, that it would take him 3-4 minutes to get through a simple sentence. I was trying to be patient and not draw attention to it as the speech pathologist had told us, but it was not only driving me mad, but for the first time, it was really bothering him. " Mu..Mu...Mu...Mu...Mum..... l....ll....l....l.... wa...wa. wa...wa..... Uh, what was I saying mum? " If I'd put in every stutter, it would take up more than a page! Upon reading various fact sheets on the website, I had an epiphany! I had put dried apricots in his lunchboxes for the 2 kinder days and 1 day care day a week for about the last 3-4 weeks. Just 3-4 each time, but I cut them out immediately while I kept researching.

Within 4-5 days of removing apricots [and no other changes], the stutter had improved, but was still apparent. After another week, other people started noticing the improvement.

That was the beginning. While the stutter had not vanished at this point, it was enough to make me convinced that there was something to all this 'intolerance stuff'. We got more serious, and finally started to see the gorgeous little boy that we knew was in there somewhere. The aggression all but disappeared, the frustration and the stutter were much improved but there were still times where things would go downhill again.

After hearing Sue talk, I decided to get much more serious, and undertook the complete elimination diet,

including the elimination of dairy and wheat. Prior to starting, I spent about 2 weeks trying recipes, building up my pantry items, stocking the freezer etc. I believe that if I had not done that, I might have given up, fallen in a heap and put it all in the too hard basket. The changes in the household were amazing. I was spending a couple of hours extra in the kitchen every day, but with the elimination of wheat [I am convinced] I had the extra energy to do it. A week in, and his stutter had all but disappeared. It was as if he had suddenly grown up an extra year or two. He took adversity in his stride, he shrugged his shoulders instead of clenching his fists, and any remaining disfluency in speech I felt was because of habit rather than anything else. His voice became more interesting, his pitch patters varied and I am sure that he coped with noisy situations better. All of the 'autistic' tendencies which we had seen for years were improved. He read social cues better, spent much less time with his fingers in his mouth, coped with loud noises better; generally it was an amazing difference. His kinder teacher, who has watched this process with interest, remarked that it almost looked as if we had sedated him!

We are lucky in a way, to have a son who reacts so quickly and obviously to things. It makes identifying problems a lot easier. During our salicylate challenge, he went off the chart for silliness, and the stutter got worse. During a course of antibiotics for a bad bacterial skin infection, he got aggressive, angry ... and the stutter got worse. Every time we have slipped up with food, the stutter gets worse. It is our main indicator that something is amiss.

I have no absolute proof. I am not a scientist. I am not a speech pathologist. I am a mum - plain and simple. But I know my boy. I know who he is and who he isn't and these past 7 months I have watched him like a hawk. I know when he is up and I know when he is down. And I am absolutely convinced that his disfluency is directly connected with his diet. I am not saying that the diet is fully responsible, but added to other issues that he has, the diet is what has made the difference for him. A year ago, I was so worried that when he starts school next year, he would be teased because of his stutter. Now, I know that while we will always face issues with diet and behaviour, at least at baseline, he won't be that different from any other child.

And of course, I will be eternally grateful to Sue, and all who contribute to the Fed Up website. Without it, life would be a great deal more difficult. The one thing I am thankful for, is that I never let things go. If I had just listened to the experts and not used my brain and my intuition, then who knows....- Kylie, by email

From [964] One-liners (October 2010)

- We have been following Failsafe eating for three months and it has made an enormous change to our 5 year old boy. Pre-diet he was very aggressive and had developed a range of tics, now all the tics have gone and his lovely, funny nature is shining through. So far the challenges that have affected him have been dairy and salicylates – Karen, by email
- My child (on coloured antibiotics) is like a kid on speed today - screaming and yelling, hitting her sister, breaking trees and generally being violent and frustrated at every little thing. I'm taking her off the medication in the hope she will get better on her own as the alternative is not pleasant for anyone, herself included. – by email

[952] Australia has more preservatives than Britain (October 2010)

I cannot tell you how grateful I am for your guidance on food additives. I noticed a while back, when we were living in Scotland that my daughter (aged 3) reacted to salicylates. I found some information about Dr Feingold's work and kept fruit etc to a minimum. It was only after we moved to Australia that I noticed a big change in her (anxiety, defiance, restlessness, night waking, loud silly noises, aggression towards her brother). We blamed it on the move, a new baby brother etc. But we had no real idea as to what was causing it until we found your website and realised both cream cheese and bread in Australia have preservatives! We never had this problem in the UK so I didn't realise dishing up cream cheese sandwiches (my daughter's favourite) would cause us all such bother! I do hope some changes can be made here in Australia. We are only two weeks into our changed diet and the difference is astounding! - Emma, WA (Australian regulators say we have a higher permitted level of preservatives because of our hot climate - S)

[947] An open letter to the Health Commissioner in my state about pharmaceutical labeling (October 2010)

I'd like to bring to your attention the outcome of my 3 1/2 year old daughter after taking Cephalexin or commonly known as Keflex. My daughter is intolerant to artificial colours, flavours and preservatives. The reaction should she eat foods with them in is the following:

- Lots of violent anger, frustration, screaming, yelling, temper tantrums off the scale
- Throwing objects, hitting people, hitting herself
- Will not listen to otherwise normal instructions
- Sleeplessness, very unsettled at night

This is exactly what happened after 4 days of taking Cephalexin (chemart brand) of Keflex..... My problem is that because in Australia it isn't legal for pharmaceutical companies to list their ingredients on the bottle/box it is very hard for the consumer to know what they are feeding themselves and their families. I had to ask the pharmacist, who looked it up for me, but lo and behold no numbers just a bunch of foreign chemical names, some of which I was able to decipher and found them to be detrimental to my daughters intolerance.

How come a packet of lollies can manage to fit a list of ingredients on it, but a big bottle of medicine can't I find it negligent of the pharmaceutical companies and the Australian Government to not tell the consumers what they are taking.

Why does children's medication have artificial colours and preservatives in that aren't necessary in a bottle that has an expiry of only 30 days anyway - it's really really bad and something needs to be done..... I refer you to this page to see how many people are affected..... Medication factsheet

Why doesn't Western Australia take a stand and enforce much needed changes on these pharmaceutical companies... some of the additives are banned in some countries - doesn't that tell us something? – thanks to Tiffany

[946] 160b, 635: Poisoning my family with 635 and annatto (October 2010)

When I started to really read food labels, I was horrified by the fact that I was poisoning our whole family

- especially with 635 and annatto. You asked me how we are affected by these additives.

635 - Myself (main symptom is migraines): dried, red lips. It looks like I have lipstick on. I feel dehydrated and get migraine style headaches. Photosensitivity in my sight. Lethargy. Unfulfilled feeling of thirst. Frequent urination that seems very diluted. My 4 yo son (main symptom is defiance): dried, red lips also. Dehydration and thirst. Frequent urination. Sooky or whingy type of demeanor. My 2 yo daughter (main symptom is urticaria): After having a piece of bacon the size of a 10 cent piece, it sent her into massive hives. It seemed like she had a headache or faceache and she screamed at a high pitch and then cried for about 20 mins. I nearly called an ambulance. Very out of character for her and she barely cries for more than a minute normally. Our 635 foods were French Onion Soup Powder – I would use in casseroles, potato bake, soups - Smiths brand Crisps, sausages from the butcher, tinned soup such as Spring Lamb with Vegetables, and takeaway BBQ Chicken and chips.

Annatto (160b) - Myself: insomnia, anxiousness, a shaky type of sensation sometimes - a bit hard to articulate it but its sort of like I have a vibration or fluttering going on in my body. I "snap" easily and it does not take much to make me get angry. My son: Difficulty falling asleep. Disturbed night sleeps. Silly behaviour and noises like a monkey (jumps around, clumsy, unable to sit still and focus for longer than 5 mins). Sometimes aggressive with no apparent trigger. Unpredictable around other children. My daughter: disturbed sleep. She was a good sleeper but started to go away from her past pattern of falling asleep by herself and changed into shorter sleeps and waking often at night. Once we took it out of her diet she started to sleep through the night and sleeps for a solid 2 hour stint during her day nap. Our annatto foods were Kraft singles, yoghurts (with Bob the Builder) and ice cream. – Rose, by email

[901] Has his sights on the Olympic games (February 2010) COURAGE AWARD

We began our Failsafe journey 3 years ago. My now 9 year old was 18 months when the doctors first made the suggestion that he should be medicated. I flat out refused to medicate a little baby, and advised the doctors that food was triggering his extreme behaviour. On almost every occasion I was either laughed at or made to feel a fool and told that 'food doesn't alter behaviour' - this was despite the fact that he already been diagnosed with anaphylaxis to eggs and a severe dairy allergy and suffered chronic reflux as a baby, and I myself had suffered food intolerance for many years - this went on for nearly 6 years ...

As I wasn't particularly well versed in the ways of the internet and had no idea where to turn, I took things on myself, taking a common sense approach to removing things from my son's diet - if he went 'crazy', the food was removed and replaced with something else that didn't make him 'crazy'... We discovered that wheat was a major player in triggering offensive, violent and extremely hyperactive behaviour and insomnia ... so that was removed, and my son has been wheat free for nearly 9 years now. Whilst the wheat free diet took the edge off his severe behaviors, he was still an unpleasant, uncontrollable child and we tried many disciplinary techniques, play techniques, putting him in sports, we had his eyes and hearing checked and still had no answers.

His severe reflux started again at 6 years old, and once again doctors wanted to treat the symptoms and not determine the cause ... I went along with what the doctors wanted, but the reflux medication appeared to exacerbate the behavioural symptoms. We dealt with the behaviours as they reared their ugly heads, but in addition to the reflux, my son then continued to get more and more physiological symptoms, such as rashes, vomiting, and severe hayfever - I knew this certainly wasn't normal - and he was beginning to have random and bizarre allergic reactions and I had absolutely no idea what he was

reacting to. The culmination of these allergic reactions ended up with an anaphylactic reaction, to what has since been determined as an allergy to red meat.

Unfortunately it took an anaphylactic reaction to have to doctors send me in the right direction. We saw a paed who prescribed adrenalin and promptly sent us on to an immunologist ... who explained to us that allergies and food intolerance often go hand in hand. Following all the usual tests and discussing at length my son's behavioural issues we were sent to an accredited dietitian for help and to be placed on an elimination diet.

We found the most amazing dietitian, who was very supportive and was very eager to help. Once I knew what the problem might be, I began my research as well ... and that is where I discovered the fed up website. On the elimination diet and the subsequent food challenges, we have since discovered that my son is completely intolerant to wheat, completely intolerant to amines, completely intolerant to glutamates, colours and preservatives and we have discovered that certain brands of shampoos, toothpaste and hair products trigger negative behaviour, he also has a milder intolerance to salicylates, but we are very strict with what he does have. Luckily, he has grown out of his dairy and egg allergies, which makes the preparation of food that little bit easier.

My son went from a child who slept no more than 3-4 hours a night, couldn't sit still, was compulsive, aggressive, insolent, destructive, hyperactive, would make constant noises, had severe reflux, had eczema, has issues at school with book work and reading, etc, to a child who is pleasant, well mannered, focused and actually sleeps. And it was with the advent of the new diet/lifestyle that we also discovered that my son has quite a talent for sport.

Before the diet, my son didn't have the attention span to stay between the white lines on a running track or didn't think he had to wait for the starter's gun in a running or swimming race. Within the first 6 months of the lifestyle change he went on to represent his school in swimming and athletics, in the next year he went onto represent at regional level and last year competed at state level in swimming, cross country and athletics, for both the school and at club level. And this year, as a 9 year old, my son has already broken records on the athletics track and is on his way to breaking more records in the pool ... he has his sights firmly on the Olympic games in 2020, he just isn't sure which sport he wants to compete in!!

I find that his discipline in his chosen sport helps to keep him disciplined in his diet, and I am very honest and blunt in explaining to him what is in the foods that he wants to eat and why he can't eat other stuff. We are about to begin meeting with our dietitian again to ensure that he is receiving adequate nutrition to sustain the endurance that he requires for his sports and to ensure that he is receiving adequate protein for proper muscle development.

People are often perplexed as to how a child who 'misses out' on so much food can be quite so athletic ... I explain to them that the food he doesn't eat actually enables his sporting and academic ability, but sadly, most people can't understand that concept. They can't understand why my son simply drinks water and eats an apple and some rice cakes or a chicken sandwich after a race when every other kid at a swim meet is eating a chocolate bar or drinking a powerade or the newest fad - pouring honey all over a banana to 'restore their energy'.

We still have bad days, and find peer pressure a constant issue, but as a family we are positive towards all facets of my son's limited diet and I am constantly inventing new and interesting things to eat! -

Belinda, NSW

[892] Wild and extremely violent behaviour due to undiagnosed coeliac disease (February 2010)

Three years ago I stood in the bookshop with 'Fed Up' in my hand debating whether to part with \$20. Your book has repaid itself a thousandfold. I send my heartfelt thanks.

My youngest son's problems are a long saga, suffice to say that eliminating additives and low amines as suggested by your book provided the answer for some time. Then at nearly nine, out of the blue, he had some sort of breakdown. The teacher suggested Asperger's but he soon became worse - quite autistic, wild and extremely violent. He was off school for three months. The doctors I approached turned their backs on me. I couldn't believe it. I can only think they thought that as he already had a disability (Central Auditory Processing Disorder) it was part and parcel of the condition and didn't realise how extreme his behaviour was. I insisted that he be screened for a variety of degenerative diseases, but they came back negative.

Finally realising that no one else "gave a stuff", I turned back to your book. If it was diet before, then maybe, it's diet again, I thought. I tried eliminating salicylates, he got worse; I tried wheat, no change; I tried dairy no change. Eventually I tried eliminating both dairy and wheat and he improved.

He spent two years on a wheat free, dairy free, no additive, careful about amine diet and he could manage if he had a small dose of Ritalin 5mg breakfast, 5mg at lunch as well. Our lives were back on track, he was progressing at school, having a go at different sports, and excelling in his favourite sport. But it was all because of the ritalin - and diet.

Without the medication it was still like living with a drunk - he could be fun sometimes, but more often silly and tiresome, and aggressive too often. I always felt that the child that he had been was still there deep down, intact and undamaged, although why I believed it, I don't know. In November when he turned 11, I contemplated the thought that maybe he did have irreversible minor brain damage, but I couldn't accept the notion.

Then, by chance ("Mum, I don't want Rye bread this morning, I want Rice cereal") we realised it was the GLUTEN. I never suspected it, because I'd known a baby who nearly died of coeliac disease and the symptoms were quite different from my son's. I followed up your footnote in Fed Up and read Professor Duggan's article in the Aust. Med.Journal. My son was diagnosed with Coeliac disease a month ago and I am absolutely delighted by his response to the gluten free diet.

As you can see I am much indebted to you. It was only fine reading of your book that has helped me tease out my son's difficulties. I shudder to think where he'd be now (at a special school, I'm sure) if it hadn't been for your persistence in acquiring all this knowledge and for passing it on - Anne, Qld

[875] Onset of depression, aggression and hyperactivity in a 6 yo linked to school canteen food (November 2009)

My six year old son was diagnosed with asthma/allergy at 2 years old. Several medications were diagnosed for him. Not wanting to go down this path I consulted a naturopath, who managed his condition with vitamins and restricted diet. But this year upon starting school my normally bright, happy child became depressed, aggressive and hyperactive. A pattern of school canteen usage emerged at which point I requested a list of ingredients for some of the things he was buying. To my horror, the

slushy he was ordering contained two artificial colours and two preservatives (benzoate preservative 211 and potassium sorbate 202). The lady who runs the canteen said that this product is known as an AMBER school product. Apparently you are allowed to sell it in canteens as long as you do not have too many other AMBER products on the menu. – Leesa, by email

[868] Extreme screaming: from terrible to angel (November 2009)

You have saved my son's life quite amazingly. He is a completely different child. He has gone from terrible to angel.

I saw your DVD and was amazed at the story about a toddler who used to scream for long periods of time. My son is 3 now and had been screaming extremely since he was able to start eating. He would scream and hit and become very aggressive and defiant. I tried absolutely everything and I have had quite a bit of professional training in managing behaviour and still struggled with him.

I am sure that if I did not see your DVD he would have ended up on some kind of horrible medication and under some private psychiatrist. I could just see him being exactly like the juvenile offenders in the DVD or worse but he is now a normal child and a perfect angel.

I am so surprised at how much difference it has made, this diet really works if you just do it properly. It is really hard at first to know what to put on sandwiches etc ... but it gets a lot easier as we go along. I never really understood diet affecting behaviour before and thought it was only really applicable to those who just persisted to feed their children fast food all the time. - Charmaine, Perth WA.

[858] 282: crumpets with 282 changed my sweet two year old into a monster (November 2009)

I have a 6 yo son who is intolerant to additives. 282 in particular changed my beautiful sweet then 2 year old into a monster. Luckily, because he was basically born with eczema, I had been very careful about introducing foods. I started giving him crumpets for breakfast when he was 2. He would be fine after eating them, however when he woke from his sleep he would be screaming and hitting me, very violent and uncontrollable. I initially thought it was hunger, as I found that when I gave him something to eat he would calm down. Anyway, to cut a long story short, I found out about 282 (in all crumpets and some breads) and cut it out completely. He was normal again!! – Michelle, NSW

From [802] One-liners (June 2009)

"We have been following failsafe since November last year and the changes have been wonderful. If there is an occasional slip-up then we know about it! My son doesn't have violent tantrums any more. He still gets upset over things, but we can reason with him and he calms down quickly. My daughter doesn't wet the bed unless she has salicylates so we can minimise that." - Alison, NSW.

[801] Potassium sorbate makes my son clingy, crying (June 2009)

I have a 6 year old son who I already knew was intolerant to some foods. He has periods of eczema (which we have been able to control with his diet) and we have avoided these things for years. Luckily, because he was basically born with eczema, I had been very careful about introducing foods. I started giving him crumpets for breakfast when he was 2. He would be fine after eating them, however when he woke from his sleep he would be screaming and hitting me, very violent and uncontrollable. I initially thought it was hunger, as I found that when I gave him something to eat he would calm down. Anyway, to cut a long story short. I found out about preservative 282 and cut it out completely. He was normal again!!

On and off over the years I discovered other things that affected him, so I added those to my list of things to avoid. A few months ago we went over to Europe. When we came back he went back to school and started getting very clingy, crying and not being able to read or write properly and was not able to concentrate. I have had trouble with these symptoms on and off over the 1½ years. I mentioned this to my friend, she gave me your book and I started an additive free diet.

After about 1 week everything had improved dramatically. I waited about 4 weeks before I introduced additives, one a time ... He reacted to 202 (potassium sorbate) in a drink of juice by crying and becoming clingy. He had it at dinner time, then had trouble getting to sleep. The next day he was very sensitive and cried a lot and hid in his room when our visitors arrived and would not come out until they had been there for several hours. He got better after he had his lunch (which he ate by himself in his room). He then came out, but didn't talk much and sat right next to me. He only had it the once, as I did not want to make the situation worse. He can drink fresh juice with no problem. - Michelle by email

[782] Morning sickness and other symptoms in mother and children due to diet (June 2009)

We only found out about "Fed Up With Food Additives" when Maternal & Child Health nurse suggested we look at a possible problem with food chemicals for our youngest child's (14 months) eating disorder. However, now that I think about it, I was violently ill during my pregnancies after eating high salicylate foods - particularly broccoli, cucumber and citrus fruits – even the smell of these foods would make me queasy.

My IBS symptoms have cleared up since I have reduced the number of high salicylate foods in my diet (I was doing it for the kids so also have adjusted my husband's diet and my own). I used to think I was doing the right thing by eating a huge fruit salad every day, and wondered why my digestive system was so messed up. I have also suffered from a hives-like rash all over my thighs for the past few years and couldn't work it out - I now have long rash free periods after avoiding dried fruit as much as possible, as well as msg, yeast extract, 627, 635 etc. We avoid additives as much as possible but occasionally I slip up and we really notice the effects now.

My 9 year old daughter seems to become very vague and forgetful with amines - especially cheese - and we have found our 3 year old son to react badly to glutamates - he becomes quite aggressive and uncontrollable. The other thing we have noticed is the effect of colours - my daughter becomes very silly and hyperactive - for example, today she had a 'slushie' at the local shops that a family member bought for her - tonight she is jumping all over the house, falling off chairs, making silly noises and facial expressions etc. But I'm sure you've heard all of this before!

I have found the effects on my kids particularly interesting, as when I was a child, I was unable to have food with MSG (I got severe migraines including vomiting) and red-coloured foods/cordial made me vomit badly. Thank you so much for really making a difference to our lives. – Michelle by email

[711] Heart symptoms from benzoates, bread preservative and sulphites (December 2008)

My 14-year-old son has Aspergers syndrome. He experiences arrhythmia and severe heart palpitations every time he consumes any additives 211, 282, 220 etc. If he has been free from these additives for over two weeks then he will get away with the first exposure and then it accumulates and gets worse. We saw a heart specialist and he found no problems, just blaming it on anxiety. He also gets more aggressive and violent once it accumulates... like Jekyll and Hyde. Sadly it is so hard to convince and be believed by doctors and his psychiatrist that these additives affect him. – Therese, by email

[701] A nitrate reaction to supposedly nitrate-free organic ham (November 2008)

My children have severe intolerances to preservatives and colours but not amines. I have been going very well, until the last couple of days when my children started yelling, hitting, slamming doors and just generally being violent with horrible mood swings.

I had purchased ham from my usual shop a few days before. I had asked if they had any of the nitrate-free ham, as I couldn't see the one I normally buy from the deli. The assistant identified a particular one as nitrate-free, explaining that they had changed suppliers and the price had gone up. I pointed out that the deli label stuck into the leg of ham said organic (I know organic doesn't always mean nitrate-free) and asked if she was sure it was nitrate-free. She said it definitely was. So I bought it. The kids had a bit that night, and a bit each day since. By yesterday they were both shocking, particularly my 3 year-old daughter, who had had more.

Today I went back to the shop to check. Someone else was on the deli counter. I asked if they had any nitrate-free ham. Before he could answer, I said is that it there, pointing to the one I had purchased. He said no, that the nitrate-free ham is not being stocked anymore. I told him what had happened and he apologized. I told him how severe the reaction has been and how that my children will be like this for a week now. I was told I could get a refund for the ham I purchased. - Michelle, Sydney [Note that ham is not failsafe due to amines. However, it is suitable for people who have passed their amine challenge. See Failsafe shopping List (<http://fedup.com.au/information/shopping-list/blog>) on the website for sources of preservative free ham. Remember you can use CTRL F to search for <nitrate-free ham>]

From [700] One-liners (November 2008)

I have finally finished all the food chemical challenges. I found that I am not intolerant to salicylates though I am extremely intolerant to amines. It was a huge relief to find out where all the aggression came from. – by email

[659] WOW! Big turnaround in three weeks (September 2008)

My son started kindergarten this year and was at the principal's office within weeks. He had stabbed his classmate with a pencil, he had run away on a school excursion, been incredibly rude and obnoxious to teachers and hit other children. He was defiant, easily frustrated, blamed others for everything under the sun, he was aggressive with his siblings and parents, socially he was not improving either.

After the disastrous start to school I picked up your book which I thought was going to just talk about colours and preservatives and could not put it down. It made so much sense and I just had that gut feeling we had found a possible solution. We started failsafe eating almost immediately and we made many errors but finally worked through those. Before the diet he would have avocado, banana and berries in his lunch and he would come home to spinach and tomato lasagne!!

During the diet my son slept and slept and slept. His behaviour improved very slowly but once we were in the third week we noticed a big turn around. One morning he surfaced at 8am, his bed had been made, he was dressed and he was calm, polite and happy.

When he returned to school for term two his teacher and school counsellor were in disbelief. During the whole of term two he did not even once have to go to the time-out beanbag in his classroom. WOW! He has started to make friends and has picked up some awards along the way.- by email

[629] 'Severe and unpredictable asthma' due to sulphites (February 2008)

Our food journey started with me picking up your Fed Up with Asthma book from the bookstore after our three year-old had just experienced a bout of wheezing. I read it all in one sitting and was left both horrified and hopeful. We decided that since we had nothing to lose that we would try the diet as a family in an attempt to pinpoint the trigger of our daughter's asthma. I was optimistic about finding a trigger but not really expecting to find it. Grace did the sulphite challenge with an apricot fruit bar as recommended by our dietitian - she had no reaction to the salicylate or amine challenges. I gave her the bar at the start of a short car journey. Within 5 minutes of finishing the bar, her breathing had become so laboured and wheezing so loud that I had to stop the car to give her Ventolin.

Over the next few months I repeated the challenge with a different brand of fruit bar, berry flavour and again with 4 dried apricots. Same results each time. Prior to the diet she would eat dried fruit, sausages and non-organic grapes quite often and was on a substantial twice daily preventer medication regimen as well as Ventolin about 1-2 times per week. Funnily enough it had never occurred to us that 'healthy' food could possibly trigger asthma.

We had been told by the paediatrician that Grace had severe and unpredictable asthma and required aggressive preventative treatment to avoid the life-threatening attacks that she had experienced. Obviously we now strictly avoid any sulphites and Grace no longer requires Ventolin or preventers. We have found that her asthma is indeed predictable and is treatable without any medication. I would even go as far as to say that she no longer has asthma, she merely exhibits asthma-like symptoms in response to sulphites.

Grace's growth had been stunted by her asthma medication. From her growth chart you can see the month she swapped to the stronger medication and also when we took her off it (post-diet). She grew 1cm a week for two months after she came off the meds. Her rate of growth is now normal .- reader, Qld

[621] 319: Four weeks of hell from unlisted 319 (TBHQ) in gf bread (February 2008)

Our six-year-old son is intolerant to many preservatives, colours, flavours, gluten, dairy and food chemicals. Unless we control what we feed him on his very restricted diet, he reacts behaviourally and cannot learn at school or go forward in his treatment by his paediatrician.

In early 2007, we started giving our son a gluten free bread mix which states on the packet, 'preservative free'. We had reason to trust this product because it was listed on the 'safe shopping guide' issued by the Australian Royal Prince Alfred Hospital, supplied by our dietitian.

This product was wonderful with it being so versatile in producing pancakes, bread, crumpets, wraps and pizza bases all from this one mix. Our son was able to enjoy more variety without feeling deprived. Once I increased the dose of this product for our son, i.e. pancakes for breakfast, French toast for lunch and a wrap for after school, within a day he displayed explosive behaviour and was unreasonable.

We did not suspect foods as it was listed as safe and the company was a reputable company.

We rang our paediatrician who advised us to cut down on his supplement. After a week there was no change, even at school our son's teacher was noticing a big difference in behaviour and learning. The paediatrician advised a blood test, another week passed for the results which in turn came back within normal range. Only then did we suspect foods. The Food Intolerance Network always advises their members to check products containing fats or oils for hidden synthetic antioxidants. I rang our supermarket to double check if there were any changes in their sunflower oil that we use, and they advised there were none. I then rang the bread company and spoke to their Quality Operations Officer. I asked if there were any synthetic antioxidants in their product in question, he said he was pretty sure there wasn't. We insisted that he double check because we were at wits' end and we were ready to have our son's head scanned because he was so aggressive and erratic in his behaviour. The man rang back in shock and was very apologetic, because the oil which was supposed to be 'pure canola oil' as stated on the ingredients list, in fact had synthetic antioxidant 319 in it.

We were relieved but angry, our son was put through four weeks of hell, not to mention us as well, because he could not control what he was doing, and it took well over a week for the affects to wear off. We had our good boy back and he even said, 'Mummy please don't give me bad food any more'!

When our son has had foods with hidden synthetic antioxidants in them, we consider the reaction our son displayed as life threatening, for example, when our son becomes enraged with fury, usually over something trivial, he has run out onto the road. Another time when I was driving down the mountain on hair pin bend roads, enraged, our son got hold of my hood on my jacket and was pulling on it while I was doing my best to manoeuvre the car down the road without hitting the guard rails and going over the cliff. We believe that these antioxidants should at all times appear on the label. – by email, NSW [Thanks to this mother and the helpful people at Laucke's, their gluten-free bread is now free of nasty antioxidants]

[575] Vocal tics, word and phrase repetition due to salicylates and additives (September 2007)

When Chris was born he was a big, boofy boy. For the first six month of his life he was a placid, calm, happy child. At six months, he changed to being very, very active, fidgety and demanding. Looking back at that time, three things changed – he started long daycare, solids and formula. I also remember very clearly that his face changed as big dark circles and creases formed under his eyes. He was labelled

'naughty, disruptive, hyperactive and violent' by daycare when he was only 10 months old. He was walking at that stage and continued to escape from the childproof room, or to snatch toys from non-mobile babies.

Since that time he has been variously diagnosed by health professionals as having Tourette's Syndrome, the hyperactive type of ADHD, Oppositional Defiant Disorder and others. Whatever the term, the symptoms are the same, including unmanageable behaviour, poor impulse control, loud voice, vocal tics, word and phrase repetition and lack of empathy.

Coupled with the behaviour has also been a range of other medical problems including croup, asthma, headaches and stomach aches, unexplained temperatures and eczema. Chris also suffers from glue ear and for the last four years has had grommets inserted every winter to enable him to hear clearly. (As I know now, these are all indicative of food intolerance.)

Last year I took Chris to a paediatrician, looking for a solution to his constant illness rather than his behaviour. The doctor took one look at him – he was making duck noises and running in circles around the waiting room – and diagnosed food intolerances.

We went home with a complex list of foods to avoid. Although his health improved, his behaviour seemed to become worse, as it always has in summer. Just before Christmas, I found the Royal Prince Alfred Hospital's elimination diet for food intolerance. This diet was stricter but far more logical than the one we were using. It worked by identifying the chemicals that people react to, then the foods that contain them. Interestingly, the research showed that most people with food intolerance react to the salicylates in fruit. I had been loading Chris up with cherries and nectarines in term 4. No wonder his teacher was ready to send him to Alcatraz late last year.

I switched the family to the RPAH elimination diet during the holidays. Gradually, as we removed foods from the diet and found acceptable replacements, Chris' behaviour improved. Living with him became easier, there were less sibling fights, and when he did misbehave it was easy to use normal parenting techniques to modify behaviour – something that had never worked before.

By the end of the summer holidays, I finally had a calm, reasonable, sensitive child, who was able to play at other children's places without causing mayhem, would look at people when talking, and would allow other people to talk without interrupting. Amazingly, Chris was keen to stick to the diet, having realised how good he felt.

First day back at school and I had lots of positive comments about how calm or grown-up Christopher seemed. A good start to the year. However, as I write this, I am back to having a child who runs around making chicken noises, uses a loud voice, is prone to crying and is violent and aggressive. What happened? He got to school and started to cheat. He ate chocolate cake, m&m's, muesli bars and lollies. For him, even the smallest amount results in a reaction. It is like being on a trip – he can't control his behaviour, and trying to discipline him has no effect.

So what do I need, or more importantly, what does Chris need? He needs the support of the school community to assist him to stay on his diet – he needs recognition for the fact that he does suffer from food intolerances – he desperately wants to feel in control of his life, and he likes feeling calm and relaxed, so please, please, please don't feed my child, or encourage him to cheat. - by email, Sydney

[561] Nurofen mistake (May 2007)

Thank you for helping us to get back the children we were meant to have. We have been failsafeing for about 2 1/2 months mainly for our 4 year old daughter who was defiant, argumentative, oppositional, angry, sometimes violent, sometimes hyperactive, deliberately annoying, and would be awake for 2 - 4 hours after bedtime before falling asleep. The contradiction being that she could also be charming, loving, insightful, enjoyable, happy, playful, caring, enjoy an activity (craft, colouring, building etc) for extended times, clever, calm and inquisitive.

About two years ago we learned about colours and preservatives (from "The Chemical Maze") and pretty much took them out - apart from occasional treats – with good results and we had no idea there was so much more to the food chemical story. I never would have considered fruit etc, I just thought I somehow had to be doing a bad job at disciplining my child and that must be why she is still the way she is. While reading Fed up with ADHD my hopes were ignited for a better life for all of us as I worked up the courage to go failsafe and give this a try. It was a daunting thought with a new baby as well but we really had no choice as far as I could see so we started! Amongst the initial flurry of the first few weeks the results were incredible as we saw emerge this delightful child and hardly any of the pre-diet behaviour. I now feel it is our way of life and I am learning to manage the work load of the constant cooking, baking and planning around food. My once skeptical husband is a beautiful support and really helps out with the kids and the washing so I can keep up with the food etc. We have seen some remarkable changes but there are still some things that concern me though.

After 3 weeks on elimination, our first challenge was salicylates and we had a severe day 3 or 4 reaction, stopped on day 5 and I think we were just starting to come good after about 6 days from stopping when we had a friend's birthday party the next day. We had been so strict, everything to the letter and the girls' attitudes toward the diet was so amazing that we thought we'd have a day off and give them a "treat". The party food wasn't as bad as it could've been. A lot of home cooking. But they did have some lollies, fruit and chocolate. The girls couldn't believe it after about 5 weeks on the diet! Anyway, behaviour started that evening and it was pretty foul for about three weeks. We also made the mistake of giving her Nurofen for a sore throat in the week following the party but apart from that we were back to 100% failsafe the day after the party. So after about 3 weeks of reaction type behaviour she started to become progressively better but still with some D.F.Asleep (down to 1-2 hours) and still to many times of defiance and aggression etc. amongst the good behaviour. We are now 4.5 weeks after the party and 5.5 weeks after the end of our salicylate challenge and I feel like we are not yet back to how it was in the first three weeks. – from a country failsafer [this family is now doing well]. Their problems included daily Sakata rice crackers, accidental exposure to lawn fertiliser, and Nurofen. Although Nurofen doesn't contain salicylates, most salicylate sensitive people have cross sensitivity to it and other non-steroidal anti-inflammatory drugs such as naproxen and diclofenac. You can regard one dose of aspirin or Nurofen as the equivalent of a week's salicylate food challenge, ref: Jenkins C and others, Systematic review of prevalence of aspirin induced asthma and its implications for clinical practice, BMJ. 2004;328(7437):434. For more possible reasons for diet not working, see Checklist of Common Mistakes at <http://fedup.com.au/information/support/checklist-of-common-mistakes>]

[539] Possible autistic spectrum if not failsafe (January 2007)

My husband and I have two lovely children. We have been through the whole thing of oppositional, erratic and violent behaviour and for us the worst part was insomnia and extreme restlessness at night. No-one ever got a rest. This all was cured with the invaluable assistance of your books, and a profound

response to the elimination diet especially for our youngest child who is a 7 year old girl, Lily. She is extremely sensitive to everything – salicylates, amines, chemicals - you name it. Our son is affected, but not as badly.

At times I have wondered if Lily perhaps has Aspergers, or is somewhere on the autistic spectrum, but we had her assessed at age 4 (after being failsafe for three months) and were told that she is bright, possibly gifted, and that she can be extremely anxious because she is clever enough to be able to think about things and therefore worries about things. We prepared her very carefully for school and so far have had no problems - until this month.

Twice this month Lily has lashed out at school, due in part to chemicals. She started swimming lessons every day and the other thing was a class party with heaps of bad food which no-one helped her to avoid. Today she has been "red-booked" and placed on detention for the second time, for hurting someone. The school counsellor who was called in told me "there are NO studies that prove that food intolerances are in any way related to behavioural disturbances". She went on to tell me that it was all in my head, and that it is coincidence that withdrawing a food substance or chemical would have a positive effect on our daughter. She then proceeded to tell me that Lily probably has Aspergers and that the paediatrician probably didn't want to tell me that. I am feeling so enraged. She hasn't even met Lily.

We follow the failsafe lifestyle to the letter, and are eternally grateful to you and your family for sharing your stories, and for your tireless work. Our family wouldn't have survived without Fed Up and how some one can say the things that this counsellor said belies belief. Our son who is now 13 is easily able to make good food choices and knows only too well what bad choices do to him. He was shocked at the response of the school counsellor. My husband - who was a total sceptic 4 years ago - was absolutely livid with that school counsellor. He knows how bad it was here, and how much work I have put in to making our little family happy and calm. I guess we will just keep soldiering on and spreading the word, but this person nearly got the better of me. – by email, NSW (see comment on this story at [552])

[447] 'Fear of the dark' really a food reaction (August 2006)

We started the diet nearly a year ago for my son, a sweet 5 year old who would become an aggressive, extremely hyperactive and an emotional monster nearly every day. I saw you on A Current Affair and after taking muesli bars and sultanas (which I had thought were healthy) out of his diet I noticed most of his aggressive behaviour disappear.

After that we started the full diet and not only did our son become an angel, we noticed that our daughter was a very strong amine reactor, becoming uncontrollably emotional, depressed and 'full on', as well as having frequent nightmares and bedwetting. Unfortunately since we have moved 2 months ago our son has gone backwards fast, I now think as a result of amines in meat from new butchers. It is so upsetting to see all the progress disappear, and he has had HUGE problems at school this term. I have traveled back to our old butchers to stock up on meat and am started to see some improvement after one week.

The biggest shock for me however, was when I recently discovered I was a food reactor!! I was a junk food addict and would eat about 5kg of chocolate a week. I can't believe now I had so many symptoms, and I never even put them together as symptoms, let alone found the source of the problem! I was getting migraines, I constantly had a headache behind my eyes, I felt very faint and disoriented, had stomach pains that felt like needles - usually after eating lollies, and I was always bloated - something

which really upset me.

The weirdest thing to attribute to food however was my extreme 'fear of the dark' as I called it. I would be terribly scared of the dark, I would think that my mind thought it could see little people and things out of the corner of my eye, even though I knew they weren't there, I would open my eyes every 10 seconds while trying to get to sleep, just to check if there were monsters or robbers there, and every time I closed my eyes all I could picture in my head was horrible things that would scare me. I was a bit worried I was starting to go crazy, then I stopped eating chocolate and didn't even notice all these symptoms disappeared.

It wasn't until I splurged on a whole chocolate cake over two nights that I discovered what had caused these problems. After eating the cake I was completely on edge. I couldn't sit down for ten seconds without turning around to make sure there were no monsters or robbers behind me. Eventually I had to sit with my back to the wall so I wouldn't think there were things behind me. That was the last time I ate chocolate, and the thought of ever eating it again scares me! – by email.

[418] My son is a state ward (May 2006)

My son 14 is a state ward and has been for 18 months. His behaviour at home was violent, aggressive and surly to such an extent that my safety was threatened. He had damaged property, harmed pets, broken my bones ... He was 12 when he went into care and this behaviour had gone on since the age of 7. He tried to kill himself a number of times, initially playing chicken with cars, starving himself, much self harm behaviour and nearly succeeded last year when he cut an artery in his leg.

I tried to get help for years only to be told that I was a bad mother. I was accused of abusing my son so many times it wasn't funny, even dragged before courts for it. They didn't get it. I was the one with the bruises and broken bones not the kid. He was never diagnosed with any disorder. All behaviour was put down to an incident when he was 6 and a teen tried to molest him. I had seen him lose touch with reality and even respond to voices - at 8 years old. School suspensions started in grade 2. His school had a sign that other children would file out of the classroom on a pre-determined signal ... I could go on and on.

He became a state ward after a particularly bad incident where I ended up with concussion but to get him off me I had to bite him ... therefore proving what a violent mother I am.

I got your book Fed Up from the library and read it over the weekend. What a revelation to me.

He has just been diagnosed as a possible coeliac. He has always had some intolerances and his sister had GI probs and lactose intolerance too. Both have not done well away from what they ate at home, which on reflection was low gluten and low additives.

Well, at the moment the lad is keen to clean up the diet, at least the gluten part, but I think it is too late to mend our relationship.

I should have done more research and figured out the food connection earlier. I did make food connections, from when he was very young. He was lactose intolerant, had trouble with other foods. He was also a bedwetter until nearly 10. He always had gut problems. We noticed if he had certain foods he would be worse, even his family day care parents learnt the hard way about the foods. His doctors knew this, the psychologists knew this but NOBODY made the connection. Even now the only reason he got checked out was I pushed and after a few incidents in the unit I raised Duty of Care.

Anyway at least I have hope now. Hope that he won't end up in the justice or mental health system. Hope that he can get back to a normal school. Hope that maybe one day he can come home to visit. This system he has ended up in is not used to bright kids and he is in a school for not so bright ones. Meanwhile he has learnt heaps of bad behaviour from others ...

I can see that failsafe foods have been your work for years and indeed you work very hard to get the word out. What I can't understand is why more people don't suspect food problems in behaviours with kids. How many more families have to go through what we have been through?

So Sue if any of our story helps other families or professionals please go ahead and use it. You don't have children for other people to raise. I should count myself fortunate I still get a say as I am still a guardian but it is difficult and if the connections had been made when I first suspected them none of this need have happened - reader, Vic.

[415] The only good thing to come out of this ... we are now absolutely convinced it's his diet (May 2006)

Since we are going on the diet next week, we let our son have some things that we haven't allowed for a long time including bacon, tomatoes, ham and a doughnut. This morning I had a raging child, who was refusing to go into his classroom and throwing punches at me. Since we have cut a lot of nasties out of his diet he has not been violent at all until this morning! The only good thing to come of this is now we are absolutely convinced it's his diet that's causing the grief. – reader, NT

[408] Hyperactivity, bad mood swings, violent behaviour (March 2006)

My 9 year old nephew 'suffered' from super hyperactivity and very bad mood swings for most of his life which was very stressful for all his 3.5 school years. His violent behaviour, which only ever occurred at school, included pushing over desks, tearing up paper, pulling phone connections out of walls, pulling plants out of the garden and hurting a teacher when being restrained. They would ring his Dad to come and take him home. He visited many medical specialists, was finally diagnosed ADHD and prescribed adult doses of drugs with no improvement.

Over the last six months he has been failsafe while being homeschooled and there was an incredible difference within two weeks. In four months he covered nearly 12 months school work and is improving rapidly. He has always been quick to lose his temper at home with his brother and sister but since he started on the diet we have not seen him angry. He actually had his head slammed in a car door recently by his sister's friend. It must have really hurt and his eyes watered but his response was "It wasn't your fault, Poppy". We were all amazed. He is now a healthy, happy little boy with a great sense of humour. It is frustrating to say the least that so much of the trauma this little boy and his family went through was to do with food additives. by email, Qld

[358] 'Worst Christmas Day' letter (December 2004)

'I read as much as I could on the internet site and ordered your books after a very very BAD Christmas Day with my son Nathan (not his real name). Although we really don't eat that much junk, I was surprised at the number of bad additives in ordinary food. In particular, Christmas goodies are laden with additives!'

As well as additives, Christmas treats of dried fruit and seasonal summer fruits are high in natural food chemicals called salicylates, likely to be a big problem for oppositional kids. I asked Nathan's mother for more details. Luckily, there's a happy ending. Here's her fascinating story:

'On Christmas morning, Nathan (12) was in already in a bad mood. The day before, he had pigged out on grapes and plums - but I didn't really think at that time that that could have been the issue - I mean they were healthy!!! We also had Grandma staying with us, and I think she probably spoiled them a little during her stay with lollies and soft drinks.

On Christmas Day, we were at the other grandparents' place and Nathan's behaviour was getting worse. He was eating the normal Christmas food - chips (BBQ and Sour Cream and Chives), mixed lollies, but particularly red and green M&Ms, rumballs with lots of raisins and dried fruit, plum pudding, custard (artificial colours 110 & 102), sausages, and drinking cans of soft drink one after the other.

Nathan was egging the other boys on to create havoc. After a couple of time outs things seemed to be OK. We were ignoring the bad and hoping that he would come to his senses and enjoy the day. When he sat next to me to look at some old photos, I suggested to him that he needed to apologise (BAD MISTAKE!!). He didn't think he had to and threw a temper tantrum and a chair to the ground. Poppy decided that enough was enough and proceeded to smack him (BIGGER MISTAKE!!). Needless to say the smacking did nothing but fire poor Nathan up and he decided to run away.

The last time he ran away, it took me nearly 3 hours to find him and he had travelled nearly 15kms. This time luckily it didn't take that long. We had a cool down time together and I managed to get him back to Grandma's in a quiet, subdued mood.

It was Christmas Eve that I ordered your books, after crying out of frustration and despair. They arrived in the new year, and after reading the books, I think that there were two things that triggered it off - one was the pigging out on that fruit and the other was all that junk food.

We didn't go the whole hog with elimination diet - at this stage - but what we have done is followed the 'additives to avoid' card and also limited the types of fruit, sticking mainly with red delicious apples, pears and Cavendish bananas. For the last four weeks of the school holidays, all 4 of our boys (and us) enjoyed a peaceful school holidays. They still argue like boys do, but are not spiteful or aggressive - they're more likely to settle it peacefully.

So now I make bikkies, sausage rolls (which all the boys and hubby love) and I even make my own cordial. Generally if they have something with additives we can see the difference the next day ... Nathan develops a 'hard done by' attitude, and starts yelling at his brothers. He was probably the worst of the four boys, but all had their bad days.

Best of all is that Nathan is smiling more now - he used to be such a misery guts. We've also switched to A2 milk as both the boys had to have soy formula milk when they were little. I noticed the difference in one of the others when we didn't bother to get it one week - he was cranky and irritable. As well, their asthma seems to have disappeared.

I am now convinced of the diet. Even hubby who was initially sceptical but supportive - he knew that something needed to be done - is convinced, and happy to eat his 'bad' food away from home.' - by email

[342] Depression: Helpless, hopeless depression due to salicylates (Sept 2004)

I have suffered depression since at least age 15 and am 38 now. I self medicated on huge amounts of alcohol over the years, and was always very emotional and explosive. Either very 'up' or totally down and in a complete mess.

When I fell pregnant at age 29, I sank into a deep depression that only worsened with a long labour and breastfeeding difficulties. I was prescribed Prozac and stayed on this medication for seven years during which time I tried to come off twice with very bad results.

I did a lot of counseling and support group work regarding childhood abuse issues, relationship and communication counseling work with my husband, and received the assistance of a social worker with trying to manage mothering my child. My daughter was three before I received this assistance and also started to work through my own emotional issues. It took until she was six before I came across Sue's information about diet. My daughter always had Oppositional Defiant Disorder behaviours and was not interested in learning at school or at home, but it had been presumed that it was I who was not coping. Which I wasn't anyway, to top it off! ODD people can appear so normal to others making me seem quite neurotic.

I came off antidepressants again at the beginning of last year after having felt very level for quite a few months in a row. It was a very rocky 12 months. At times I was OK and at others I thought I would not survive unless I went back on the drugs. At least my husband was far more understanding at this point, but I wouldn't have called it a life.

I know now that we (my daughter and I) had been bouncing off each other for years. Her behaviour and concentration improved enormously on the diet. It has changed our lives. We laugh, play, cuddle and talk together instead of constant aggression and fighting. I cannot remember ever being so level and calm and capable. I cried with joy (or over the loss?) one night when she was just so caring towards me. Of course we still have bad times. Everyone does after all. Now we have good times too.

When we tested salicylates, as soon as I woke the next day I could feel the return of my helpless, hopeless, awful black depression. I wanted to strike out at others in my pain. Once again I couldn't think straight to make even the simplest of decisions. I hated myself and anyone that I loved. It took about five days before I started to come up again. I don't ever want to feel like that again and I know what causes it now. To be able to say that feels so good. I have some form of control over a life that was totally out of control. I find the diet very hard in some ways, but I know which I prefer. To maintain my life in any reasonably happy form, I need to be failsafe. - reader, Vic

[304] 'I assaulted my wife' (December 2003)

Last weekend I assaulted my wife and did horrific damage to her face. I have deep regret, humiliation, shame and remorse for my actions. I had been drinking most of the afternoon, then consumed two strawberry sundae tubs of icecream. I did not check the brand so I cannot be certain that the food colours contributed to the way I acted. Although the alcohol is obviously a large contributor, in the past I have never reacted violently after drinking alcohol. However, from the ages 18-25 I experienced panic and violent moods, then I started to look at my diet. Cordials with artificial colours especially red had been a part of my diet and I noticed a link. Since then I have avoided food colours where ever possible, however I simply overlooked the strawberry sundae as I love desserts and was having a good time. I think I have stumbled on to the cause for my actions, but I am not sure. - Graeme, by email

[289] The Clayton's diet ... the speech therapist was so amazed (September 2003)

A friend of a friend with two young children visited a dietitian who put them on what I can only describe as a Clayton's failsafe diet ... not quite fully failsafe. For example, the dietitian told her that it was perfectly ok for her children to eat McDonalds/Red Rooster chips...

She was introduced to my wife and got into a conversation about real failsafe diets. After 4 days on the real diet, she rang my wife crying with happiness. Her son had settled down to what she considered a 'normal child' to be. His aggression was gone, his tendencies to distraction had disappeared and his sleep had increased by two hours a night. In his first speech therapy session since starting on the real diet, he suddenly managed to recognise 40 words (from picture cards) as well as all primary and secondary colours, where his previous best attempt at word recognition was 8 words. The speech therapist was so amazed that she has already started researching failsafe dieting. The dietitian who put her on the Clayton's diet has now started looking seriously at the failsafe diet instead. It's been two weeks now and our friend is seeing the pediatrician who put her son on Ritalin this week to see about getting him off it completely. She's 100% sure that he doesn't need it at all any more. And remember the sister? She was a chronic asthmatic, but she hasn't needed a puffer since a few days after starting the diet. - from an email discussion group, with permission

[279] I joined the boys on the diet and we have been strictly failsafe (September 2003)

Thank you for your four very informative books. They are wonderful and a great support along with the failsafe email groups and newsletters.

We went failsafe for our son when he was born five years ago and both children have been sort of failsafe since then. However, increasing errors and too many salicylates over the last two years (due to lack of support when we moved) resulted in increasing periods of out-of-control, aggressive and defiant behaviour in our son. For the last three months I joined the boys on the diet and we have been strictly failsafe, after finding your website and other books (I only had Fed Up previously). Life has been wonderful - except for catering socially.

I have gained lots already from 'my failsafe bible' (your cookbook). Thank you for your thousands of great useable ideas, we drink a mug of soup a day like suggested in one of your books to keep up our vitamin intake and have all been healthier as well as 'better behaved' people since being strictly failsafe.

If you would like a European contact, or more specifically Sweden ... I am happy to help out. It's great having regular contact and updates, and the email groups to pose questions and ideas to. - Faye (our failsafe contact in Sweden)

[271] Autistic sound sensitivity improves on diet (June 2003)

We discovered failsafe over a year ago when my son Liam was four. Ironically, because of the failsafe internet support group he was diagnosed with Asperger's Syndrome a while later. He used to hate loud sounds and either shut down, cringing in a corner with his hands over his ears, or more often, he rose above it with the most aggressive behaviour and loudest noise he could muster. One time I had the blender on for one minute and he screamed and threw a chair across the room, quietening down as soon as I turned it off. This has dramatically reduced now. It was not instantaneous with the introduction of diet but somewhere in the course of last year it improved. I have found that this is the improvement which most intrigues other parents of autistic kids. Liam still doesn't like loud noises such as fire alarms

but he is content to hold his hands over his ears.

For Liam, the diet has been like unfogging his brain and allowing him to catch up where he is delayed, mainly socially and in his emotions. But the most interesting thing was watching his drawing develop. When he first started Kindy, he drew like a two year, all scribbles. After he started the diet, his drawing just took off and in a matter of months we watched him improve to above his age level. Literally every week there were new dimensions. It was so exciting and a very visible reminder of how the diet now allowed him to develop.

Liam is gluten, dairy and egg free as well as failsafe and he has soy only once every four days. I could not say he is perfect, but he is light years ahead of where we were. - Caroline (finb and Failsafe discussion group)

[230] I felt I had a potential psychopath on my hands (February 2003)

I am 42 and live in Sydney with my husband and 2 children. My story centres around my son, Alex who is now 6 years old. Alex is a little toughy, one of those kids who is highspeed, enthusiastic, in your face, adventuresome etc (and that's with a positive spin on his life).

He was born 2 weeks early, but a big boofy boy at 4kg. For the first 6 months he was a wonderfully placid calm child. Feed well, slept well, grew well, didn't seem to cry - dream baby. (Apart from having chicken pox, bronchiolitis and 2 fits in this period he was healthy and strong - though perhaps these illness should have given me a clue).

At six months he suddenly became incredibly restless - people would comment on him being active and a real 'tiger' - Looking back 3 things changed at this time - he started solids, started formula and he started daycare. I also remember noticing his face change. He had had a beautiful round baby face with bright blue eyes, and when he started on solids he got dark circles and creases under the eyes, and his eyes turned green - I remember crying at the loss of my beautiful baby boy.

His first year in day care was diabolical. In a class of 15 babies, with 4 carers they could not cope with Alex. He walked at 9 months and spent his time running around the other babies (that were still immobile) snatching toys, jumping on the babies, shrieking, and escaping - he seemed incredibly bright and had the mobility of a child at least 6 months older. Every evening I was met with the litany of what he had done that day to terrorise the class. The carers always looked frazzled and worn out. Their only solution was to give continuous time out as a unishment - he spent hours every day in a cot that he eventually broke - at the time I lived through it thinking it must get better - in hindsight I see their approach as completely inappropriate - he was too young to be punished - it didn't help to modify his behavior, rather it set it in stone.

He continued through daycare being rough and ready, and some days violent - he found their order and routine hard to take. When he wanted to run in the garden, he had to listen to the story, when he wanted to keep painting, he was told painting time was finished - the structure and lack of freedom drove him mad. And this was a university based childcare with great facilities and high staff to student numbers!!

Our life at home was crazy as well. It was like living with Jekyll and Hyde. Sometimes he would be a delight, other days he would be totally uncontrollable - usually incredibly defiant - he could stick to his point hour in hour out - it was impossible to win an argument - normal parenting didn't seem to work.

He also had a habit of making loud repetitive noises.

Going out was a nightmare - he would run away, run into traffic, swear at strangers, try to strangle other children, and on a really bad day would threaten to kill people. There were many times when I felt that I had a potential psychopath or serial killer on my hands. Another characteristic was that he couldn't be told anything - he always wanted to learn first hand.

Harm minimisation seemed to be the best policy - I taught him to cook, use knives safely, chop wood with an axe, use power tools etc at a very young age - on the basis that he was going to find and use these items anyway, no matter what I did to try and stop him. Although he had a few accidents (mainly burns from cooking) this strategy has meant that he is still alive.

At 3 we discovered he had asthma, and glue ear - he had his first set of grommets inserted and could finally hear. At that stage I thought the hearing was the answer to all his behavioral problems, and I am sure he must have felt better being able to hear (Since then we have had another 3 sets of grommets inserted). He also changed to a community based, child centred pre-school/school which was far better for him. They worked with what he wanted to do and let him learn and explore at his own pace. The other children were attracted to him in an odd way - they were always excited to see what daring deed or brilliant idea he had - he never lacked for incredible ideas or enthusiasm. Despite this, successful social interaction and aggression was still an issue, and friendships were dicey due to his unpredictability.

Another habit he had was ticcing - eye tics, snorting, touching other children, kicking - At 4 he was diagnosed with Tourettes by a paediatrician. (I followed up later with a neurologist who specialised in Tourettes who said that he was just a naughty boy who needed counselling).

I was also seeing the local health centre psychologist -but this seemed to be no more than a chance for me to talk - never really got to address Alex's needs.

Interestingly I found his behavior was always better in winter, and was diabolical by term 4 (I now think this is fruit related!).

By the end of pre-school several parents had started a petition to get him removed from the school - luckily I had the support of the teachers and many other parents and this was stopped dead in its tracks.

I noticed that there were several different levels to his behavior - what I think of as 'full on' and then 'psycho'. I noticed that he became psycho after certain drinks - being sceptical about colour related behavior I started to read the labels whenever he went truly demented and psychotic - of course you can guess what I found - 102 At the time I had no idea that other people knew it was bad - I just thought I had the only child in the world who reacted to yellow colour - particularly as the popular wisdom of the day all said that red colour was the problem. So for the last 2 years I have avoided 102 - this helped a bit - but not totally.

The local health centre's counsellor visited the school and reported that his behavior was Oppositional Defiant - first time I had ever heard of it. The solution was to maximise his 'good interactions' - so once again no real help, and leaving it up to me to be a better parent.

Alex started school at the same child-centred preschool/school last year - he had a reasonably good year but was chronically sick - temperatures, stomach aches, head aches. However as he is so hyperactive, he often didn't realise he was sick, and I had to fight to get doctors to look at him. For example, I took him

to hospital with severe asthma/croup - however as he was running around casualty making chicken noises he was not seen to as a priority case - when they finally looked at him, his oxygen levels were dangerously low and he was gasping for breath.

Another time we sat in a waiting room, left till last as he was jumping on chairs (and apparently well) - when he was finally seen the doctor couldn't believe he was racing around - his temperature was 41 and he had acute tonsillitis and a ear infection. He also had a severe salmonella infection last year and was losing considerable quantities of blood, but because of his high energy levels I was told it was just gastro and I was exaggerating his symptoms - it was finally diagnosed as salmonella and he had 2 weeks off recovering - I now know that when Alex is sick I have to force doctors to look for the worst. While I know he is ill, to anyone else he seems too full of beans to be sick - time and time again the doctors have been surprised when some odd illness turns up (ie scarlet fever, pneumonia, bronchiolitis, to name just a few)

At the end of last year I took Alex to yet another pediatrician - this time about his health - after a year of infections and unexplained temperatures I was thinking that there was something seriously wrong - he took his medical history and noted his pallor, and dark circles under his eyes - and pronounced food intolerance!!!

In December I started him on the diet given to me by this doctor - we removed milk, honey, colours and preservatives - and were told he could eat fruit, vegies and only cold pressed oil.

So - no result - if anything he became worse. While I thank this doctor for pointing me in the direction of food intolerance, his diet did nothing to help. A family friend recommended your cookbook to my mum. Since then I have spent the holidays reading Fed Up, and the cookbook and going failsafe.

We have cut out diary, amines, salicylates, and all the artificial additives, colours, preservatives etc. My mum has been a fantastic support. She is making all the 'extras' ie: jams, mayonaise, biscuits etc. Without her I couldn't have achieved so much. She also rings up food companies and asks them to clarify what their ingredients are, and what type of oil they are using! We haven't taken out gluten yet - not sure whether it is necessary.

And Alex? It has taken a while, but by the end of the holiday he was so much better. He was able to play consistently with children without it erupting into a major argument. Parents and friends have noticed the difference. I have also noticed that he is now able to be disciplined. He can hear what I am saying and understands when his behavior is wrong and I can now win an argument.

Last week was the first week back at school - first day was fantastic and I received lots of comment about how he changed. Then he started cheating and eating roll ups, muesli bars, chocolate cake and sweets from his friends - by the weekend he was making repetitive noises, chatting constantly, being selfish, crying and was unable to control himself. He visited a friend on the weekend, who had seen him a week before in his good phase, and she couldn't believe the difference - she is now a convert to the idea of food intolerance. In her words it is like he is on a drug trip, and we all just have to wait for him to come 'down'.

So we are back trying to get him adhering to his diet again - he says he wants to - I just have to wait and see. I want to get him back to the point where we can try some controlled challenges!

And the rest of the family? None of us are totally failsafe yet, and are all cheating when we are out, but I believe we all have symptoms that warrant the diet. My 9 yr old daughter is incredibly artistic, but

unable to read, and has temper tantrums, I suffer migraines, mood swings, arthritis and occasional depression. Interestingly, my daughter did some market research for a new hyper flavoured snack food a few weeks ago. She came home in an uncontrollable rage to the point that she was throwing herself around the house kicking furniture etc. I have never seen her like that before - and just think, those snacks are about to do that to all our kids - it's criminal. - reader, Sydney

[225] Andrew Driffield's quest for gold (November 2002)

My name is Elizabeth Jenkins and I am Andrew Driffield's Mother. It sometimes feels as if I have always been known as "that's Andrew's Mother".

Andrew was a beautiful but exhausting child. He went to sleep at a normal time ... then woke about 1am and stayed that way until about 5am, then dozed till about 7am. As he got older he would climb out of his bed, and head straight for my side of the bed. He would lie there quietly in my arms, only needing the security and warmth. Until he was fifteen years old this remained a habit. My memory of these events is a blur as by the time he was five, exhaustion had replaced recall.

Andrew's only word was "Mum" until he was about four. His language was so obscure that I had to translate even to his father. He was destructive. He destroyed toys, other children, and household furniture. To do any housework that would have taken my eyes off him for a second, I had to lock the doors and windows. I vividly remember the day guests arrived at the front door and Andrew left unnoticed by the back door. The panic started as we realised he was not amongst the visiting children until a phone call from the local supermarket let us know that a little blonde haired boy was riding the rocking horse in the entrance. When asked how they knew whom to ring, they said that he was being guarded by a small black dog called Benjie who was wearing his identification. Horses and dogs remain a big part of Andrew's life to this day.

When Andrew was five we went to a Specialist Unit. He was tested and we were observed as a family unit. Andrew evidently passed but I failed. I was told I was overprotective, and I needed to allow Andrew to discover consequences for himself. That afternoon he wanted to ride his bike with the other boys - and he was hit by a car. From then on I decided I wanted a live five year old, not a dead one.

Andrew started on an early intervention program at Newcastle University where he attended a unit with one-on-one teaching for the morning and then returning to the public school for the afternoon classes. It was a disaster. It was the beginnings of 'integration'.

They failed to see how children who are already different do not gain acceptance by being treated differently. In one year he learnt to write his name 'Andrew' with difficulty. They were still claiming that he was just a slow learner and would catch up. My observation was, had I had a monkey in the same circumstances, I would have had the same outcome. The public school wanted to expel him. He was disruptive, angry and aggressive - and he was only in first class.

A Steiner School had opened in the region and after five minutes of hearing their philosophies I sent Andrew. It was like rain and sunshine on a small plant. He thrived. He learnt to listen, he learnt to speak and the aggression gradually decreased. Andrew was now nine years old and still a handful. I eventually took him to a pediatrician, left him in the waiting room, and told the doctor I was there under false pretensions, that I'd come as a stressed adult, remembering I was still to blame for all his behaviors. Andrew was brought in, and off he went - over the desk, under the desk, etc. As luck would have it, the

pediatrician had just attended a conference run by a leading Sydney professor who had described Andrew's features and symptoms to a T. We were sent to the professor in Sydney, who ordered blood tests and announced that Andrew had what he called a fractured X chromosome. He said that when enough children registered similar symptoms it would be given a name. That was in 1983, prior to the genetic testing available today, and the recognition of FRAGILE X.

At this stage Simon, Andrew's older brother, started riding horses, and I was instructing at pony club, so I enrolled Andrew as well because he was always wandering off and worrying me. I threw him up on a horse just to know where he was.

He had a natural ability, and somehow the horses seem to know that they had to protect him. It was also the only animal that Andrew could hug and not cause a decapitation.

Andrew tried harder than anyone I know, and still does. Riding put Andrew on a par with his peers, so when he got upset about not being able to read and write like other kids, we were able to point out that if they tried to ride they would probably fall off - everybody had something they were good at and could do well, and his was riding.

Andrew became Pony Club rider of the year in 1986, runner-up in 1987.

Andrew who still couldn't read or write, managed to learn dressage tests by walking on the lounge room floor from letter to letter and learning it by pattern, followed by replica in size to the real thing he walked, trotted and cantered around on his own two feet, THEN he graduated to four hooves for the real thing. He also learnt to find and remember his way around a cross country courses. For this we photographed Andrew and his horse jumping each jump at the practice day, put them into a small album, and it was his bedtime story for the two weeks prior to the competition. He also learnt to remember show jumping courses. He had the very best of coaches and everyone liked him, because he kept trying and never gave up.

In the late 80s my first marriage broke up and Andrew and I moved to Darwin and it was here that I met my new husband Stephen Jenkins.

One of Andrew's goals was to attend 'normal' high school and eventually he did. Darwin High School had a wonderful Special Education Unit, headed by an incredible woman, Lauren Tinapple. She remains a devoted Andrew fan to this day, and has always been there for me in the disastrous times. There were times when I felt we had pushed Andrew past his capabilities, as he didn't seem to fit into an acceptable mold. His expectations exceeded his abilities, and my heart ached on many occasions. Even though he was teased and made fun of, he is glad he did it, and developed yet another strength of character. Through various government employment options Andrew tried many jobs, some of which were total failures. He was happiest when he went to the Katherine Rural College and did a six month Jackaroo course which they then extended into a 'work experience' for an additional six months as he needed extra time to learn. He eventually got a live-in job with a family in the middle of the territory for six months before the wet season set in.

Andrew is so driven, and one of his goals has always been to ride for Australia in the three day event just like his old pony club friend Matt Ryan does. It was hard to say to him or find a way of saying that it would be very hard for him to be selected, but that did not deter him.

Andrew was accepted as student at the NSW Equestrian Centre with Heath and Rozzie Ryan, who had been his instructors since he was seven. He lived, breathed and rode horses with the best for six months. He finally realised that this goal may be a little too hard to reach. In 1997 it was suggested that Andrew join Riding for the Disabled. As his abilities exceeded all the students, Andrew became an Assistant Coach at RDA and loved helping all the children to ride and benefit from the experience.

In the October of 1997 Andrew rode as a member of the Northern Territory State Team at the RDA National Championships. He was now riding and competing against others of similar disabilities. Andrew started to shine, placing 2nd in his first National competition, coming closer to his goals.

To allow Andrew to reach his full potential, and access regular coaching, we made the major move to South Australia. Since then he has improved each year, and in 1999 was selected on the RDA National Squad. He is now among the top riders in Australia and hopes to be selected to represent Australia at the next World Championships.

This is quite an achievement especially when his Grade, Grade 3E for intellectual disability, is not recognised at international competitions, so he rides against able minded, but disabled body riders in Grade 3, a grade above his, and riding against the likes of Julie Higgins who won double gold at the Sydney Paralympics.

By far the most significant change in Andrews's life has been our discovery of Sue Dengate's book FED UP in 1998. Through use of the Fed Up diet and avoiding all intake of natural and artificial chemicals that Andrew reacts to, his mind is clearer, and he is able to control his actions and tempers. As he says, he hates it when he eats the wrong foods because it makes him feel bad and depressed. Before discovering the diet we had some hellish times, including major temper tantrums which in the main were triggered or caused by the wrong foods. Andrew is 6 feet tall and very strong and broke his Step-father's ribs one Xmas, while giving him a Xmas morning hug, so if he is in a food related temper tantrum, beware.

Andrew still aims to reach his goal of representing Australia and is hoping for selection onto the Australian Paralympic Team.

Andrew was recently assessed by a leading psychologist, and has a measured Full IQ of around 65 and an Overall Adaptive Functioning cognitive measurement below the 1st percentile, so it is amazing that Andrew is not doing what a specialist once told us was all that was possible, to expect nothing more than having him working in a sheltered workshop doing repetitive tasks. Although eligible for a full disability pension Andrew has foregone it to work 5 days a week on a recycling truck so he can afford to reach his goals and keep his mind and body active instead of sitting at home watching TV.

If there is one phrase that says it all about Andrew it is these words from Calvin Coolidge: Nothing in the world can take the place of persistence. Talent will not; nothing is more common than unsuccessful men with talent. Genius will not; unrewarded genius is almost a proverb. Education will not; the world is full of educated derelicts. Persistence and determination alone are omnipotent. And without the fed up diet, he certainly would not be where he is today, in mind or ability.

[217] Saved him just in time (October 2002)

About 3 months ago I wrote you a very short letter explaining my 5 year old's diagnosis (severe ADHD/severe Anxiety Disorder/ ODD) and asking for a brochure. Well, thanks for the brochure and the very nice note you sent back. You were so confident that RPA would "sort him out" that it really lifted my hopes incredibly and helped me stick to the ultra elimination diet he'd been put on.

You were so right - I (and his brother, my friends, family and school) saw changes I never thought I would see. Basically this diet has saved him just in time from starting at a special school for behaviour disorders. By mid second term - pre-diet, in Kindergarten - he had been suspended 7 times for violent behaviour. Since the diet, he hasn't even been sent to the Deputy. You were very perceptive in the letter you sent - yes, life had been absolute hell - there is no other way to describe it. After I received your letter I bought "Fed Up" and read it in 3 nights - that gave me even more hope. Thank you so much for all the work you do and the fantastic web site - I just can't get enough of it. If I ever come to Darwin I owe you a big thankyou hug! - by email, NSW

[214] No answers from specialists (October 2002)

I read the last two newsletters on your website and was amazed with the information. I am just starting to look at food additives/preservatives as our 6 year old son has difficult behaviours at times. We are vegetarian and eat a healthy diet but we have noticed these behaviours increasing since starting school...he is restless, has difficulty concentrating, can be anti-social and unable to share, aggressive (punching himself) and teary...however, this is not all the time...he can be calm, delightful and co-operative one day and then highly emotional the next. Specialists have no answers for us re the cause but after him having his first Redskin a few weeks ago and some Arnotts Family assorted cream biscuits (another first) he just went crazy and was angry and aggressive for the following 3 hours. - email

[155] A Brush with Pizza Snack Biscuits (June 2002)

My sons are severely food and chemical intolerant. Their diets are severely restricted, just to enable them to cope with day to day life. Their adherence to the restricted diet literally enables them to survive. We avoid additives in food at all costs, and we avoid chemicals wherever possible as they affect the boys equally to the wrong food choices. They are aged 6 and 3.

My eldest son has commenced school and is in Year 1. Considering his dietary challenges, he copes with food and school incredibly well – but there have been and will always be the occasional slip ups. Pressure from peers is already impacting and will continue to do so as he journeys towards adulthood.

Late in the Kindergarten year, he was with some team mates after a Teeball game. He was eating his customary rice and drinking plain water whilst the other kids were tucking into soft drink and a box of pizza snack biscuits – the kind people might eat with dip. He was fairly unfazed as he is used to it, but the problem kicked in when he had finished – still hungry - and the others still had plenty to eat. He resisted their offering and the temptation to indulge until they reached the bottom of the box. It was then that he succumbed to the hunger and I daresay, the curiosity, (he has never eaten them before!) and he ate some crumbs from the box – less than would cover a 10 cent piece. He later remarked that he didn't even like how they tasted!

Within 3 hours, the reaction started. He was due to go to a birthday party – I always stay with him for moral support because he can't indulge in what others enjoy at parties – and as we arrived, the rot began to set in! He was no longer able to communicate with me in the way he usually would. His responses to questions were more a grunt than a reply. I had to physically manipulate his face to make eye contact with him and get his attention – and his eyes were wild!

He generally perspires freely even though he is only 6, but now he was perspiring profusely. His shirt, hat and shorts looked like the ones on Pat Rafter after a 5 set Final – and this is truly without exaggeration. He was soaked. He was moving in an agitated manner- his actions were jerky rather than smooth, and he was lashing out at things and people. He became surly and very defiant. He was irrational when compared to his usual behaviours. He hurt 4 friends at the party in 4 separate incidents whilst playing tips on and around some playground equipment. I had been observing and intervening – there was nothing malicious, but he had lost his finesse and the ability to be able to judge the other kids level of involvement. He had become face blind – oblivious to their anxiety and distress, and unable to see that they wished to cease the game. His need to continue the game was insatiable.

For the first time ever, these kids were actually scared of him and what he was doing, and they thought he had hurt them on purpose. He was at this point doing some real damage to the fragile relationships he had worked so hard to develop. The area the party was conducted in was also open to the public, and my son managed to get into 3 fights with slightly older boys he had never met before. In each instance, both parties were equally at fault, however the new children seemed to take an instant dislike to his overall behaviour and this was the impetus for the conflict. He was now unable to make good judgements about his actions and he took offence at the situation. Instead of altering his behaviours to become more socially acceptable, he lashed out and hit the other child – and so the fights began. My time was spent alternating between apologising to everyone profusely, heading his ill-considered choices off at the pass and repairing his crumbling relationships whilst helping out his inadvertent victims – his mates were suffering his horrendous reaction to flavour enhancers, flavours and preservatives vicariously.

Going home was no better – we were only two hours into the reaction and things weren't going to get better in a hurry. I tried to keep him doing things outside to wear off as much energy as I could. Something happened and he was hurt. I think he took a bump on a tooth that was threatening to come out, but was nowhere near ready just yet. The bump made the tooth a little looser and it bled. I tried to soothe him and clean the blood without his knowledge, as blood worries him. It was no use because he became hysterical. His hysteria was very different to his usual teary fussing (as many 6 year olds do when in need of TLC). He began to scream and squeal a very high pitched squeal, he was rocking and flapping, he was panicking, he wanted comfort but kept pushing me away and he interspersed the screams and squeals with frenetic pleas of 'Help me! Help me!' He was inconsolable and it took me more than 1 ½ hours to calm him down to a reasonable state. He then continued to rock and sob on my lap.

Without the pizza shape irritants in his body, I would have been able to calm him right down within half an hour and he would not have exhibited the rocking, flapping and squealing behaviours (which are found on the Autism Spectrum along with face blindness and tactile defensivity – not wanting his personal space invaded, oversensitivity to touch, pushing me away despite wanting comfort). He also would not have pushed me away after the initial pain subsided. Consequently, he distressed his baby brother and his father – the whole house had been disrupted by the ingestion of the miniscule dose of pizza shapes only hours earlier.

The next phase of the reaction involved him not being able to go to sleep, and then once finally asleep, waking all through the night. He finally succumbed to sleep at 11.30pm after his usual Catapres dose and some Panadol several hours earlier. His body was still too irritated to properly settle down. Massage was useless because now he was oversensitive to touch. Whilst asleep, he did not lie still all night. He was thumping, wriggling, tossing and squirming all night. You could not say he had a restful evening and neither did we.

He was awake at about 6 am despite his late and unsettled night and the irritated, angry behaviours commenced immediately. He had an argument with his brother over the TV that ended in a fight, because he couldn't step back and get help to sort it out without using his hands and body. He was physically and verbally aggressive and violent. His defiance was escalating and every single thing that went on in the day was a bone of contention. If we said it was black, he swore that it was white despite any evidence to the contrary. If his brother looked at one of his toys, or dared go near his bedroom door, then he hit him without even blinking. I spent this day diverting, refereeing and taking my son out of the house to separate everyone and try to reduce the exponentially increasing stress levels. Bedtime was no better tonight either.

He also began to exhibit physical symptoms today. He now had patches of eczema under his armpits – these only ever appear when he is reacting to something – he had a pre eczema scale – like ichthyosis - all over his torso that he constantly scratched at. He had heartburn, his belching increased, he had wind that you could hear in his digestive tract, he had 'allergic shiners' (large dark circles under his eyes), he had greyish skin tone, he had a red burn mark with skin peeling off his behind from the irritants passing through his digestive tract and burning him as it went. There was nothing I could use to relieve his discomfort as nothing would stay on his skin. These physical symptoms would remain until his body was finally clear of what he had ingested.

Upon waking the following day, it was still evident that the aggression was present, although a little milder than yesterday. I managed to encourage him to have some solitary play in his room. He was still irrational and oversensitive and not coping and lashing out. By the time school began, he was in tears clinging to my legs. He was suffering terrific mood swings and his anxiety levels had really increased – he becomes very anxious when his body is compromised by the wrong foods or chemicals and this directly affects his behaviours too. I let his teacher know and organised to collect him early as I knew a whole day of school would be too much. His ability to perform his work had significantly decreased compared to the week before and he needed much more support to complete tasks. His behaviours in the playground were more frenetic and wild, but fortunately he didn't get into any scrapes that might be finished physically.

In the afternoon, he exploded again – tiredness and the pizza shapes a volatile combination. I rode a rollercoaster of violence, verbal abuse, screaming, aggression, hugs and apologies. It was all I could do to get the situation calm enough for us all to co-exist when Dad got home from work. Unsettled sleep was still an issue. This pattern of morning irritation, school, early pickup, irrationality, abuse and calm continued for another 6 days before things significantly improved. It was a hell of a long time to suffer for such a piddling amount of additive laden Pizza biscuits! Another unfortunate feature that reared its ugly head during this horror period was a return to very negative self image; calling himself stupid and an idiot, saying and believing that no-one liked him and no-one loved him, and believing that his friends didn't like him anymore either. When he has a reaction like this, he believes he is not a good person. This is a very heavy burden for such a small person, but it has been a part of his reaction pattern since he

began to speak. When he was eating a lot more foods when very small - before we had pinpointed the problem (and life was hell for everyone), he would sometimes self harm and sometimes even say 'I wish I was dead'. It is a very scary and affronting thing to hear your two year old say, "I'm a yucky person! I wish I was dead!"

I always take great pains to point out the wonderful things about him and his achievements and I try to provide lots of situations where he will feel success, but it is undermined very quickly when something like the pizza biscuit incident occurs.

Oh, and what additives were in the box? A combination of at least four glutamate flavour enhancers, some colours, added flavours, vegetable fat (that is likely to contain one of the harmful antioxidants but which doesn't have to be listed because it represents less than 10 percent of the final product), cheese powder (also usually has added flavour enhancer in the manufacturing), spices... I think anyone reading this will get the picture!

What can be learned from this horrible but true story?

- Food additives DO hurt children.
- Food additives vicariously affect others.
- Possible reactions are many and varied. If you're lucky, you may only exhibit a few minor irritations. If you are unlucky, it will affect your whole life until you can overcome the dosage.
- Physical, mental, social and emotional health can be affected equally.
- Reactions are dose related. The more you have, the more likely you are to suffer a reaction.
- Reactions are individual, and depend on your tolerance.
- Society eventually pays for the individuals who cannot cope with the additives in their diet but are not aware of the connection: mental illness, conduct disorder, depression, drug dependency, costly and often ineffective medication to treat a sufferer's great variety of symptoms, property damage, incidents of rage, family and relationship breakdown, compensation paid to people who end up the innocent victims of others who themselves are really the victims of the food industry... All of this has a cost, whether just an emotional one, or a monetary one. Incarceration of food 'victims' is yet another cost – and one better spent in prevention and better health outcomes for all.

Many of the additives now permitted for use in our foods were not permitted as recently as 5 years ago. If we didn't need them in our food then, and they can have a harmful effect on children and adults alike, then WHY are we allowing them into our food now?! - Sheryl, ACT

[153] Nicholas: Our Six Year Journey (June 2002)

Our family is what is commonly referred to as a "blended family". When we were married in January 1992, Steve inherited a "package deal" which included my two children, Lauren and Mark, from my first marriage. Nicholas was born in October 1993.

Our six-year journey with Nicholas began early in 1996 when he was almost three. We were living in Wagga Wagga. Steve and I were in our late thirties, and Lauren and Mark were 13 and 10 respectively.

We are a Defence Force family, which means we are required move around a fair bit. This also means that we endure complications and added stresses that most non-transient families can only begin to imagine.

When Nicholas was born he came into this world in the usual way, a normal pregnancy, and no problems during labour or childbirth. He was a completely normal child in every way until around the age of three. He started to become difficult to manage from a behavioural point of view.

I was 30 weeks pregnant at that time, with Elise, and due to complications I was confined to bed for the last 10 weeks of my pregnancy. Steve was not allowed to take leave so we had to fly my mum down from Brisbane to help out for the first five weeks, and then for the last five weeks we had Steve's parents, also from Brisbane, stay with us to help out until I was back on my feet. We put Nicholas' bad behaviour down to having to cope with different people, different sets of rules, different ways of doing things etc. and told ourselves that everything would return to normal in time.

Elise was born in August and things did not improve. I mentioned Nicholas' behaviour to the clinic sister when I took Elise to be weighed and measured, and she felt that perhaps he was feeling neglected because his new baby sister was taking a lot of the attention away from him. We enrolled him into preschool. We felt that perhaps if he were to become involved in something special just for him, something to improve his self-esteem, his behaviour would improve.

He settled into preschool really well and thoroughly enjoyed it. He was always very well behaved at preschool but the behaviour at home did not improve. This became the pattern of our lives for the next six years. He became obsessive about little things such as his bath. It was either too hot or too cold. It didn't really matter what temperature it was, it was just never the way he wanted it no matter what we did.

We survived fairly well for the rest of that year and remained in Wagga Wagga until the end of 1997. Nicholas' behaviour did not get any worse, nor did it improve. We told ourselves that since we seemed to skip the terrible two's that perhaps this was just a bad case of the terrible three's instead. I hasten to add that I did not experience any of these behaviours with Lauren or Mark, nor did I go through much in the way of the terrible two's with them. Lauren and Mark were always very well behaved both in the home, and out and about, so this was a whole new experience for me.

At the end of 1997 Steve was posted to Darwin, and we spent an enjoyable Christmas with our families in Brisbane en route. We arrived in Darwin in mid January of 1998 and this is where our journey really started to get rough.

Nicholas started preschool five mornings a week and he became very tired with no energy. We put the tiredness and low energy levels down to the humidity and extreme heat of the tropics and the fact that up until our move to Darwin, he had lived all of his life in a cold climate. Nicholas was born in Canberra, and had spent the past two years living in Wagga Wagga before moving to Darwin. He started to lose weight, which we put down to the fact that Steve is very tall and that Nicholas had inherited the "tall" gene and was starting to grow. We decided he was going to be a tall, skinny child and didn't think too much more about it. The behaviour was getting steadily worse but still only at home and never at preschool.

In March of 1998, I decided it was time to take Nicholas to the doctor because he was now 3½, still a bed wetter at night, and still no improvement in his behaviour. We were referred to one of Darwin's best paediatricians. Nicholas had an ultra sound done on his bladder to rule out any nasties. This indicated that he had a large bladder capacity, which meant that he should be able to store the urine and make it through the night without any problems. Our paediatrician only ever used medication as a last resort after exploring all other options, and we were in total agreement of this. It was decided to put Nicholas back into night nappies, which we did, and given a bit more time and maturity, hopefully things would fall into place.

Initially, the bed-wetting was the bigger concern and the behaviour was secondary. Gradually, the priorities were reversed. Nicholas' energy levels deteriorated and his weight loss continued. The dreadful behaviours worsened. As time went on all these things became serious issues. The volume of urine each night was no longer contained in the night nappy, and the behaviour went from bad to worse, to downright disgusting, with many violent outbursts. He became more obsessive. He had to have the yellow bowls and plates in our multi coloured dinner set, and he had to have his shoelaces the exact same length. If he didn't get his own way, a huge tantrum would ensue.

Nicholas' weight loss continued and he was now looking so thin and unhealthy that he looked like a prisoner of war. His energy levels were so low that he would be playing on the floor of our living room and tell me he was tired. I would tell him to go and have a rest but he didn't want to. By the time I turned around to do something, and looked back at him, he would be asleep on the floor mid play.

Our paediatrician decided to try a medication called Periactin, which was supposed to kick start Nicholas' appetite. Unfortunately it didn't seem to work. Our paediatrician then decided the behaviour might improve with a change in diet. He started to tell us about the chemicals in food, both natural, and added. He had a basic knowledge of this but decided to refer us to a dietician.

The dietician that we saw also only had a basic knowledge of food chemicals. She did her best but really couldn't answer any of my questions and was of no real help except for one very important piece of information. She wrote down the name of a local lady by the name of Sue Dengate, whom she said had a support group for people like us, and knew a lot about diet. She did not have a contact phone number or any other details. She also recommended that I buy the book Friendly Food that was recommended by RPAH. The book was about avoiding allergies, additives and problem food chemicals.

I went straight from the dietician's rooms to our local bookshop where I purchased the Friendly Food Cook Book. The woman who ran the bookshop asked me if I'd read the book Fed Up by Sue Dengate. I hadn't, and the store was out of stock. This prompted me to try to find Sue's phone number in the local phone book. Prior to contacting Sue, I phoned my mum in Brisbane to ask her to try to get hold of the book and send it to me.

I eventually got my copy of Fed Up and was shocked at what I read by both the natural and the added food chemicals. Nicholas was much worse in Darwin than he was in Wagga Wagga and our paediatrician said that it could be as simple as changing our bread. He said that in Darwin, because of the humidity, the breads had a lot more preservative in them than the breads down south. In the tropics the bread goes mouldy much quicker. I began reading food labels for the first time in my life and discovered that our bread which we all ate at least once a day, had preservative in it. This was only the beginning. After making contact with Sue I began to realise how fortunate I was to have her, especially living in our local

area, because she has saved our lives on numerous occasions over the years.

The biggest hurdle for me in coming to terms with the failsafe diet was that I had to completely change my way of thinking when it came to foods. I had been raised on a diet of fresh fruit and vegetables and this was how we were raising our children. The obvious additives and preservatives were things that I could comprehend very easily as being "nasty" and I was more than happy to eliminate things like red cordial and "junk" food, although we really didn't eat a great deal of junk food.

The most difficult thing for me then, and even now, was coming to terms with the natural food chemicals that seemed to be in just about every fresh fruit and vegetable imaginable. In our early days of the failsafe diet, I went through a very real period of mourning. I mourned the fact that my son could no longer eat many of the fresh fruits and vegetables that most people ate and took for granted in their daily lives. I also mourned the fact that I had to take away many of the things which he truly loved, such as bananas, cheese, burritos, and much more. I was concerned about his nutrition because this new way of eating did not leave him with very much, and his weight from the age of three had always been a concern to us.

I quickly discovered the importance of reading the labels on everything I bought at the supermarket. It is something that you have to be totally diligent about because what is considered "safe" one week could be considered "unsafe" the very next week. A simple thing like a change in the ingredients can make a huge difference between a "safe" product and an "unsafe" product. One mistake could be the difference between whether the diet was successful or not.

In the beginning we made many mistakes but with trial and error, and the guidance of Sue, we managed to make our way through this dietary minefield and come to some semblance of what could be called our new normality. A diet with very limited fresh fruit and vegetables in comparison with our past life of a diet, which consisted of no limits at all, when it came to "healthy" foods and fresh fruits and vegetables.

We implemented the failsafe diet (the elimination diet recommended by RPAH), and with Sue's guidance we managed to avoid a lot of the common mistakes and pitfalls. It is not an easy diet to do as a beginner and so to have her help in this was invaluable. Initially, the whole family went failsafe in order to support Nicholas. We remained failsafe for quite a long time but eventually we all went back to our normal diet, except of course for Nicholas.

We still don't eat chocolate or any of the stuff he really loves in front of him. We try to "escape" if we feel the urge to be a bit naughty as we are very aware of his feelings. Nicholas did show considerable improvement once we got past the dreadful withdrawal symptoms, however, the improvement although noticeable was not enough and so we continued in our search to get our lovely little boy back. The calm, gentle beautiful little boy that we once had and were not prepared to give up without a fight.

We noticed that Nicholas used to get particularly irritable just before meal times, so when Steve mentioned this to our paediatrician he told us to try an over the counter complex sugar called Poly-Joule. We left the surgery shaking our heads in exasperation and thinking "yeah right" that will work. We were extremely surprised to discover that it did in fact work and he was the best he'd been in a long time.

Nicholas had already been tested for diabetes because his paternal grandfather is an insulin dependant diabetic, and so are two of his cousins. The success of Poly-Joule prompted our paediatrician to put

Nicholas in hospital for two days and a night for some specialised fasting tests. Bloods and urine were taken at specific intervals over a 24hr period of total fasting except for water. At about ¾ of the way through the testing Nicholas started to have a "hypo" which resulted in an immediate halt to the tests.

The official results of these tests were that Nicholas had a very rare form of Hypoglycaemia called Ketotic Hypoglycaemia. We were then advised by our paediatrician to give Nicholas regular doses of Poly-Joule so that his sugar levels remained stable instead of up and down like a roller coaster. We then decided that the Ketotic Hypoglycaemia was the main cause of these dramatic mood swings and behaviours.

We continued with the failsafe diet as well as the Poly-Joule and again we saw some improvement, but once again it was not enough. The disgusting behaviours continued and I again contacted Sue in desperation. She suggested we implement 1,2,3 magic and very generously loaned us the video. We were very impressed with this simple technique so we decided to try it. The implementation of this behavioural technique saved our lives, and to this day, continues to play an important role in our lives. Once again, over time, we saw some improvement, and once again it still wasn't enough.

We again went back to our paediatrician who decided to put Nicholas on a one- week trial of Ritalin. By this stage we were desperate people and willing to try just about anything. At the end of the week we again contacted our Paediatrician and told him that it really didn't seem to have any effect on the behaviours. We now know that medication, like diet, requires fine-tuning, and adjustment to be effective. It was unfortunate that the paediatrician did not mention this to us at the time. We were, at this stage of our journey, very much in a period of trial and error.

He referred us to a visiting psychologist who said he'd like to hypnotise Nicholas and put Steve and I on medication. I decided this was somewhat extreme to say the least and informed our paediatrician that I would not be going back.

We resigned ourselves to the fact that this was pretty much as good as we could get, although things were still not good, and that is putting it mildly. The bed-wetting continued and so we were referred to a visiting neurologist who asked us to measure the capacity of Nicholas' urine output. We did this and were told that he definitely should have the capacity to be able to store his urine overnight. He also recommended the bell, pad and alarm system to try and rectify the problem.

Our paediatrician decided that Nicholas was too young for the bell, pad and alarm system, so he prescribed Minirin, a nasal spray medication that is designed to stop bedwetting. We were told to give him half the minimal dose for his age and weight and after only three doses Nicholas was rushed from school to hospital in an ambulance because he was having a seizure. Blood tests taken at the time showed low sodium but nothing more. Seizures were one of the known side effects of this drug but it was extremely rare. Nicholas was one of the rare ones.

During these years Nicholas' behaviour remained disgusting and it continued to be that way, but only at home. He never showed any of the violence at school, and never at the paediatrician, or our local GP. I would tell the doctors and teachers about his behaviour at home, and they would look at me as if I was some kind of neurotic woman. I began to feel as though I was from another planet. I also began to doubt my skills as a parent.

Relationships in our house were strained to say the least. There were times when Steve felt like leaving, and there were times when I felt the same way. Fortunately, we never both felt this way at the same

time. I had many desperate teary phone calls to Sue during this time and several similar desperate calls to our paediatrician. I enquired about respite care because I felt I desperately needed a break. As a Defence Force family we were completely on our own with no extended family for support.

Relationships between Nicholas and our two teenagers were also strained. My eldest daughter wanted to leave home because things were so bad and so desperate, and she'd had about as much as she could handle. My eldest son just couldn't stand Nicholas and every time he was near him he would pinch, prod, poke, or annoy him in some way. I would never catch him doing it but I would always catch Nicholas retaliating and that would result in immediate time out for Nicholas.

In those days Nicholas had such dreadful behaviour that I made the mistake of blaming him whether it was his fault or not. It took me a number of years to catch on to what big brother was doing. I remember one occasion where things got so desperate that I went back to our GP and asked him what we should do. We had been going to our aediatrician for over two years and still did not have the result we desperately needed.

Our GP gave me this piece of very important advice. He said, "love this child, he is not doing this on purpose, no child ever wants to be like this". I have remembered this piece of advice and over the years it has helped to keep me going. I kept telling myself when things got rough that it was not deliberate, but that these behaviours were uncontrollable.

Time out and behaviour management strategies were effective up to a point, but Nicholas would never go to his room voluntarily. He always had to be carried there, kicking and screaming. I lost count of how many times he broke my watchband in the ensuing struggle to get him up two flights of stairs to his room. The older he got, the bigger and stronger he became, which made him much more difficult for me to deal with. He was super strong when he was in full tantrum mode and I started to have real concerns about how I would manage him, as he got older.

The years of difficulty and stress really took a toll on us as a family. My enquiries into respite care led to a dead end because there was none available to us in Darwin at that time. I had reached desperation and was seriously considering fostering Nicholas out because I was reaching the point where I was afraid that I might lose control one day and hurt him. At that stage the only thing that stopped me was my love for my son, and the determination I had to keep going, and to keep trying, and my unwillingness to give up. I felt that if his own mother couldn't deal with him, then who could?

I used to suffer badly from hormonal, monthly mood swings with every menstrual cycle so I made the decision to have a hysterectomy. I felt that if I was in one of my "moods" at the same time Nicholas was having one of his violent tantrums, that this was a combination, which was destined to end in disaster.

My GP was supportive of my decision because I'd had four children, two girls and two boys, I had just turned forty, and I definitely did not want any more children. My hysterectomy was never considered to be a drastic measure on my part; it was simply necessary for me to survive. It was, for me, the best thing I could have done, and I have no regrets about that what so ever.

Nicholas in the preschool year was never disruptive or badly behaved in that environment. He did not join in very much with the other children, particularly in singing or dancing, or anything where he had to really let himself go and have fun. He was always very stiff and controlled. I remember seeing his teacher once grab both his hands and physically move his arms to do the actions for a song they were singing up

on stage. He hated it. He showed very little in the way of emotions, he very rarely smiled, and was very rarely spontaneous with anything, both in conversation, and in the form of gestures. He had a marked delay in his speech and I was forever explaining to people that if he did not answer a question straight away, he was not being rude; it simply took a while for him to process his thoughts.

In his first year at school he was fortunate to have a teacher who was very supportive and who also had a son with ADD. She asked me if Nicholas had ADD and I said no, our paediatrician had never even mentioned this as a possibility. Nicholas has always been an excellent reader, and very good at maths. His writing however, was very poor. It was very difficult to read and I was worried at one stage that he might have been dyslexic. He wrote a lot of his letters and numerals backwards or like the mirror image. He never completed any of his written work. In the first year of school this was not too much of a concern, and on his report it was written that he is a good, well-behaved little boy who daydreams. His teacher suspected processing problems of some sort and so it was recommended that we take him for hearing and eye tests, both of which came back saying that everything was fine.

In his second year of school his teacher had trouble getting him to stay on task. She tried keeping him in at lunchtime; but he didn't seem to care, and still did not complete his work. I mentioned his inability to stay on task and complete his work to our paediatrician. He was not overly concerned because Nicholas was so good at reading and maths. Nicholas became very clever at covering up his weaknesses.

At the end of his second year of school, our third year in Darwin, we were offered a posting to Sydney. We thought long and hard about accepting this posting because our eldest daughter had just completed year eleven, which would make this move a particularly difficult one for her. In the end we decided to accept the posting because we felt that in Sydney we would have access to a greater number of experienced professionals. We pretty much thought that if we had no luck in Sydney with Nicholas then this was perhaps as good as it was ever going to be.

We were referred to a very experienced paediatrician in Sydney who listened to what we had to say and gave us two questionnaires to be filled out and returned. One was a parent questionnaire, and the other was a teacher questionnaire. The result of these questionnaires was that Nicholas had, in her opinion, ADHD. Our paediatrician felt that Nicholas was not bad enough to require medication even although the disgusting behaviours continued.

Once again, I had to explain to yet another paediatrician that these behaviours were only ever exclusive to us at home. I began to get the feeling that we were being perceived as having some sort of bad home life that was causing these behaviours. My gut feeling was and still is, that two things caused these behaviours. One was diet related, and the other was frustration from learning difficulties at school. I learned very early that if I allowed Nicholas to digress from the failsafe diet that we were in for a very rough ride, always with violent behaviour. School was something that I was unsure about until we started to have huge battles over homework.

A month after arriving in Sydney, Nicholas' behaviour became worse. We put this down to the fact that we had just moved, he was missing his friends from Darwin, and all the stresses and strains associated with changing schools etc. We felt sure that with the passage of time things would improve. They did not. He started punching, head butting, kicking and screaming. When he was sent to time out he kicked a hole in the wall. This became a common occurrence.

After one such session I phoned our paediatrician in tears and said that I couldn't do this for much longer. I tried increasing the Poly-Joule and this seemed to have no effect. Our paediatrician decided to admit Nicholas to hospital and re do the testing for hypoglycaemia. The result of this was that Nicholas had now outgrown the hypoglycaemia, which we were originally told he would outgrow at around the age of nine. The decision was made to stop giving him the Poly-Joule.

We were then referred to the enuresis clinic at Westmead Children's Hospital to try and address the bedwetting. Nicholas was 7½ by this stage. The specialist that we saw recommended the bell, pad and alarm system. We had great success with this method and within three nights Nicholas was dry for the first time in his life. He has never wet the bed since.

Prior to leaving Darwin, Nicholas' eyes became very sensitive to all kinds of light from different sources including, sunlight, and computer screens. He had a CT scan to rule out any nasties. In Sydney he was referred to the eye clinic at Westmead Children's Hospital where we were prescribed two different types of eye drops for viral conjunctivitis. The eye specialist was very good and when I explained Nicholas' sensitivity to foods he prescribed preservative free eye drops. The viral conjunctivitis was cured, however the light sensitivity remains.

Our paediatrician told me that she believed only 4% of children were affected by food intolerances and so I began to educate her on this matter. At every visit I would tell her "we had pizza the other night, I let Nicholas off his diet and he went totally off the planet". Another time we had Chinese take away as a treat for Elise's birthday, (something we hadn't had for years), I let Nicholas off his diet and within minutes of eating it he had thrown a major tantrum and broke one of our kitchen chairs. After two weeks of swimming at school, on a Saturday at home, he was told "no" to something and he broke a solid wooden door on our entertainment unit.

Our paediatrician always listened to me but I always felt that I was still being perceived as some kind of neurotic woman who was speaking a strange language that no one else could understand. I phoned her one day in tears after one of these episodes and said that I was afraid that I might hurt him if things didn't improve. She told me she could arrange for respite care if I needed it. After that phone call, at every visit, Nicholas was asked to take off all his clothes with the exception of his underpants. He was checked thoroughly from top to toe. I know that these children are considered "at risk of abuse" and I realise how close I have come to hurting this child on a number of occasions, but I have to say that this was one of the most humiliating experiences I've ever had to deal with.

At this point, I started asking questions like "who protects the parents?" It seemed that it was okay for Nicholas to kick, punch and head butt me, but it was not okay if I lost my temper one day and hurt him.

I remember sending him to time out on one occasion and I was bending down holding one leg to remove his shoes. He swung around with the other leg and kicked my nose. On another occasion he threatened to break my glasses. Another time, he told me he was going to break my arm and he kicked me so hard in the forearm that I actually thought he did. I went to our local GP who said that it wasn't broken but that the deep muscle tissue was badly bruised.

There are other instances where he has kicked and bruised my legs, and these have been recorded on my medical documents. These dramatic violent outbursts were always followed by periods of remorse where Nicholas would come to me crying and feeling bad about whatever it was that he had done. I always took full advantage of these times and we would sit down on the couch and have a cuddle and

talk about it. These times actually reinforced to him, that we did still love him very much, and they reinforced to us that he truly didn't want to be the way he was. Nicholas behaviour continued its decline. Who would have thought that this was possible? He spent a lot of time in his room in time out. He would throw a tantrum for no apparent reason. He would kick, punch, and head butt. All it would take was for us to look at him in the wrong way, whatever the wrong way was, or to tell him "no". It got to the point where every time he was sent to time out, he had to be physically restrained otherwise there would be another hole kicked in the wall.

Often it would take 20 to 30 minutes for him to calm down. At times I would have to lie on top of him on the floor to restrain his arms and legs. He was always very strong during these episodes and he could easily lift me off the floor with his legs. If I let go to steady myself then he would be free to kick, punch and head butt.

Our paediatrician referred us to the Department of Nutrition and Dietetics at Westmead Children's Hospital. We were concerned whether Nicholas' very limited diet was adequate on a long-term basis given that he had now been failsafe for four years.

We had to measure, weigh and record everything he ate and drank over a three-day period. This included his medication and brand names of the food that he was fed. This information was entered into a computer and analysed, the end result being that with a few minor modifications his diet was not ideal, but adequate.

Moving to Sydney brought with it some complications that we weren't expecting. Brumby's bread, which we took for granted in Darwin was no longer easily accessible. Our failsafe sausages were hard to come by. I bought a bread maker but Nicholas did not like the bread we made. I found commercially available failsafe bread but Nicholas did not like that either.

I decided to let him try Helga's bread because he liked it, and remembering that our paediatrician believed only 4% of children were food intolerant, I thought I'd give it a go. Nicholas' behaviour got worse over a period of time so we made the decision to get the bread that we knew was safe and that we knew he liked. We decided to make the effort and do the one hour drive to the closest Brumby's bread shop.

He started to eat his school lunch again. Prior to this he was throwing it in the bin. We knew this because we happened to be at school one day and actually caught him doing it. Sausages were another problem. I had asked my local butcher to make up a special batch to a recipe out of Fed Up. He assured me there were no preservatives or additives in them. I was not totally convinced about this, so we again made the decision to travel to a butcher that we know we can trust. Unfortunately this was in the opposite direction to Brumby's.

Our paediatrician decided to refer us to a psychologist for a behavioural assessment with a view to using medication. The referral stated that in her opinion the mother was maternally depressed. I was pretty annoyed about that to begin with but after some thought I decided she was right. Who wouldn't be? Given the number of years and the many stresses we endured during this journey. At this stage she still felt that Nicholas wasn't bad enough to need medication.

We had the assessment and the psychologist initially thought that he had Aspergers Syndrome. She did a questionnaire with us and decided that he did not meet the criteria. However she did recommend

medication, even if only as a temporary basis, to help restore very fragile family relationships. An anti depressant was also recommended and because of Nicholas' delayed speech she asked that we see a speech pathologist. Our paediatrician decided against an anti depressant for Nicholas but agreed to try him on Dexamphetamine. Nicholas started taking Dexamphetamine in July 2001.

Nicholas did not do well on Dexamphetamine. He became very teary and emotional, more so than usual. He lost weight more rapidly, which was not good as he was under weight to begin with. He also had a lot of trouble getting to sleep at night; often he would get out of bed and play with toys late at night, in the dark, before falling asleep out of sheer exhaustion.

We persevered with Dexamphetamine for a while because we wanted to give it a fair go and also because we noticed that Nicholas' written work had improved dramatically with his homework. Prior to medication homework was like a battleground. He would sit for hours and write three words, some days he would write nothing at all. He would now complete all of his homework and sometimes even illustrate his stories.

In the end, the weight loss, lack of sleep and the emotional ups and downs just weren't worth it so we asked our paediatrician if we could try him on Ritalin. I had heard of some excellent results with Ritalin and I wanted to give it a try. Our paediatrician was somewhat reluctant to make the change because we were finally booked in, at my request, to the Immunology Department at Westmead Children's Hospital, to do the double blind capsule challenges. She did not want to make any unnecessary changes at this stage.

I had seen such an improvement in Nicholas' written work with the Dexamphetamine, and also glimpses of a lovely little boy, in between the nasty tantrums, that I decided to stand my ground on this issue. We started the Ritalin in November 2001 and after a couple of "settling in" weeks Nicholas started to improve out of sight. A month later at our next visit to our paediatrician, Nicholas' weight had remained the same. This was a good sign because it meant he had not lost any more weight. He had started to sleep much better at night and the emotional ups and downs that he experienced with the Dexamphetamine seemed much less once he started taking the Ritalin.

Our paediatrician recommended that Nicholas should only take Ritalin during the school week, never on weekends or during school holidays. This has proven to be very effective.

At the same time we were referred to a speech pathologist that also thought that Nicholas had Aspergers Syndrome. In September 2001 she did a language assessment that showed that Nicholas has high-level receptive and expressive language problems in the areas of semantics, pragmatics, auditory processing and verbal reasoning. He relies on visual information when listening to instructions, and finds listening alone, without pictures, more challenging. He has poor semantic organisation, including weak word finding skills. Verbal reasoning and critical thinking in the form of problem solving is also a major area of weakness.

The speech pathologist still felt that Aspergers Syndrome was a consideration and recommended that we see another psychologist, one who is very well known, and who specialises in the Autism Spectrum Disorders.

We saw this psychologist who also thought that Aspergers played a part in all of this. He did the Aspergers questionnaire with us and decided that Nicholas did not meet the Aspergers criteria. However,

he phoned me a couple of hours later and said he'd had a rethink after reviewing the results. He now felt that Nicholas did have features of Aspergers Disorder. Nicholas has now been diagnosed as having a variety of developmental disorders. These include ADHD, high-level language impairment, and features of Aspergers' Disorder.

We implemented some anger management strategies, and learned other ways of saying "no". We re-trained ourselves to say, "not right now, maybe later" instead of using "no" as an answer; this strategy is simple but very effective. Other strategies included the use of social stories. These are stories that Nicholas wrote with the help of the psychologist about what he can do when he feels angry. We also used many types of small rewards to reinforce good behaviour.

Our psychologist report stated that Nicholas required Integration Support in the classroom to assist attention, on task behaviour, to adapt tasks, and to specifically implement social, communication, and empathy programs. This report assisted the school in obtaining Government funding to provide some extra assistance for Nicholas in the classroom.

We have been very fortunate to have a school that is supportive of special needs children. They have placed Nicholas in a class with a girl in a wheelchair who has an aide on a full time basis. When the aide is not required to assist the girl, she is free to give Nicholas whatever assistance he needs. He has an integration teacher who assists him for one hour each week, one on one, and he also has access to other integration teachers on an as needs basis. He has visits at least once a term at school, from both his psychologist and speech pathologist, who will jointly monitor his progress over the coming years.

The double blind dietary capsule challenges were only ever done on weekends and during the Christmas school holidays. Remembering that Nicholas only takes Ritalin on school days to enable him to stay on task and complete his schoolwork. This enabled us to get a very clear result and record only the food related behaviours. It also enabled us to record the behaviours accurately without any other outside influences.

We began the double blind dietary capsule challenges at the beginning of December and they were completed at the end of February. The results were as I'd suspected. No great surprises. He is highly sensitive to MSG, calcium propionate, sodium benzoate, sodium metabisulphite, salicylates, antioxidants and food colourings tartrazine, sunset yellow, erythrosine and azorubine. It was a huge relief for us to finally have an official, clinical diagnosis from the immunologist. These results confirmed my suspicions in relation to food related behaviours.

Most challenges that he reacted to were with violent reactions such as kicking, punching, head butting, throwing things or ripping posters off the wall in his room. There were a couple of challenges where he reacted with babbling and increased hyperactivity.

It took me five years to find the courage to do these challenges and when we were almost finished them, Nicholas came to me, and said that he didn't want to do any more because he didn't want to be naughty. He realises that some foods exacerbate his oppositional behaviour. He also realises that some foods make him unwell.

We occasionally have burritos for dinner, which is one of his favourite foods. On these rare occasions I let him off the diet. He always has at least three or four, plain, with no filling, except for maybe a small amount of grated cheese. At bedtime when we are tucking him in and saying "goodnight" he often tells

us that he "doesn't feel well". In addition to this, and because of the additives and preservatives in the burritos, he becomes noticeably hyperactive.

Since Christmas 2001, Nicholas has undergone a complete transformation. Time outs are no longer a big part of his life. The delay in his speech is all but gone. He smiles, laughs and does things spontaneously, something he seldom did before. He comes home from school, takes his afternoon medication and sits straight down to do his homework with no prompting from me and no arguing from him. Homework is no longer the battleground that it once was. He completes all his written homework and pretty much all of his written work in class.

He is developing a wonderful sense of humour and is an absolute delight to be with. So far this year, he has earned three merit certificates at school. He was voted as a school representative council member for his class. He received a special smiley pencil award for sitting up straight and behaving beautifully during assembly. He was also Super Kid for the month of April, which earned him a Super Kid badge that entitles him to politely go to the front of the queue at the canteen. Unfortunately this was not very useful for him because he couldn't really buy much that is failsafe, however, it was great for his self-esteem and he was very proud of this achievement. He also got to have morning tea with the Principal. He was let off his diet for that special occasion and when he got home, I asked him what he ate. He said, "I can't remember, but it was fun".

I cannot put my finger on any one thing that we have done differently, for these wonderful changes that have taken place. After five years of the failsafe diet, almost five years of behaviour management in the form of 1,2,3 Magic, the final piece to our puzzle has been medication, in the form of Ritalin. It is my firm belief that no parent ever wants to medicate their child, especially one so young. We had spent the past five years exploring and implementing diet and behaviour management. During these years we saw some improvement but not enough for us to survive. Medication was our last option. In our case, we needed the multi-modal approach, and no one thing would work without the other. The combination of diet, behaviour management and medication was, and still is, the key to our success. Diet for us was not enough, however, I believe that without implementing the failsafe diet all those years ago, Nicholas would have needed a much higher dose of medication. I also believe that his developmental disorders, ADHD, high-level language impairment and features of Asperges Disorder would have been much greater. His behaviour was often so violent that I was convinced he would one day be in a juvenile prison, or worse.

In conclusion, all of Nicholas' violent behaviours and reactions were in my opinion, caused by two things, food intolerances and the frustrations associated with learning difficulties. The food intolerances are controlled with diet. Without diet, the violent behaviours return. Medication helps Nicholas to stay on task, which enables him to complete his schoolwork and homework. This helps to overcome the frustration associated with learning difficulties.

Regardless of whether or not Nicholas is taking medication, we know that if we allow him to break his diet, and we sometimes do on special occasions, we can expect a return of the violent behaviours. On these occasions behaviour management is still required.

We still have a long way to go in terms of monitoring Nicholas' education and assisting him with overcoming these learning difficulties. We are fully aware that there will be some rough patches as our son navigates his own path in life, but for now, the most important thing for us as a family, is to finally have our loving, gentle, caring, beautiful little boy back with us again. He is a pleasure to be with, and a

son to be truly proud of. Relationships during these past four months have started to heal and we have finally found the light at the end of a very long tunnel, something that for many years we thought we were never going to find.

I would like to thank the following people for their support and the individual roles they played in helping us to achieve our happy ending.

Paediatrician: Dr Ross Diplock – for his advice in trying diet before medication.

Author: Sue Dengate – for her continued support with helping us to navigate the dietary minefields, and for keeping us on track with her unfailing belief of foods and the way in which they affect behaviour.

Paediatrician: Dr Patricia McVeagh – for assisting us in the final stages of our journey, and the implementation of controlled medication.

Consultant Psychologist: Lizette Campbell – for her recommendations for speech therapy and medication.

Speech Pathologist: Philippa Greathead – for her continued support, her referral to psychologist Anthony Warren, and for her language assessment, which really brought home to us the many learning difficulties that Nicholas was experiencing.

Psychologist: Anthony Warren - for his continued support and for his report that was integral to obtaining Government funding for extra assistance in the classroom.

The Failsafe Discussion Group: This group of people primarily discuss the failsafe diet, but also discuss many other challenges faced by special needs families. Their wealth of information and support knows no bounds. I would not have survived these "challenging" years without these people. I have learned so much from this group and we are all still learning. Together, we can all make a difference, and we can all find that light at the end of the tunnel.

- Susan, June 2002

[150] Insomnia a major issue (April 2002)

I have been an insomniac since I was 16. From my mid 20s it has been a major issue in my life. I have lived on approximately four hours sleep a day. I have spent thousands of dollars in trying to find the answer. I have seen naturopaths, homeopaths, medical doctors, Chinese herbalists, acupuncturists. I have been to a sleep centre where they tried to teach me to sleep. I have tried every imaginable trick to try to sleep. For three years, I stopped drinking or eating anything with caffeine. I would drink warm milk before bed. I would take a run before bed. I would read a book before bed. Have a bath before bed. You name it, I have probably tried it. By the time I turned 30, I decided that I had to learn to accept my insomnia - 'this is as good as it gets' sort of thing. In the worst scenario I would read till all hours of the morning. Having said that, I had to also accept the fact that I was tired most of the time.

I had my son at the age of 31. He was a colicky baby, a terrible sleeper. He also had heartburn at night, which his ped attributed to the fact that my son still breast fed at night, up to the age of 25 months. I never understood the relationship between breastfeeding at night and heartburn, so continued doing it. My main resource and my inability to accept my ped's advise was due to my own travels to primitive cultures, where I saw babies and toddlers breastfeeding constantly; 24/7 days a week and these babies were NOT colicky, did not suffer heartburn. In fact, they seemed very happy, content, and rarely cried.

When they did cry, it was more of a whimper rather than the cries I hear in western society.

Being a 30 something Mum, I also was fully aware of what sort of Mum I wanted to be. I had clear visions of being a compassionate Mum; this entailed no spanking, no yelling, but rather validating feelings, finding alternatives whereby both of us would be happy, and in the worst scenario just accepting that my child and I would not always agree, but I would still respect this difference rather than fight it. My son's temperament, however, tested me to the core and I failed often in living my maternal visions. Yes, I have yelled at my son, yes I have spanked him (to date, three times - he is 2.5 years old and each time I think about it, I do cringe with disappointment with the evidence of my weaknesses). My son, from an early age was high need and wanted full on hands on care, was constantly on the breast, slow to unwind, wanted in-your-face attention, constantly in my arms. In a nutshell I found him draining, and highly strung. I remember when he was only five months old, having this real desire just to throw him across the room and the reality of my feelings shocked me to my core. I am by nature sensitive to other peoples feelings, gentle, gracious, etc. I took him to a sleep centre, where the staff tried to teach me to help my son to fall asleep on his own and all I kept thinking about was "seen this movie before". I thought I was going insane; my son took two hours to unwind before he would fall asleep and when he did, he would sleep only for one hour, waking up and then would demand the breast to go to sleep again. After the sleep centre experience with my son, I decided to go by my instincts; one thing I was sure about was that I would never let my son cry it out, no matter what. Part of my reasoning stemmed from 'what if he has the same problems as me? Maybe its genetics?' another real reason for me was 'he must be waking up for some reason?'...to my mind, it may be hard to fall asleep, but once asleep, a person wakes up for a reason...so I decided that if my son woke up every hour, I would just learn to live with that too and together we would get through it. I put up with it literally till my son was 25 months old and by that stage, I am sure the night nursing was more a habit rather than a real need, ie, whatever was causing the night waking as an infant/baby, no longer existed by the time he was a toddler.

He was a very active little boy, who seemed too busy to sit for any period of time. His thoughts also were busy, talking constantly without taking a breathe. As a result, he always looked like he was misbehaving because he seemed to have no physical self control, although he was very gentle, loving and extremely aware of the needs of others. But then, he would all of a sudden display vocal aggression, and physical aggression, seeming to get pleasure in hurting. I could not understand this Jekyll and Hyde personality.

Most people that I turned to, either suggested more discipline, in the forms of spanking or severe punishment. Others suggested that I was giving him too many sweets. Others suggested that I train him at home, for instance sitting with him for ten minutes today, then fifteen minutes tomorrow. Others suggested that my son and I were too attached and he was playing on my weaknesses. Others implied that I was not a consistent mother regarding discipline. But I saw my son for the person he was. I had these real glimpses of his real personality. I thought about taking him to a naturopath or a homeopath. I resisted though because my real fear was that his behaviour would become an issue in our life like my sleeping disorder became an issue in my life. Again, I turned to my own common sense here and decided that I preferred to accept the package rather than fight it all the time. Then I stumbled on your book at a health shop and bought it.

I have only read probably one quarter of your book. But the next day I eliminated wheat, dairy and all preservatives/additives. Within two days, the son that I only had glimpses of suddenly emerged for a period of five consecutive days ... and I suddenly found myself able to fall asleep in ten minutes. My son would still wake up, and I would still respond in the same manner, but again, I would be able to fall

asleep without any problems. Day six was the day that I cried. I have spent the better part of my adult life wanting to sleep and feeling tired. I have wasted years of my youth thinking about sleep. I am at times angry and at times relieved to just get out of the woods. I just can not believe that I no longer have to describe myself as an insomniac. My son now sleeps much better, but I have realized only today that I think he is also salicylate sensitive and probably so am I. Both of us, I realize now, demonstrate aggression for unknown reasons. I can control that side of me because I am an adult, but my son is more honest with himself and his world.

Today, my son was pushed over the edge, so tomorrow, I am getting stricter with salicylate and amine side of the challenges - but I feel good about it. I know where I am going now, I have direction and that my undisciplined boy does not need more discipline. In fact in the five days that he was his real self, I had absolutely no problems. There was such harmony between us that my heart upon just writing that, is swelling up ... more importantly, it has nothing to do with my inadequacies as a mother, or my son's personality. It is all external to the problem. This makes me feel more confident than ever ...

I wanted to tell you my story and to thank you from the bottom of my heart. If only someone had told me at 16 what was causing my insomnia ... but then, I also know that my insomnia stopped me from resorting to ignoring my son's cries and if I was not going to find the motive of his behaviour and cries, I was just going to accept this boy as he was ... for better or worse ...

I have learned one thing in life and that is, that it is the worse situations that are character building and through them I can choose the path I decide to tread ... I am just happy that you wrote your book 'Fed up' and I am just happy that I chose to read it ... thanking you very very much ...

- Ingrid, Melbourne

[139] 282: Bread preservative-induced ADHD (December 2001)

I have felt compelled to write to you for some time now to let you know how successful Failsafe foods have been in our home. Our daughter, Courtney, now aged 7, was diagnosed with ADHD at the age of 5. I was not convinced that the process of this diagnosis was exactly scientific so I decided to do some reading.

I read "Different Kids" and embarked on the elimination diet with the help of a dietician. We had tremendous results. Courtney's teachers were openly amazed at the change in her behaviour. With their support we started the challenges - no noticeable reaction to salicylates or amines, but a very strong reaction to the bread preservative (282) which gradually built up over a 5 day period. Once the challenge was stopped, it took 2 weeks for withdrawal. Courtney's behaviour was extremely aggressive and impulsive and withdrawal resulted in lethargy and stomach aches. We have not been able to do any further challenges as Courtney was jeopardising the very fragile friendships she had begun to make. We will need to wait for the Christmas holidays before proceeding any further.

I have only recently read "Fed Up" and I was amazed to learn just how many children react to 282. Our dietician was surprised at our results. I am now a bit of a campaigner against food additives and recommend your books to anyone willing to listen! Our heartfelt thanks to you for helping us rediscover the lovely little girl we knew as a baby without the need for medication. - Heather - by email

[127] Camphor laurel and Jesse (this is what parents go through) (November 2001)

8th October 2001.

Department of Education and Training

Northern NSW

Dear Sir,

I refer to ... our son Jesse.

Jesse suffers from Multiple Chemical Intolerance (MCI). This can affect his skin, behaviour and general health. Jesse is most effected by cleaning products, food chemicals (colours, preservatives and flavour enhancers), strong odours and certain plants. His reaction can be dramatic and instantaneous, or can build up over time.

Jesse is presently under the care of Paediatricians Dr M from Lismore and Dr Velencia Soutter from the Royal Prince Alfred Hospital in Sydney. He is on the RPA elimination diet under the control of dietitians Anne Swain from the RPA and N from the Lismore Base Hospital. He has been on this for some time and the change in his health and behaviour has been quite dramatic. However, recently Jesse's health and behaviour have deteriorated which has coincided with camphor laurel chips being placed at his school. I was made aware of the camphor chips after a spitting incident involving Jesse.

On Wednesday the 12th September X from the school telephoned my wife and said that 'Jesse had spat on another child, was behaving disgustingly and swearing and that he was with him now and what would she like done with him'. X was aggressive and abrupt. The exact events as to what happened are unclear as there have been a number of different stories but apparently Jesse and another kindergarten child were in the toilets after the morning assembly. The other boy told his teacher that Jesse had spat on him. A teacher's Aid was sent to retrieve Jesse from his classroom where he hid under a table. Jesse's teacher was also in the class. Jesse called the Aid a 'fat girl' (she isn't fat) and was then taken to X and later to the Principal.

I went out to the school at 11am and was approach on the veranda of the classroom by Y. She asked if I was looking for Jesse and said that he was in the office and that he had spat on one of her children and was swearing at teachers. She was obviously rude and abrupt. Parents and children were also present undertaking 'groups' and a young girl told us that Jesse was sitting at his desk, which he was. I attempted to speak to X but he was not in his office. Later I returned to the school to have lunch with Jesse as it was school open day.

We sat down in the assembly area where I noticed the strong camphor smell. I moved Jesse as he was becoming agitated and red faced. X then approached me in the playground area. I was uncomfortable speaking to X as there were many parents and children listening. I told X that Jesse's behaviour in the morning was unacceptable but I thought the problem was caused by the strong camphor smell as the dumping of the chips coincided with Jesse's behaviour and health deteriorating. His teacher had also made the link with the camphor when the trees were initially trimmed.

Prior to this incident the school had not been in contact regarding our son. We had made visits to the Principal on two occasions at which time we gave him letters from the Paediatrician and Dietitian (attached) and gave him a personal letter (attached) and information on MCI. This was done on the

suggestion of the Infants Department. We did have regular contact with Jesse's teacher throughout the year. She was fully aware of Jesse's condition and was fully supportive. She had educated her class/parents about how food/chemicals can effect him. She even banned cleaning products from the class that she had noticed effected him. Jesse seemed to be progressing well. He was very popular having friends from kinder to year 4. He was the second child in kindergarten to be awarded the Principal's Award (which requires 25 Merit Certificates). However, things changed dramatically in a very short period of time when the Principal became involved. The staff's attitude changed from support to contempt and aggression. Those who showed sympathy were isolated. There seemed to be a constant vigil on our son and a concerted effort to discredit him. In the last month Jesse became obviously agitated and jittery at school, and became unwell. We were requested by our Paediatrician to remove Jesse from this environment immediately.

I decided to contact Jesse's preschool. They informed me that the behaviour Jesse was displaying at Z School was not displayed at his preschool. I also contacted the Northern Rivers Department of Health regarding the camphor. I was put in contact with their Toxicology Unit in Sydney who informed me that camphor laurel has highly volatile oils and is probably not an appropriate substance to have chipped around a school as it is toxic. I also telephoned Far North Coast Weeds who also said the same thing. As did the Southern Cross University who are about to commence a study on the effects of camphor laurel on humans. I also contacted the Department of Agriculture who had a similar opinion.

The next day I telephoned the Principal regarding Jesse's behaviour and the camphor laurel chips. I was met with instant hostility, impugnation and scoff. P stated that it would be impossible for Jesse to react to a natural occurring substance such as camphor laurel and that my family is using this as an excuse for disgusting and unacceptable behaviour.

P continually stated that he and the staff believe I am 'obstructional' in this matter and that complaints had been made. But when questioned as to how he would only comment that I am being 'obstructional now'. He said that I have made ridiculous demands saying that he would not remove the camphor chips for one child. He also stated that I was critical of staff, in particular X and Y (I have only spoken to each once). P would not listen to the fact that I told David I supported his actions in handling the spitting incident. However, I was critical of the fact that the matter was discussed on the veranda of a classroom during 'groups' and in the playground in front of other parents and children on open day and very much in public. P's comment was that his school is a 'very open school'. Jesse may only be 6 but I feel that he and myself have some rights to privacy.

Also, P refused to acknowledge that I attended the school the previous morning and spoke to Y and attempted to see X after he had telephoned my wife. He continually stated that I did not arrive at the school until 1pm. I told him that I was at the school at 11am and later at 1pm for school open day and it was during this visit that I noticed the strong smell of camphor. But P simply refused to acknowledge that I was present at the school at 11am which is bewildering seeing that I spoke to several people and was seen by many more. Another child even asked Jesse if he would spit on him.

Furthermore, P was not interested in what the preschool said about Jesse. He just stated that I was abusing X. When I said I wasn't even speaking about X he said 'you are now abusing Y. I kept saying 'do you want to hear what the preschool said'. P said he was 'not interested, you are abusing my teachers, I am terminating this conversation' and hung up. The whole conversation bordered on the absurd and the ridiculous, a disgraceful imputation on a man charged with the responsibility of 520 children. Further, he

seemed to enjoy a certain amount of satisfaction and gratitude from destroying the confidence and reputation of a 6 year old child.

P has now deliberately and maliciously misrepresented the contents of our conversation in an attempt to discredit our son and family. He has made the matter the topic of conversation throughout the school by both parents and teachers. He has made a young child the scapegoat of his obvious inability to understand what is normal and abnormal behaviour. P and some of his staff appear to have obvious personal issues that should not be aired in the school environment.

P has scorned and scoffed at medical advice and has shown a total disregard for the safety of a child with a disability. He has shown discrimination and prejudice towards a child and has shown a blatant disregard for confidentiality and privacy. He has been bordering on slanderous and has humiliated and embarrassed a child because of that child's disability. He has shown an absolute lack of care for a child with a disability and has viewed this disability with disdain. I will refrain from commenting on the innuendo made about our parenting skills and only say that on a number of occasions we were told that it is okay to slap your child.

My family has been associated with the Z School for over 30 years. My wife and her siblings attended the school in 1960s and 1970s and our older children in the early 1990s. It is most disheartening that this association may end because of the prejudices and ignorance of the Principal. P's attitude and actions has not only drastically changed the life of our son but has changed the life of our whole family. My wife will have to cease work to home tutor Jesse under the Distance Education programme. Jesse's Paediatrician believes that Jesse will be better off being home schooled in a more sympathetic and understanding environment as he is displaying anxiety and stress – a direct consequence of the taunts and attitude of P.

I would appreciate your comments regarding this matter and ask as to what avenues (by way of an official apology by P and legal action) are available in these circumstances. There appear to be very serious matters relating to child safety, care and welfare, privacy, confidentiality, discrimination and defamation issues that need to be addressed. P is of the belief that he is beyond reproach because of his position. Should you require any further information regarding this matter do not hesitate to contact me on ...

Yours Faithfully,

David & Kim.

[126] Joe was "broken" from the time he was born (September 2001)

Julie is a police prosecutor and a mother of nearly 4 children. When she saw what food did to her three year old son, she became an enthusiastic supporter of failsafe and a co-founder of the new Brisbane food intolerance support group.

Joseph gets up from his afternoon tea and goes and whispers to his father Steve. He wants to know if it's okay to eat the marshmallows in his bowl. He's four and he probably can't pronounce food intolerance but he knows how bad it makes him feel if he eats things he shouldn't. His mother Julie says if they hadn't found out what was wrong with Joseph when they did he would probably be in jail for murder now.

She says Joe was "broken" from the time he was born and it wasn't until he was diagnosed with food intolerance at three and a half that a solution seemed possible for the little boy. As well as being a mother of three and pregnant with number four, Julie is also a part-time Police Sergeant working as police prosecutor in Court 1 in Brisbane.

She's so concerned about the link between behaviour and food intolerance that she's undertaking independent study on the food effects on juvenile criminality as part of her Masters Degree in Justice/Law at QUT. Steve isn't sure that food turns kids into criminals but he does know what food can do to his son.

"He was like a bear with a sore head - that's how he was. He was aggressive to other kids and defiant to adults. Now he's responsive, his speech has improved, and his concentration span has improved.

"He can sit down and watch something on TV. He can sit down and do a puzzle or colour in."

Joseph's problem lies primarily with food colours and flavouring and reactions range from aggression to asthma. With careful shopping and label reading Joseph can enjoy and happy and normal life without too much imposition on the rest of the family.

There have been slip-ups on the way. The family dyed eggs for Easter not realising that Joseph's sensitivity would extend to touch. Joseph blames his mum for that asthma attack. The solution for Joseph came when a paediatrician suggested that Julie might like to read a book called "Fed Up" by Sue Dengate. She consulted a dietitian and put Joseph on an elimination diet. His life changed.

Julie is urging people who suspect food might affecting their children's behaviour to attend a presentation by Sue Dengate ... - Julie's story (above) appeared on page 3 of the September edition of "Kids in Brisbane", resulting in a capacity crowd of nearly 200 for my presentation at Zillmere PCYC.

[111] Cut back on fruit (August 2001)

"Since purchasing your book "Fed Up" and reading through it last week I immediately cut back my 5 yo daughter's intake of fruit to approx. one quarter of what she would normally have. By the weekend we already saw huge changes in our girl. Her behaviour was more evened out (not so many HUGE highs and lows) and just more sensible, obliging, less aggressive and defiant - just a much more pleasant girl altogether." - NZ

[101] "What an experience that was! - irritable bowel, sneaky poos, restless legs, eczema, behaviour" (August 2001)

I contacted a dietitian through our Base hospital and with their help we managed to get through the Elimination Diet. What an experience that was! My youngest son, Tim, who is three in April, had been given an uncertain diagnosis of "Irritable Bowel???" by the pediatrician. We were told to take him off lactose, sugar and soy and reduce the fruit intake. That has little effect on his symptoms. So, Brandon (5 yo), Tim and I embarked on the Elimination Diet. My husband did not want to be involved in the "witchcraft" as he called it!

I was on the phone to the dietitian after 36 hours because Brandon, who had behaviour problems, had got 10 times worse where behaviour was concerned and had come out in an eczema-type rash on his torso and upper arms. I felt he was reacting to the soy or the cashew paste (but probably the soy) as

these were the only new additions to our diet. I was told to "persevere, that reactions usually got worse before they improved". After 5 days I had a great improvement in my mucous volume and felt better than I had in 5 years. After 4 weeks we had seen limited improvement in Brandon's behaviour and no improvement in Tim's symptoms so decided to eliminate wheat as well.

The results were quite amazing. After 2 weeks off wheat I realized my restless legs were no longer worrying me and Brandon's sneaky poos had ceased to be a problem. Tim's symptoms improved but his bowel motions never really came back to normal. We did the wheat challenge first. Brandon was OK for 5 days but on the 6th day he obviously went over the threshold and took a full week to recover. He reacted with restless legs (which I have since discovered can happen after even a few cracker biscuits) and Tim also had a worsening of his diarrhea.

The dairy challenge was interesting - my mucous symptoms were worse but Brandon improved in behaviour almost overnight and after 3 days the eczema was gone! So I was right about the soy after all.

... Brandon reacted to salicylates as I suspected he would, I didn't. The amine challenge was a disaster! We should never both have done that at the same time. Brandon and I both reacted and our symptoms were the same and severe - aggressive behaviour with a lack of self-control, depression etc. It was like world war three in our house by the end of the week and both of us took at least a week to recover. I have read in a number of places that if we react to amines then we probably react to other additives so we have not continued with separate challenges for these. We just avoid them.

Initially I was daunted by the difficulties I faced accessing the foods we need but eventually as I learn where in the supermarket, health food store etc to find things life has become much easier ... I remember a quote in "Fed Up" from a lady who said she spent more time in the kitchen but less time disciplining the children and I have found that to be absolutely true. It is now just the way we live. I find the most difficult thing now is other people's reactions to our diet. Some of our friends though come to our place with 7UP and kettle chips to share. Thankfully my husband is now more supportive and even grudgingly admits that he is probably reacting to some foods himself. So, Sue we have come a long way in these last 6 months. I hope it makes you proud to know that your writing of "Fed Up" has contributed to such an improvement in our lives. - Qld

[088] Violent monster stage (October 2000)

Please add me to your newsletter list ... we are up to week 2 of the elimination diet. We slipped up by keeping the pink marshmallows in the house. My son aged 8 found them and ate every one and now I am in day 2 of the violent monster stage !!! Thank you so much, I look forward to getting my son back one day soon. Thanks for your help and for being there when no-one else is - unless they have a drug of some sort that is ! - reader, New Zealand

[055] "If you think it's difficult in Australia .." (July 2000)

I am an American living in Australia who, by chance, saw a report about the "Elimination Diet" and its positive effect on children with aggressive behavior and ADD. At the end of the report they gave the name of your book "Fed Up", which I bought and have read from cover to cover.

How I wish I had been able to have this information when my children were growing up, specially my son, who was told by teachers constantly that he was lazy and what a shame that was because he was so smart. He was finally tested and diagnosed to have an ADD when he was 18 years old. This test was done

only at our insistence and expense because school officials insisted there was nothing wrong with him. He was offered Ritalin, which he refused to take. Needless to say he failed when he decided to go to College. He is now married and his oldest son (now three years old) is already showing some of the behavior my son showed at that age. I could give many examples about family members with allergy, either environmental or food related. In other words, I am convinced that many of us would benefit from this diet. If you think it's difficult to get someone to listen about it in Australia, you have no idea how hard it is to get someone to listen about it in the U.S. - reader, email

[049] "I would once have thought that this was coincidence" - 8 year-old boy with ODD (June 2000)

I have just read your book "Fed Up" and it makes a lot of sense. My husband and I have an 8 year old boy and 6 year old daughter. After reading the book, we realise that our son has oppositional defiance. I spoke to his teacher yesterday. She could not understand that he would behave in any sort of aggressive way or be so defiant at home. She said that he only needs to be told once to do something, never has any problems in class or at school ... We took the family to a child psychiatry service because we were so concerned about our son's behaviour and not being able to discipline him, and also because he has many irrational fears. We had help to get him used to new situations and heights but on a number of occasions were told that his behaviour (when seen by the staff) was "normal sibling rivalry" and by adjusting our ways of dealing with situations we could help change the behaviour. It did help a little. Two weeks ago I decided that we would cut out additives. The Sunday night before I gave the children the remaining packets of Twisties ... of course our son was ballistic within a short period of time. (We never have cordial or fizzy drinks in the house and rarely consume icecream or desserts at home). We had a good week, with no incidents worth mentioning. I did not have to ask him to settle down while he was at swimming lessons! On Sunday I was planning to implement the diet the next day so let the children have a sausage with tomato sauce and bought bread (I have been making my own for a number of years now); also had a small piece of iced sponge cake and a small amount of trifle. Our son went ballistic again and was told to go to room and calm down. He was "escorted" to his room, uncooperative, yelling abuse, head butting, punching, screaming, banging walls – uncontrollable. Next morning he was up bright and early and happy as a bird. In fact in the last nearly two weeks he has been up before my husband leaves for work at 7.00 am whereas before I had to wake him at 7.30 am. He is now getting ready quickly and is very happy – he used to be such a grump that you couldn't look sideways at him. And this is not quite two weeks! However, last night I cooked a casserole and did all the wrong things. I added tomato paste and soy sauce. The children also had orange juice. This morning our son had his breakfast OK but from then on dawdled and fidgeted and played and was only just ready, with my help, in time to leave for the bus. He was surly and sulky at the bus stop and would not join us but kept kicking a signpost. I would once have thought that this was coincidence but after reading your book cannot think that it is anything but food related. Thank you for showing us that there are ways to help our children. We will give it a proper trial. Thank you once again for showing us a light! - reader, NSW

[039] "They said we would be wasting our time" using diet for ADHD and ODD (May 2000)

My eight year old son was recently diagnosed ADHD and ODD by three different doctors. All three doctors said we would be wasting our time altering his diet and that the only thing to do was to prescribe drugs.

We didn't want to put him on drugs but my wife and I were at our wits end, our son was becoming more and more of a handful, I must admit I was about to give up and take the doctors' advice.

We bought your book "Fed Up" and started the diet. My God, the improvement was almost instant. He changed from an aggressive and argumentative little creep to a loving and caring little boy almost immediately. My wife, myself, our other two children and most of all our son's teacher are amazed. We have stuck to the diet and there have been no hassles in the home or the classroom for several weeks. Although last weekend we took the kids out for the day and bought them each a bottle of Schweppes lemonade. Within half an hour our son was back to his aggressive old self ... learned a lesson there. He now realises that some things make him cranky and steers away from them, after all, he says he doesn't like being his angry self.

Sue, we don't know how to thank you. You have changed the lives of not only our family, but the other kids in our son's classroom, who I'm sure are as grateful as we are. - concerned father, ACT

[019] Room for improvement (October 1999)

I have two children, boys aged six and three. Last year we found the oldest (Christopher) quite difficult to control. He was unable to accept 'no', he was aggressive and his temper was quite short. This behaviour did not extend outside the house. Behaviour at school was marvellous and teachers could not speak highly enough of Christopher's behaviour. It was like there were two Christophers. My husband and I felt it was not going to get any better and to try to get some help before Christopher's behaviour got way out of control.

We spent approximately four months with a psychologist, using the triple p program. Christopher's behaviour turned right around. His behaviour now is so much better, though at times, I do believe there is room for improvement. While working a couple of weeks ago, I was speaking to a lady who has a son with food intolerance, she gave me a full run down. That afternoon I started reading your book (Fed Up). It took me a day and half to read it. It is fabulous. I have contacted a dietician and am seeing her in a week or so. - Mother of 2, QLD

[004] Daniel's story: severe colic and reflux (June 1999)

From the minute Daniel was born, he was a very unsettled baby. We went home on day three and I expected he would improve when my milk came in. I work as a midwife, so I had some idea of sleepless nights etc, but nothing had prepared me for a baby who screamed constantly when awake and slept very little. My mum said I had been a very colicky baby and my mother-in-law said my husband David had been an extremely colicky baby - so we presumed Daniel was the same.

After three doses of mastitis, I put Daniel on the bottle at five weeks of age. He was just as unsettled on formula as on breast milk. He continued to have several loose green bowel actions a day. The next day we left for the U.K. - my husband David was transferred over there for what was meant to be five weeks but turned into three months. I think ignorance is bliss, when I look back and see myself taking a screaming six week old baby half way across the world to live in a shoe box hotel room. In the U.K. Daniel continued to be very irritable and unsettled. He posited after every feed and only very occasionally vomited. The only place he was happy was in the bath, so we bathed him four times a day some days to keep him quiet. When I look back on my diary of this time, he began interrupting his feeds at about 8 weeks of age. A normal night out for tea (we had no cooking facilities in our room) would be David that would walk out on the pavement with a screaming Daniel while I ate and then we would swap. I remember feeling physically sick myself some nights, he would scream so much.

We visited a doctor for Daniel's immunisations and I told her of his constant screaming - she told me it was colic and that it would improve by three months of age. I started him on solids early in case he was hungry (rice cereal and tinned pumpkin) and changed to a formula for hungrier babies. He seemed better for a couple of days but then was just as bad.

When we arrived back in Australia I took Daniel to a local GP, the one I had seen as a child myself. Daniel was screaming and it was 11 am. This doctor gave me a lecture about colic (by this stage Daniel was four months old) and said, "how could there be anything wrong with a child that has such good weight gains?" I tried to explain that it was taking 1-2 hours to feed him a bottle, but he just gave me a lecture on midwives not making any better mothers. He threw a referral at me for a paediatrician on the way out the door (I think only to cover himself).

I tried making an appointment with the paediatrician, but, being Christmas, there were none available for another month. So we continued to battle on and tried Daniel on a soy formula which seemed to help for a while, but then he just went back to square one. He got worse with his feeds, arching his back. We would bang toys on his bottle to distract him. At this stage most nights he was sleeping though and I think that was the only way we survived. He continued to scream and whinge all day and I'm sure he was exhausted at night and that is why he slept. Despite all this he continued to gain weight and reach all his milestones. I lost weight rapidly and was lighter than before falling pregnant. We contemplated that he was just an attention-seeking baby because when we played on the floor, or took him somewhere different, with different toys, he was okay.

The feeding continued to get worse so two and a half months after seeing the GP, when Daniel was six months old I took him to a paediatrician. He immediately diagnosed reflux and oesophagitis (inflammation and ulceration of the oesophagus) and started Daniel on Ranitidine (Zantac) which reduced the acid in the stomach, to stop the 'heartburn' type pain. I will never forget what a relief it was to get a diagnosis; little did I know that this was only the start.

Daniel's feeds immediately improved on the Zantac but he continued to be very irritable and whiny between feeds. Three weeks later we started him on Prepulsid (Cisapride) which increases the rate of the stomach emptying, but it didn't seem to make a great deal of difference. We tried him on Nutramigen, in case he was cow's milk intolerant. It seems to help for a couple of weeks, but then he just went back to the old irritable Daniel.

I had become suspicious of a few things in his diet. We went camping over Easter and I gave him a Heinz tomato based baby food - it came out the other end looking nearly same as it went in and Daniel was extremely unsettled all weekend. A booklet from a support group for reflux babies mentioned avoiding acidic foods for reflux babies so we presumed that was the reason it was upsetting him. Luckily, for this reason, we didn't give him Kiwi fruit, oranges or fruit juice.

At eight months of age he was still whingeing all day and throwing huge temper tantrums (head banging the dishwasher) so our paediatrician organised a barium swallow. He also started him on Mylanta four times a day. The first week on Mylanta he was wonderful and that week he had the barium swallow, which was normal, much to my disgust. The next week he was worse than ever. I stopped the Prepulsid at 12 months and started Daniel on cow's milk, which made no difference. At this time I went back to work two days a week and left my mum to cope with Daniel - there was no way a child care centre would have taken him. I think going back to work was the best thing. I would come home after my two days and feel ready to cope with another week of life with Daniel. My mum says she even dreaded him

coming for the two days sometimes.

Around this time I tried a naturopath, masseur and chiropractor, but nothing really helped.

By fifteen months of age he was no better. A normal day was leaving him scream to get him to have his afternoon sleep and to settle at night. I would put him in his room several times a day on a bad day and sit for ten minutes and try to calm myself down. Normal daily tasks such as cooking meals and washing were all done while he screamed.

I returned to his paediatrician and he referred us to a gastroenterologist at the Royal Children's Hospital in Melbourne. He told us that he doubted Daniel's behaviour was due to reflux (Daniel smiled at him and played with the toys in his room!) He advised I stop the Zantac and organised for him to have a pH study (monitors acid in the oesophagus over 24 hours) and gastroscopy (tube to look at the stomach and oesophagus). After stopping the Zantac, David actually seemed a little better and stopped his head banging.

The pH study showed 'mild' episodes of reflux. His gastroscopy showed moderate to severe inflammation and ulceration of his oesophagus and suggested that there may be an allergy involved. They suggested we see the allergy department at the Royal Children's Hospital. They put Daniel on the Neocate diet. He was only allowed Neocate formula, rice, zucchini, apple, pear and potato. The doctor at the allergy department also advised me that these children get into such bad behavioural problems that once they're fed and changed you just have to leave them scream! The diet was a disaster to say the least - to try to get an 18-month-old to drink this formula, that you gag on yourself it's so foul tasting, was impossible. Daniel screamed all week and was so bad by the end of the week I had to take time off work. He was constipated from only drinking small amounts of water.

In desperation we were referred to a surgeon about the possibility of surgical correction. He wasn't convinced - so he sent us for a gastric emptying study, which was very distressing for Daniel - they put a large dome over his face and stomach. This showed he only refluxed once. The surgeon suggested trying Losec (Omeprazol) which stops acid production in the stomach and helps heal the oesophagus. We started Losec - after about a month we noticed a big difference in his behaviour - he was a much happier little boy and he actually sat and played with toys for short periods of time - something he had never done before.

I was suspicious of food colouring and artificial additives at this stage, as some evenings we described Daniel as 'bouncing off the walls' he was so hyperactive. For this reason we only let him drink plain milk and water and filled him full of 'healthy' fruits, vegetables and cheese!

Like everything else the effect of Losec was wearing off. Daniel was starting to complain of his 'tummy burning' and pointing to his oesophagus. He required constant amusement and was generally a very unhappy little boy. I was finding him nearly impossible to live with and constantly comparing myself to the other mums in playgroup and wondering why they all got so much enjoyment out of their children.

When Daniel was around two and a half years old I happened to go to a seminar through work on food intolerance and allergy run the team at the Royal Prince Alfred Hospital in Sydney. I couldn't believe what I was hearing at the lecture - it was Daniel all over! I immediately sent away for the elimination diet books and got a copy of Friendly Food.

I started off by leaving him on dairy and wheat products. After 1-2 weeks we noticed a difference in his hyperactivity on the diet but he was still having many days of irritability and complaining of his tummy burning. His loose bowel actions were persisting. We stopped dairy products and put him on soy and we started giving his Losec in pear jam instead of yoghurt. He had watery diarrhoea for two weeks after stopping dairy products as a withdrawal effect. Unfortunately what we didn't know was the Losec is not absorbed properly unless given in something acidic like yoghurt. After one month of giving the Losec in pear jam, Daniel's stomach pain was severe.

After being unwell for three days with a high temperature and complaining of shoulder tip pain, Daniel was finally diagnosed at the Royal Children's Hospital with pneumonia from aspirating on his vomit. (I had seen two other doctors who told me children don't know where their pain is and that he had a viral infection.) The pneumonia was in the back of his lung and was pressing on his diaphragm, which was giving him shoulder tip pain. I have never seen Daniel so sick - we thought he was going to die.

Again in desperation we returned to his gastroenterologist who advised another pH study and returning to the surgeon for fundoplication, which kinks the oesophagus to stop food refluxing back from the stomach. He felt he might have a physical problem as well as an intolerance, which caused hyperactivity. So when he was three, Daniel had fundoplication. We stopped the Losec the night before surgery. The surgery was major - four days in hospital and two days on a morphine infusion. As soon as the morphine stopped Daniel started complaining of his stomach burning but now he pointed to his stomach rather than his oesophagus - the surgery had only moved the pain. We recommenced his Losec on leaving hospital. Daniel's weight had dropped from above to below average, as we struggled to maintain his nutrition on a vitaminised elimination diet. I hit rock bottom. I was waking at night in a sweat over what I had put him through. I rang the Royal Prince Alfred Hospital Allergy Clinic in Sydney, beside myself, and they suggested that we bring Daniel up to Sydney. I only wish we had done it prior to the surgery.

At the clinic, his behaviour chart revealed that Daniel was very high for hyperactivity and learning problems and we were told we were dealing with severe food intolerance and ADD. We were advised to try Daniel off pears as he is very salicylate sensitive.

Daniel is now nearly four and in the last month he has been consistently much better. He only tolerates rice, potato, cabbage, beans, chicken, lamb, Nuttalex and restricted amounts of sugar. He is still on Losec which we have increased in the last month to combat his stomach pain. We have found he is no longer reacting as badly to perfumes since stopping pears and maple syrup. Since stopping rice bubbles his aggressive behaviour has ceased. He will actually sit and play with toys now, although his concentration is poor at times. We have tried him on Ritalin but if he's having a bad day food wise, Ritalin only makes him worse.

The last four years all seem to blur into one big nightmare but I realise I was becoming very bitter about the whole thing. I have resolved to look ahead only. Daniel is really a beautiful little boy underneath all the problems he has had. I try to make the most of the good days and not dwell on the bad days.

It is in the hope of preventing someone else living our nightmare that I do the telephone counselling for D.I.S.A (Distressed Infants Support Association of Vic) and have agreed to be the Melbourne contact for food intolerance in Sue Dengate's book Fed Up. - Jenny

[003] "a godsend to our lives" (February 1999)

"I have read your book Fed Up and it has proven a godsend to our lives and I can't thank you enough for putting your experiences in print. My daughter would have been expelled last year (1st term Kindergarten) for her aggressive, violent and unruly behaviour. Many times I sat in the principal's office in tears of disbelief as they told me about this horrid monster that was my child - I couldn't understand. GPs, specialists and paediatricians could find nothing wrong. She even attended a behavioural management unit for 20 weeks at the request of her school. Of course no-one wanted to believe that her access to a different range of food that she normally would not be given was at the same time her behaviour went off track. The school had not seen her pre-canteen.

We know that she is intolerant to additives, salicylates and amines and we are living on the range of foods recommended in your book. We have tested some foods and know basically what we can't have but have been very hesitant with the challenges particularly when reactions may occur later when she is in class. School holidays are our windows of opportunities.

The problem we now have is other children sharing food. We are approaching the school today regarding this as she ate a packet of noodles with the chicken flavour sprinkled on top yesterday and then reacted severely to the point of injuring her favourite teacher twice and being suspended for a day. This isn't the first time she has had someone else's food and although my daughter is so good most of the time, temptation is always there and luckily we have been able to pinpoint each time she has taken matters in her own hands and done her own little challenge. From this we seem to have found another problem - other people innocently undermining what we have achieved ... someone shared a packets of lollies and she came home proudly saying that blue is OK, the reaction is all here (pointing to her head). 5pm that night blue was not OK.

... I ran into a friend the other day who I hadn't seen for ages. During the catch up he mentioned the diet they are now on and even though it eliminated processed and natural foods the difference in his eldest's (4yo) behaviour was well worth it. The look of relief on his face was priceless when he realised that I truly did understand and wasn't just nodding my head ("ah, Sue Dengate's Fed Up" I said). I think it has given him even more determination to stick it through." – Alex

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