

ERADICATING HELICOBACTER PYLORI

What you need to know about Helicobacter Pylori
And other Digestive Infections and Disorders

FREE E-book Edition 1 - 2023

*matula*TM
perfectly natural

Since 2006 Matula Tea, also known as Matula Herbal Formula, has been healing over 55 000 suffering people across the globe.

Our rate of success eradicating Helicobacter Pylori infection in the Stomach, Duodenum and Esophagus with one treatment of Matula Tea is over 98%.

- ❖ Matula Tea is a 100% natural product and may be taken safely with other medications. Scientifically proven anti-bacterial properties of Matula Tea eradicate all strains of Helicobacter Pylori bacterium which colonizes in your stomach and mouth. When left untreated the Helicobacter Pylori may create a hole in your stomach lining **causing gastritis, ulcers and in extreme cases lead to Stomach Cancer.**
- ❖ Helicobacter Pylori Symptoms vary from severe **stomachache, nausea, heartburn, sometimes vomiting to headaches.** This pain can leave you unable to function physically as it drains you physically, mentally and eventually emotionally, affecting your day-to-day life.
- ❖ Prolonged usage of Matula Tea has shown to be very beneficial to people who are suffering from **Candida overgrowth** in the intestines as well as **effectively relieving symptoms associated with acid reflux (GERD).**
- ❖ Matula Tea **regulates the production of your stomach acids** which promotes the healing of heartburn and reflux disease. Aiding in **rebuilding** the protective mucus lining of your stomach, promoting healing of damaged tissues.
- ❖ **Also successfully treated are various ailments associated with the Esophagus, Stomach and Duodenum. Further Matula Herbal Tea has been used to treat Ulcerative Colitis, Non-ulcerative Dyspepsia, Dysbiosis, IBS and has been shown to reduce inflammation in respect of Diverticulitis.**
- ❖ The results of a Matula Herbal Tea treatment can vary from person to person, due to differences in the severity of the Helicobacter Pylori infection and the general well-being of each person.

**We have such confidence in our scientifically proven product that we offer
100% MONEY BACK GUARANTEE – See page 67!**

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Book Cover Picture Credit: Wikipedia (Marshall et al. 1985) Goodwin et al., 1989

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HELICOBACTER PYLORI

CHAPTER 1

WHAT IS HELICOBACTER PYLORI?

Helicobacter pylori is a hardy spiral-shaped bacterium which multiplies and colonizes in the digestive system. Given the makeup of this incredibly destructive bacteria, one will see how its clever design enables it to survive in hydrochloric acid (the acid your stomach produces to break down food), and then to penetrate the lining of the stomach.

Helicobacter Pylori can survive gastric acids due to its ability to produce an enzyme called urease. Urease can neutralize stomach acid, making it easy for the bacteria to survive in its own acid-free zone.

Helicobacter Pylori is the ONLY bacterial organism that can survive in the hydrochloric acid produced by your stomach.

Because of their corkscrew shape, the bacteria can easily penetrate the stomach's protective mucous lining. The 'antacid' effect of *H. Pylori* fools the stomach into producing more acid, which then makes the stomach lining more susceptible to damage through exposure to acid and pepsin. Too much acid and pepsin is even more damaging when the stomach lining has been penetrated and left unprotected by the effects of *H. pylori* colonization.

This is basically how stomach ulcers are formed.



H. PYLORI CROSSING MUCUS LAYER OF STOMACH

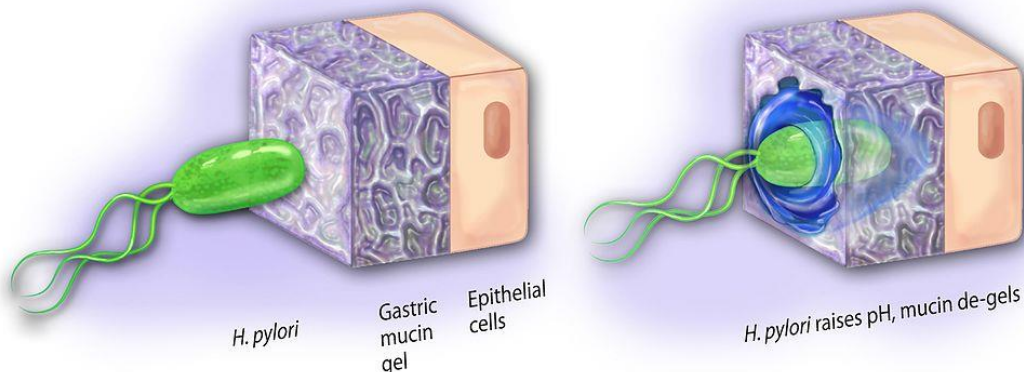


Illustration Credit: Zina Deretsky, National Science Foundation

THE DISCOVERY OF H. PYLORI

In 1982, two Australian scientists, Dr Barry Marshall and Dr Robin Warren discovered that stomach ulcers were caused by H. Pylori.

The New York Times published an article in 1984 by its medical correspondent Dr. Lawrence K. Altman on the link between H. Pylori and Peptic Ulcer disease. He stated in 2002, "I've never seen the medical community more defensive or more critical of a story", and he had been with the paper since 1969.

It took a total of 23 years for Dr Barry Marshall and Dr Robin Warren to convince the medical profession to acknowledge and embrace their breakthrough discovery, and they were eventually awarded the Nobel Prize in Physiology or Medicine in 2005 for their work on H. Pylori.

The story of Dr Barry Marshall and Dr Robin Warren started nearly 23 years before they won the Nobel Prize. After years of intensive research, their discovery, which established the link between an infection of H. Pylori bacterium and stomach ulcers, was finally made way back in 1982. Supporting evidence of the link between the H. Pylori bacterium and stomach ulcers quickly strengthened over the next 10 years. Many studies from around the world also confirmed without any doubt that there was a presence of the H. Pylori bacterium in most people suffering from peptic ulcers.

The concept of stress and diet being the cause of peptic ulcers was so firmly entrenched in the medical professions mind set at the time, that they could not bring themselves to believe that a bacterium could possibly be the cause.

This newly discovered fact completely rocked common medical beliefs in those days. Nobody believed that H. Pylori could survive in the acidic environment of the stomach, because the stomach was supposed to be kept sterile by the natural presence of aggressive gastric juices (hydrochloric acid).

To disprove the belief that H. Pylori could not survive in the acidic environment of the stomach, Dr Barry Marshall performed an experiment on himself in July 1984 that for ethical reasons he could not ask any healthy person to do. He was first checked for bacterial infection and tested negative. He then swallowed a 3-day old culture of H. Pylori. As he expected, seven days later he started feeling sick with headaches, nausea, episodes of vomiting and bad breath.

Although he didn't develop an ulcer, he did suffer from gastritis (stomach inflammation). After ten days, tests showed that the H. Pylori bacterium had established itself in Dr Marshall's stomach. After 2 weeks, Dr Marshall began taking an antibiotic and he was back to normal within twenty-four hours. His bold experiment was a success as he had proved that a healthy person could easily be infected by H. Pylori.

By the 1990's discussions had shifted from the question of whether H. Pylori causes peptic ulcers, to questions on how it causes ulcers and how it can be eradicated. Thus, the theory of the unbelievers had been broken – they had argued that people with ulcers had weak immune systems, and that H. Pylori was only effectively infecting people with ulcers because of their weakened immune systems.

Today there is absolutely no doubt that H. Pylori is the cause of 80% – 90% of all stomach ulcers. There is still a lot of discussion on whether it can be the sole cause or if it needs a sidekick, like stress or spicy foods.

The bottom line regarding the correlation between H. Pylori and ulcers is most clearly shown in the recurrence rates after treatment. The ulcer recurrence rate at 1 year is about 10% if H. Pylori is eradicated. And 50% – 60% if it is not eradicated.

TEN MOST COMMON SYMPTOMS OF HELICOBACTER PYLORI

1. **Heartburn or Acid Reflux (GERD)** - Whether these symptoms occur on a regular, or even infrequent basis, one may well be infected with H. pylori.
2. **Diarrhea, Constipation, Flatulence, Bloating** - Because H. pylori interferes with acid in the stomach, one can't digest food properly.
3. **Fatigue and Low Energy Levels** – H. pylori creates non-stop stress on the body, making one feel tired. Added to the possibility that food is not being digested properly and the body is not receiving the correct nourishment to maintain its proper energy levels.
4. **Nausea & Vomiting** - Many people feel nauseous when with H. pylori infections. Sometimes this can be mistaken for pregnancy morning sickness. In some cases, vomiting does occur.
5. **Unplanned Weight and Muscle Loss** - Because H pylori affects acid levels – which affects the digestive process of fats and proteins especially – one may notice that you are losing weight. The problem is that this weight loss is due to muscle loss, which is a dangerous way to lose weight.
6. **Difficulty Losing Weight** - This is a surprising symptom opposite to the above. The reason for this is that a hormone called cortisol is produced when your body is stressed. Cortisol is known to cause either weight loss or weight gain, depending on the person. Cortisol can promote weight gain around the stomach area, and at the same time can also cause muscle loss.
7. **Hormonal Symptoms including Mood Swings & PMS** - These are usually caused by an over production of Cortisol caused by the stresses of the body trying to deal with infections.
8. **Depression and Anxiety** - A very important mood chemical (called serotonin) is largely made in a healthy digestive system. Any damage to the stomach by an H. pylori infection will lead to a shortage of this important chemical.
9. **Gum Disease, Bad Breath and other Oral infections** - Although the H pylori bacteria lives mostly in the stomach and small intestines, it has also been found in the mouth, and even in dental cavities.
10. **Blocked nose, painful sinuses, colds and infections** - Most people are unaware that the sinuses are joined to the digestive system, and that any irritation to the digestive system can cause sinus problems.

LESS COMMON SYMPTOMS

These may include tension headaches, clouded thinking, yeast infections, body chills, cramping, joint pain, painful lymph nodes and general body aches.

H. Pylori symptoms such as those mentioned above may seem quite broad and confusing, and some people can be completely overwhelmed by the number of symptoms that they are experiencing all at the same time.

Hopefully the list on the previous page has helped you work out if you could be infected with H.pylori. If you are not quite certain, then please make sure by visiting a health professional.

INTERESTING FACTS ABOUT HELICOBACTER PYLORI

- Correct diagnosis is critical, and CORRECT re-testing after treatment (to make sure the treatment has worked) is even more important. Yet patients are literally throwing their money away by paying for the wrong tests which are still being widely used to test for the presence of H. pylori. Most doctors simply have very few options when it comes to treating H. pylori infections. (The prescription will almost always be a Triple Therapy, or Quadruple Therapy.)
- The latest drugs being produced are designed to be even more powerful and effective against Helicobacter Pylori – but sadly the negative side effects are not getting any better (side effects cause most patients to abandon their treatment)
- Most Doctors spend more time treating the negative effects of Triple Therapy, than they do treating the original H. pylori infection.
- H. pylori is becoming increasingly resistant to the most common treatments.
- Patients who have been on 4 or more courses of Triple or Quadruple Therapy – find that they are still infected with H. pylori. The antibiotics used in Triple or Quadruple Therapies are the direct cause of another major problem, one that conventional medicine chooses not to even recognize... Candida Albicans overgrowth.
- Up to 65% of patients infected with H. pylori are simultaneously infected with Candida Albicans, and they don't even know about it! (Candida Overgrowth can be a dangerous infection if left untreated, and it is caused by the intake of antibiotics – the most common treatment prescribed for H. pylori).
- Almost 75% of the world's population is infected with the Helicobacter Pylori bacterium. That means that right now over 4.6 billion people are infected worldwide.
- An estimated 816 million people alive right now WILL develop a stomach ulcer caused by an infection of H. pylori.
- Over 50% of gastric cancer patients are infected with H. pylori.
- Up to 90% of all stomach ulcers are caused by an infection of the Helicobacter pylori bacterium. Most people have never heard of H. pylori.
- 60% of people surveyed believe that ulcers are caused by stress, and nearly 20% believe that stomach ulcers are caused by spicy foods.
- Researchers have found H. pylori in the saliva of some infected people, and it has recently been proved that this infection can be spread by kissing. This recent discovery highlights the problem of re-infection of a patient who has been successfully treated and also explains the problem of cross-infection amongst families who are not treated at the same time.

DIFFERENT TESTS FOR HELICOBACTER PYLORI INFECTION

Blood antibody tests

A blood test checks for the presence of H. pylori antibodies, not for the bacteria itself. The biggest disadvantage of this test is quite simply; “Blood Tests cannot differentiate between a past infection and the current status...”

Even after H. pylori bacteria has been eradicated, H. pylori antibodies may sometimes still be present in the blood for 12 – 18 months after a successful treatment. This means that you will test positive (for antibodies) when you are negative after receiving treatment. In view of this, Blood Testing is considered to be the most inconclusive test that can be used to determine if a treatment has been successful or not.

ON THE POSITIVE SIDE if you have NEVER been treated for H. pylori – A Blood test CAN be useful if you suspect you are infected with H. pylori, AND if you have never been treated for H. pylori before. It is safe to assume that if your Blood Test is positive, and you have never been treated before, then you are extremely likely to be currently infected. Obviously, this means that you will need to start seeking effective treatment.

Urea breath test

A urea breath test checks to see if you have H. pylori bacteria in your stomach. It involves using a radioactive carbon atom to detect H. pylori bacteria. The breath test is not always available, and the results are often inconsistent. This is a very expensive test, and our research has shown that this is not the best H. pylori test to go for. The inconsistency of the breath test has been proved when running a breath test concurrently with a H. Pylori Stool Antigen test on the same patient.

Stomach biopsy test

A small sample (biopsy) is taken from the lining of your stomach and small intestine during an endoscopy. Several different tests may be done on the biopsy sample. Most of these tests produce inconsistent results and depend on the testing facility or laboratory used. This has been proved when running these tests concurrently with a benchmark HPSA test on the same patient.

Stool antigen test

Also known as the HPSA test, this test provides the most conclusive evidence of the presence of H. pylori bacteria. The stool antigen test checks to see if substances that trigger the immune system to fight an H. pylori infection (H. pylori antigens) are present in your feces (stool).

Stool antigen testing may be done to help support a diagnosis of a current H. pylori infection or to determine whether treatment for an H. pylori infection has been successful. We recommend this test after you have been treated – ***it produces a very accurate result of your H. pylori status.***

DIFFERENT RESULT TIMES

- Results from the urea breath test or a stool antigen (HPSA) test are generally available within a few hours.
- Results from a blood antibody test are usually available within 24 hours.
- Results from biopsy samples obtained by endoscopy are usually available within 48 hours.
- Results from a biopsy sample that is cultured can take up to 10 days.

FOODS TO AVOID AND FOODS TO CONSUME

If one suffers from stomach ulcer or gastritis, please avoid foods which may affect the stomach. Many foods can irritate the stomach by increasing stomach acid and therefore cause symptoms such as indigestion, stomach pain and heartburn.

THE FOLLOWING SHOULD BE AVOIDED OR LIMITED:

Liquids:

- ✕ Regular coffee and decaffeinated coffee
- ✕ Black tea, spearmint and peppermint tea
- ✕ Any drink containing alcohol (beer, wine, whisky, gin etc.)
- ✕ Orange and grapefruit juice
- ✕ Most fizzy drinks, including cola
- ✕ Hot cocoa, whole milk and chocolate milk

General foods:

- ✕ Fatty meats
- ✕ Highly seasoned, smoked and processed meats, such as bacon, salami, some sausages, ham and many popular meat cuts
- ✕ Rich dairy foods containing whole milk and cream
- ✕ Full cream chocolate
- ✕ Strong cheese, like matured cheddar and camembert or cheese containing black pepper
- ✕ Processed tomato products: tomato sauce, paste or juice.

Seasoning:

- ✕ Hot chilies and other peppers (black or red)- raw or in powder form
- ✕ Garlic and onion- raw or in powder form – should be limited.

WHAT TYPE OF FOOD SHOULD ONE CONSUME?

It is important to eat a variety of foods, such as vegetables, fruit, low fat dairy foods.

- ✓ *Eat only whole grains, such as whole – wheat and rye breads, pasta, and cereals.*
- ✓ *Eat brown rice instead of white rice.*
- ✓ *Eat nuts and beans and boiled or poached eggs.*
- ✓ *When eating meats, choose chicken or turkey.*
- ✓ *Eat fish regularly.*
- ✓ *Avoid unhealthy fats, use salt and sugar sparingly.*
- ✓ *Use olive, coconut and canola oil for frying and in your salads.*

Check out the GERD diet on page 55 for more types of food you should be eating.
Further - EAT SMALL MEALS FREQUENTLY. It is easier for your stomach to handle and do eat your evening meal a couple of hours before you go to bed.

HOW CAN H. PYLORI BACTERIUM BE ERADICATED?

Unfortunately, the bacterium are not easy to eradicate. There is no single antibiotic that can do the job alone, so multiple antibiotics in conjunction with proton pump inhibitors (PPI's) such as Nexium and Prilosec, are being prescribed.

No matter what drug-based treatment has been prescribed – the fact is that there will be a group of negative effects that the patient must contend with. Many people have such bad reactions that they are forced to stop their treatment prematurely.

One must look at natural remedies if one wants to avoid any negative effects. Natural products are toxin free and known to be very gentle on one's body.

WANT TO CLEAR H. PYLORI FOR GOOD - NATURALLY?

It is now possible to remove all traces of H. pylori from your digestive system with a single course of a clinically proven natural herbal solution – and this can be done without any negative effect. We would like to introduce Matula Tea which is a 100% natural product and it may be taken safely with other medications. Clinically proven anti-bacterial properties are proven to eradicate all strains of Helicobacter Pylori.

Matula Tea has proven anti-bacterial, anti-fungal and anti-parasitic properties. Prolonged usage of Matula Tea has shown to be very beneficial to people who are suffering from Candida overgrowth in the intestines as well as effectively relieving symptoms associated with acid reflux (GERD).

- **Regulates the production of stomach acids which promotes the healing of heartburn and reflux disease.**
- **Aids to rebuild the protective mucous lining of the stomach.**
- **Promotes the healing of damaged tissues.**
- **Non-Toxic – it is as safe as a normal cup of herbal tea.**

Matula Tea is comprised of a specific ratio of flowers, leaves, stems from seven different plant species, some male and some female. Each of these plants are picked at different times during the four seasons of the year. Some are picked when budding, some when flowering, and others after seeding. Some plants can only be picked in the early morning, while others are picked in the late afternoon. The plants Matula Tea uses are NOT commercially grown.

***Matula DOES NOT CONTAIN any traces of wheat, caffeine, gluten, corn, soy, milk, egg sugar, colorants or preservatives.**

Laboratory tests have shown that Matula Herbal Tea is totally nontoxic to humans (and indeed also to horses, dogs and cats). The test clearly show that it is even less toxic than the well-known and highly acclaimed Rooi Bos/Red Bush tea (see test reports on website).

See our story and more about Matula Tea Chapter 4 onwards!

STOMACH ULCERS

CHAPTER 2

BASIC FACTS ABOUT STOMACH ULCERS

- Up to 90 % of all stomach ulcers are caused by H.Pylori and not stress or spicy foods.
- H.Pylori can easily be transmitted by kissing, sexual contact etc.
- In poorer countries 50 % of the population is infected in childhood and 90% by adulthood.
- The **W.H.O.** reported that H.Pylori is present in 50% of gastric cancer cases.
- Approximately 1 in 8 people will develop duodenal or stomach ulcers in their lifetime.
- Stomach ulcers affect more than 5 million people annually in the U.S.A. alone.
- Each year approximately 300 000 people have ulcer-related surgery.
- Each year approximately 6 000 people die of ulcer-related complications in the U.S.A.
- Another major cause of ulcers is the prolonged use of NSAID's. (Nonsteroidal Anti-Inflammatory Agents/Analgesics).
- Both men and women are equally prone to ulcers.
- A person of any age can suffer from ulcers.
- Peptic ulcers affect nearly 1 in 10 of all adults.
- Gastric ulcers may lead to stomach cancer.
- As one ages, one usually becomes more prone to H.Pylori infection.

FACTS OF STOMACH ULCER TREATMENTS THAT DOCTORS MAY NOT INFORM YOU ABOUT

- Most doctors do not have an option but to supply and treat ulcers with antibiotics. The prescription is generally for either a Triple or a Quadruple treatment, often in conjunction with Proton Pump Inhibitors (PPI's) such as Nexium or Prilosec.
- H.Pylori is becoming increasingly **resistant** to antibiotic treatment.
- The latest antibiotics are now so powerful – in an attempt to be more effective- and thus causing serious side effects, resulting in many patients abandoning the treatment.
- Approximately 65 % of people affected with H.Pylori are simultaneously infected by Candida Albicans.

HOW TO OVERCOME STOMACH ULCERS BY REMOVING THE CAUSE

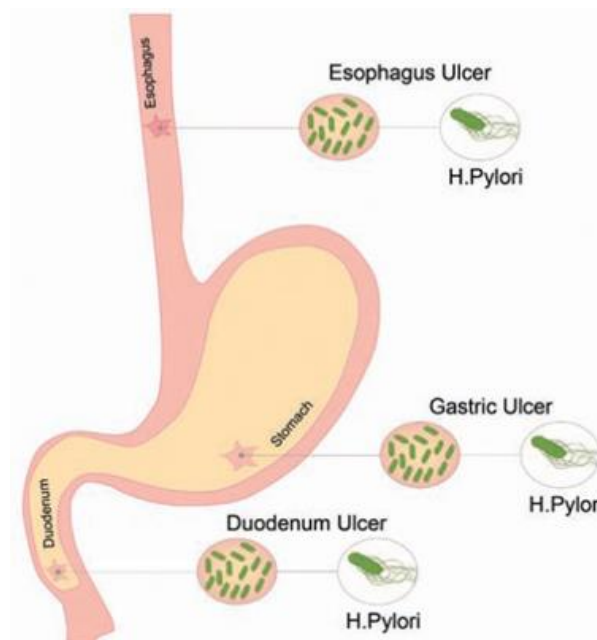
If you have been diagnosed with a stomach ulcer, you should request your doctor to arrange a proper test, preferably the Helicobacter Pylori Stool Antigen test (HPSA). If the results are positive – that you are infected – then you have two choices:

Ask your doctor to treat you with antibiotics (with all the known side effects) **Or** Go for a natural treatment.

If you choose a natural treatment make sure it complies with the following points:

- Has it been scientifically tested for efficacy and safety?
- Is it non-toxic?
- Does treatment cause any side effects?
- Is it easy and pleasant to take?
- Is the treatment reasonably priced?
- Will you receive unlimited support from a qualified health team, while under and after treatment?
- If the treatment fails, (all traces of H. Pylori have not been eliminated) can you reclaim your purchase price?

Recent studies show that apart from Peptic Ulcers, other diseases such as Crohn's Disease, Ulcerative Colitis, Rheumatoid Arthritis, and even 50% of New Gastric Cancer cases are linked to the presence of H. Pylori bacterium.



DIFFERENT TYPES OF ULCERS EXPLAINED

Most people know about two types of ulcers before they get diagnosed with a more specific type of ulcer. Generally, people refer only to stomach ulcers and peptic ulcers. We explain what the difference is between these two, and we also explain more about the lesser-known stomach ulcers.

Defining Stomach Ulcers...

The term 'stomach ulcer' is a broad term that includes quite a few different types of ulcers. It gets a little confusing when you really start looking deeper into figuring out the 7 different types of ulcers found in the digestive system.

Mostly, ulcers are named after the location where they are found but, as with most things in life, there is an exception – the peptic ulcer. For instance, a peptic ulcer can be found anywhere in your esophagus, stomach or duodenum. So, therefore a peptic ulcer can also be an esophageal, or gastric, or duodenal ulcer confused?

MOST COMMON TYPES OF ULCERS

Peptic Ulcer - Any ulcer that is exposed to pepsin is referred to as peptic ulcers. Peptic ulcers are found in the lining of your stomach or duodenum. Pepsin is normally present along with hydrochloric acid in the stomach lining. There are many symptoms of peptic ulcers that are worth checking out.

Gastric Ulcer - When a peptic ulcer is in the stomach, it is called a gastric ulcer. The symptoms of gastric ulcers are more specific than peptic ulcer symptoms.

Duodenal Ulcer - When a peptic ulcer is in the duodenum, it is called a duodenal ulcer. This type of peptic ulcer develops in the first part of the small intestine. Some of the symptoms of a duodenal ulcer are interestingly quite opposite to those of gastric ulcers. Duodenal ulcers are the most common ulcers found in the Western world.

Esophageal Ulcer - This type of ulcer occurs in the lower end of your esophagus. Esophageal ulcers are often associated with a bad case of acid reflux, or GERD as it is commonly called (short for Gastro Esophageal Reflux Disease).

Bleeding Ulcer - Internal bleeding is caused by a peptic ulcer which has been left untreated. When this happens, it is now referred to as a bleeding ulcer – this is the most dangerous type of ulcer. Medical attention should follow as soon as possible.

Refractory Ulcer - Refractory ulcers are simply peptic ulcers that have not healed after at least 3 months of treatment.

Stress Ulcer - Stress ulcers are a group of lesions (or lacerations) found in the esophagus, stomach or duodenum. These are normally only found in critically ill or severely stressed patients.

PEPTIC ULCER

WHAT IS A PEPTIC ULCER?

It is a distinct breach in the mucosal lining of the stomach or the first part of the duodenum as a result of caustic effects of acid and pepsin (an enzyme that degrades the food proteins in the stomach) in the digestive cavity. In some cases, there will be no symptoms.

However, a common symptom is a gnawing or burning pain in the abdomen just below the breastbone which may extend to the back. It can appear an hour or two after eating and it may come and go for periods of days or weeks. At night when the stomach is empty the pain might be worse.

Removing the cause is the key to good health.

The symptoms of a peptic ulcer are fairly easy to spot because there are so many of them. But did you know that a peptic ulcer could be any one of 3 different types of stomach ulcers? Check your symptoms to see what type of ulcer you may have and get the latest information on what caused this problem and how you can deal with it safely and effectively.

THE BASIC SYMPTOMS OF PEPTIC ULCERS

These are almost the same as the basic symptoms of stomach ulcers, but with a few small differences due to exposure to gastric acids.

- The most common symptom of a peptic ulcer is a gnawing or burning pain in your stomach just below your sternum with frequent or infrequent burping.
- Stomach pains are triggered by hunger and occur between meals and in the early hours of the morning.
- Pains can be sharp or dull and can come and go over long periods of time.
- Taking aspirin or drinking orange juice or coffee can cause pain.
- Antacid medication offers short term relief.
- Pain can occur when your stomach is empty, or after you have eaten. The type of ulcer you have will determine this.
- Pain may be relieved by food intake or with antacids, again depending on the type of ulcer you have.
- Bloating of the stomach
- Heartburn – also named acid reflux or GERD. When the acid in the stomach is too weak, the digestion of food becomes difficult and food stays in the stomach for longer periods. This may produce gases which may cause a burning sensation in the throat and stomach.
- Vomiting blood or feeling sick.
- Poor appetite.
- Bad breath – caused by H. Pylori which when present in the stomach creates ammonia resulting in bad breath.

LESS COMMON SYMPTOMS MAY INCLUDE:

- Evidence of bleeding
- Vomiting
- Loss of appetite
- Nausea and dizziness
- Depression
- Headaches
- Skin problems
- Sinus problems
- Sleeping disorders
- Weight loss or gain

Note that 10 – 20% of all people with peptic ulcers will not experience any symptoms at all – as a result they will be unaware that they have an ulcer. These people may only realize they have an ulcer when it has already gone to an advanced stage and become a bleeding ulcer.

WHAT KIND OF PEPTIC ULCER DO YOU HAVE?

The reason why there are so many recognizable symptoms is that a peptic ulcer can either be a gastric ulcer, a duodenal ulcer or an esophageal ulcer. All the symptoms of a peptic ulcer are simply a collection of the symptoms of these 3 different types of ulcers.

Gastric and duodenal ulcers have common symptoms. In addition, they also have symptoms of their own, yet in several respects some of their respective symptoms are almost opposite.

For example, a gastric ulcer will cause you to have pain after eating, whereas one will feel pain before eating if you have a duodenal ulcer. Because a peptic ulcer can be either one of these ulcers, the symptoms of a peptic ulcer can be pain before eating or pain after eating. You may even experience pain before AND after eating if you are unlucky enough to be suffering from a gastric ulcer and a duodenal ulcer at the same time.

The following list will help one identify if you have a peptic ulcer.

Overcoming Peptic ulcers is about getting the right treatment...

No matter what type of peptic ulcer you may have, you will need to get it treated, and obviously you hope and trust that your treatment is going to work for you. Unfortunately, you will need to do some homework to ensure this happens.

GASTRIC ULCER

PEPTIC ULCER VS GASTIC ULCER

When a peptic ulcer is in the stomach it is referred to as a gastric ulcer. However, the symptoms of a gastric ulcer are more specific than peptic ulcer symptoms.

Gastric ulcers have complications that you need to be aware of...

The symptoms of a gastric ulcer are fairly simple to identify. Gastric ulcers are common, but they can lead to serious complications if not attended to properly, and this is why you need to know some vital facts we reveal below – facts that most doctors won't tell you about. We also recommend that you waste no time in learning why the answer to permanent recovery lies in removing the cause of the problem.

THE 10 REAL FACTS ABOUT GASTRIC ULCERS YOUR DOCTOR PROBABLY WON'T TELL YOU ABOUT

1. Most doctors simply have very few options when it comes to treating gastric ulcers caused by H. pylori infections. (Triple Therapy, or Quadruple Therapy is about all they have to offer)
2. H. pylori is the main cause of ulcers and is becoming increasingly resistant to the most commonly used treatments.
3. Many patients have been on more than 4 courses of the same antibiotic treatment – and they still have gastric ulcers and H. pylori.
4. 65% of patients infected with H. pylori are simultaneously infected with Candida Albicans, and they don't even know about it!
5. Most Doctors spend more time treating the side effects of the drugs they prescribed, than the time they spend treating gastric ulcers.
6. Correct diagnosis of an H. pylori is critical, yet patients are literally throwing their money away on the conventional methods used for testing for H. pylori bacteria.
7. The latest drugs being produced for the eradication of H. pylori are now being made more powerful in an attempt to be more effective – but the result is that the negative side effects are getting proportionately worse.
8. The ONLY way to effectively overcome stomach ulcers caused by an H. pylori infection, is to REMOVE THE CAUSE. Some Doctors still hold on to the outdated 'No Acid, No Ulcer' mentality, and insist on treating the symptoms only.
9. Each year nearly 6,000 people die of ulcer-related complications in the USA alone.
10. There is a lot more you need to know about gastric ulcers and H. pylori!! The more you know, the quicker you will be able to decide what course of action will suit you best.

LIST OF SYMPTOMS OF AN GASTRIC ULCER

If you are experiencing any of the following symptoms then you should get checked out for the presence of a gastric ulcer. You will need to see your doctor for a proper diagnosis.

The signs and symptoms of a gastric ulcer are almost opposite to the signs and symptoms of duodenal ulcers – the main differences are noticed in the timing and severity of the pain.

- Gastric ulcers generally cause a dull aching pain, often right after eating.
- Making a meal can often cause an increase in pain
- Eating will not relieve pain as is the case with other types of ulcers
- Indigestion and heartburn, or acid reflux
- Nagging pain in the upper abdomen area below your breastbone
- Episodes of nausea
- A noticeable loss of appetite
- Unplanned weight loss
- Another less common symptom of a gastric ulcer is that about 3 in every 10 people are woken up at night by dull ulcer pains – this usually happens 3- 4 hours after eating.

Not showing any symptoms, but suspect you may be bleeding internally?

Sometimes ulcers may produce no symptoms at all. You may be completely unaware that you have an ulcer until you have occasional painless bleeding episodes and anemia.

The passage of smelly black, tarry stools may be your first sign that you are suffering from a bleeding ulcer.

If your ulcer is already at an advanced stage then repeated episode of bleeding can be identified. Vomiting new blood which is bright red in color, or older digested blood that is dark and grainy, are also sure symptoms of a gastric ulcer that has started bleeding.

A bleeding ulcer is a medical emergency! Don't waste any time getting immediate treatment. If your gastric ulcer is bleeding, then you may vomit bright new red blood, or older digested blood that looks like brown coffee grounds and have black, tarry bowel movements.

Feeling dizzy and faint at times?

You need to check for the symptoms of a bleeding ulcer – if these are present then the dizziness and faintness will be due to a loss of blood. You should seek immediate treatment to stop the blood flow.

Experiencing intermittent and different types of pain?

These symptoms will differ from person to person but many people do have periods of ulcer pain followed by pain free periods that can last for several days or even months.

Most people will try an over-the-counter antacid treatment if this is their first exposure to stomach ulcers.

Don't Give Up - You CAN Overcome Gastric Ulcers!

No matter how bad your gastric ulcer is, you will need to get it treated, and obviously you hope and trust that your treatment is going to work for you. Unfortunately, you will need to do some homework to ensure this happens.

If you don't want to take a chance on accepting any treatment that even has the slightest chance of not working, then we strongly urge you to keep reading.... because we want you to have the real facts so you can make an educated decision about the treatment you choose to overcome your gastric ulcer.

Everyone agrees that it makes sense to remove the cause, rather than to treat the symptoms. And you want to be able to remove the cause as comfortably as possible, without having to endure weeks, and possibly months, of ongoing medication – and the inevitable negative side effects.

Fully Guaranteed and No Negative Effects?

The best news is that this treatment is fully guaranteed to remove all traces of H. pylori from your digestive system – and without any negative effects! This means that you can now be over 98% certain that you can get rid of H. pylori and stomach ulcers without any risk to your health or your finances.

Great information – thank you! I can't thank you enough for all the information you have sent my way. It's better than any office visit I ever had with a doctor.

Your reports are easy to read and are extremely informative and helpful. The best part is, that I can go back and read them again and again. I chose your program, because I believe in natural healing, rather than using medication, which I feel does nothing but mask the problem. Along with healing gastric ulcers, I am also treating candida overgrowth, which I need to heal as well, since most of my trouble started after being on antibiotics earlier this year. Thank You!

Rose M, United States

DUODENAL ULCER

The primary symptoms of a duodenal ulcer are heartburn, severe stomach pain, unplanned weight gain, and a burning sensation felt at the back of the throat. Take a few minutes to learn more about duodenal ulcers, and to see why there is no need to continue suffering, or to repeat any treatments that have already failed you...

DUODENAL ULCERS - SPECIFIC SYMPTOMS

The signs and symptoms of a duodenal ulcer are almost opposite to the signs and symptoms of gastric ulcers – the differences are noticed mainly in the timing and extent of the pain. Duodenal ulcers develop in the first part of the small intestine, called the duodenum.

Heartburn/GERD is a one of the most noticeable signs of a duodenal ulcer

Check out the following symptoms to see if you possibly have a duodenal ulcer:

- Bloating
- You will also feel a burning or gnawing sensation in the top of your stomach.
- The symptoms of a duodenal ulcer are felt mostly before a meal. This happens when excess acid produced by hunger stimulation, is passed into the duodenum.
- Pain will be felt after taking aspirin or drinking orange juice or coffee.
- Another symptom of a duodenal ulcer is that about 5 in every 10 people are woken from their sleep during the night by sharp ulcer pains.
- With duodenal ulcers, taking a meal or an antacid usually results in a decrease in pain levels.

COMMON QUESTIONS ABOUT DUODENAL ULCERS

Q: What if I am unsure if I have a duodenal ulcer and decide not to go to a doctor?

A: Rather be safe than sorry when it comes to health issues. The older you are, the greater the chance that you will be infected with H. pylori. Although not everyone who has H. pylori will get an ulcer, it is a good idea to get rid of this bacterium, just in case you fall into the majority group who will get ulcers.

The upside with treating duodenal ulcers is that complications are quite rare. Complications are normally in the form of bleeding ulcers caused by the perforation of the intestinal wall, or an obstruction preventing the passage of food.

If complications occur from leaving your ulcer untreated, then you may become a candidate for emergency surgery soon.

Q: What happens if I choose to ignore any of the symptoms of a duodenal ulcer? And what if I also have an H. pylori infection that I am totally unaware of?

A. Recent reports show that there is a link between long-term infection with H. pylori and gastric cancer. The World Health Organization has reported that 50% of new cases of stomach cancer are linked to H. pylori.

Gastric cancer is listed as the second most common cancer worldwide. Over half the population in countries such as India, Colombia and China are infected with H. pylori in early childhood, and it is these countries where gastric cancer is most common.

In Western countries, where H. Pylori is less common in young people, gastric cancer rates are much lower. The focus is more on long term infection. If you are showing any symptoms of any ulcers there is a 80% – 90% chance that you will be infected with H. pylori.

If you are infected with H. pylori your risk of developing gastric cancer is 2 to 6 times greater than those who are not infected. The longer you leave your condition unchecked the greater your risk will be of your ulcer getting to an advanced stage, and the greater the risk of complications.

IS THERE A SAFE & EFFECTIVE WAY TO TREAT DUODENAL ULCERS?

There definitely is, but you need to be very careful when looking for a treatment or remedy that is going to work for you. As you may have experienced already, the most commonly prescribed treatments are not as effective as you are led to believe.

We fully understand that you may have already been trying to get rid of H. pylori or a stomach ulcer, and that you could be visiting our site now because a treatment has failed, and that you are now hoping to find an alternative treatment that actually works.

REMEMBER! The main cause of all types of stomach ulcers is Helicobacter Pylori.

By now you have probably figured out why most doctors are not telling you the real facts about Helicobacter Pylori infections, or about the limitations they have as far as treatments go. We hope the knowledge you gain here is going to help you to avoid the pitfalls of choosing any treatment that may not work for you.

Until our visitors eventually find their way here, most do not know that a safe, yet highly effective natural treatment for H. pylori is now available. To date this 100% natural treatment has been used successfully by over 55 000 happy customers since 2006 – with an amazing success rate of over 98%.

ESOPHAGEAL ULCERS

LIST OF SYMPTOMS OF AN ESOPHAGEAL ULCER

- Dull or burning pain
- Difficulty in swallowing solid foods
- Breathing problems such as wheezing or shortness of breath
- Excessive salivation
- Sore throat
- Hoarseness
- Inflammation of the sinus

WHAT ARE ESOPHAGEAL ULCERS?

Esophageal Ulcers are defined as open sores or lesions in the lining of the esophagus (the tube that carries food from your throat to your stomach). These ulcers usually cause pain that is felt behind or just below your breastbone, similar to the area where you would feel heartburn symptoms.

Healing is slow and these ulcers can recur quite often. Chronic and severe recurrences can result in a narrowing of your esophagus after healing. It is important to note that curing acid reflux early is the key to preventing major problems and possible complications later.

WHAT ARE THE MAIN CAUSES?

Ulcers in the esophagus are usually associated with chronic gastro esophageal reflux disease (more commonly known as acid reflux or GERD).

Your esophagus does not have the same mucous lining that your stomach has to protect itself against your stomach acid. When excessive stomach acid refluxes from your stomach up into your esophagus, it can corrode the lining of your esophagus over a relatively short period of time. This eventually leads to inflammation of the esophagus (known as esophagitis), and then later to ulceration.

OTHER COMMON CAUSES ARE:

- Prolonged use of NSAID's (anti-inflammatory medications)
- Smoking
- Acid Reflux
- Acid effects of forced vomiting in Bulimia cases

POSSIBLE COMPLICATIONS WITH ESOPHAGEAL ULCERS

Complications of ulcers include bleeding and perforation. Ulcers and their resulting inflammation can erode into the esophageal blood vessels and give rise to bleeding into the esophagus. Bleeding ulcers are dangerous and should be treated immediately.

Prolonged or severe acid reflux (severe heartburn) causes changes in the cells that line the esophagus. These cells then become pre-cancerous, and finally cancerous. Cancer is estimated to occur in 10% of patients with acid reflux.

Esophageal cancer is currently the fastest growing cancer in the western world. The two biggest risk factors for this type of cancer are Acid reflux (GERD) and Barrett's esophagus.

Esophageal narrowing and Barrett's esophagus (an abnormal lining of the bottom part of the esophagus) are long-term complications from esophagitis (inflammation of the esophagus). Barrett's esophagus is also known as Barrett's syndrome and is a marker for severe reflux and a sure sign of onset of esophageal cancer.

In 1998 surveys showed that esophageal cancer was one of the 10 leading cancers causing death among men in the USA. People who have Barrett's esophagus are at increased risk, as are people who have long standing acid reflux problems.

TREATING THE SYMPTOMS...?

Your doctor can diagnose esophageal ulcers with a barium x-ray or endoscopy. Esophageal ulcers are very sensitive to small amounts of acid, much more so than gastric and duodenal ulcers. Doctors regularly prescribe proton-pump inhibitors to suppress your stomach acid. The logic of acid reduction is good for esophageal ulcer healing, but the real results can be far from good.

Treating the symptoms only is not going to lead to a cure. So we recommend that these ulcer medications should be avoided at all costs as they can do more harm than good. Treatment should rather be directed at the underlying cause – 90% of cases will show that an infection of *H. pylori* in the stomach is to blame. Most of the remaining cause is the result of prolonged use of NSAID's. Stopping smoking is also a good idea!

Esophageal narrowing is usually treated with drug therapy and by a process of repeated dilation to widen parts of your esophagus – dilation is performed by using balloons or progressively larger dilators called bougies (cone-shaped tubes). Not exactly what most people rammed want down their throats...

Finding a treatment which will work for you...

No matter what type of stomach ulcer you have, it will require some form of treatment, and obviously you hope and trust that your treatment is going to work for you. Unfortunately, you will need to do some homework to ensure this happens.

If you don't want to take a chance on accepting any treatment that has any chance of failure, then we strongly urge you to keep reading.... because we want you to have the real facts so you can make an educated decision about choosing a treatment that will work for you.

Everyone agrees that it makes sense to remove the cause, rather than to treat the symptoms. And you want to be able to remove the cause as comfortably as possible, without having to endure weeks, and possibly months, of ongoing medication – and the inevitable negative side effects.

BLEEDING ULCERS

It is caused by a peptic ulcer that has not been treated. This is a dangerous type of ulcer and should be seen to by a doctor immediately. As the ulcer develops and grows, it may cause damage to surrounding blood vessels in the wall of the stomach or duodenum, thus causing bleeding.

If an ulcer penetrates through the stomach lining and into a large blood vessel, it will most likely require emergency surgery.

THE SYMPTOMS OF A BLEEDING ULCER

If any of the following symptoms of a bleeding ulcer present themselves, we urge you to move swiftly towards getting treatment, and make sure you tell your doctor about all the symptoms you have.

- The passing of foul smelling black, tarry stools could be one of the first symptoms of a gastric ulcer or a duodenal ulcer that has started bleeding.
- The presence of dark red blood in your stools.
- If your ulcer is already at an advanced stage then repeated and different signs of bleeding can be identified.
- Vomiting of new blood which is bright red in color – this indicates that a gastric ulcer has started bleeding. This will be accompanied by repeated episodes of nausea.
- Unplanned or unexplained weight loss.
- Intense and more localized pain in people with penetrating ulcers – the pain may also radiate to your back.
- Faintness and dizziness when standing up – this is due to loss of blood. Over a long period of time, you may become anemic and feel weak, dizzy, or tired all the time. This is typical of a slow bleed left untreated.

REMEMBER if you have been diagnosed with a bleeding ulcer or even if you have the slightest suspicion that you are bleeding from an ulcer, please do not hesitate to get emergency treatment away!

Don't ignore these symptoms - they could be fatal....

Recognizing the signs and symptoms of a bleeding ulcer can be a lifesaving gift. You may be completely unaware you even have an ulcer because you are not experiencing any ulcer related pains. For most ulcer sufferers, this may seem like a painless and easy situation to be in. But in fact, it is a potentially lethal problem!

Learn why your own Blood can become a dangerous Painkiller.

When an ulcer starts bleeding, your blood neutralizes the stomach acid around the area of the ulcer, when this happens the neutralized stomach acid will not 'burn' the raw areas around the ulcer. Basically, this means that you will not feel any pain. And this can present some major problems.

If you do not experience stomach pain, then this may lead you to think that your ulcer may have healed. In reality, the opposite may be true. Your ulcer may have got worse, and it could be bleeding so badly that you are not experiencing any pain, due to the reason explained above.

THIS IS WHY IT IS SO IMPORTANT FOR YOU TO RECOGNIZE AND LOOK FOR THE SYMPTOMS OF A BLEEDING ULCER, AS DISCUSSED FURTHER DOWN ON THIS PAGE.

You may experience occasional painless bleeding episodes and anemia, and these are signs that are easily written off to other possible causes. You may also suffer from dizzy spells caused by loss of blood, but you could blame the dizziness on stress or maybe even lack of sleep – look out for these signs, because they could spell trouble!

‘Stomach ulcers usually cause pain when they are exposed to gastric acid...but when an ulcer starts bleeding, your blood will lessen the effect of your stomach acids, and mask any pain you would normally feel.’

About 1 in every 10 people with bleeding ulcers don't have any associated pain. If you happen to be that one person, then you need to take extra careful note of other signs that are much easier to notice.

WHAT CAUSES AN ULCER TO START BLEEDING?

As an ulcer grows it can start eroding into the muscles of the stomach or duodenal wall. On its path of destruction, blood vessels can be damaged with the result that they start bleeding.

If the damaged blood vessels are small, then the flow of blood is slow, and it will usually find its way into your digestive tract. However, if the damaged blood vessel is large, bleeding is fast and very dangerous. If an ulcer happens to wear all the way through your stomach's lining, and then into a large blood vessel, you will probably require blood transfusions and emergency surgery.

The risk of re-bleeding with active spurting is around 95%. There is a 40% risk if a blood vessel is oozing blood slowly, and about a 25% risk if there is a nearby blood clot. The risk of re-bleeding is less than 5% if the base of the ulcer is clean.

Tobacco and cocaine abuse can increase the risk of bleeding ulcers.

Getting the right Treatment

Acid blockers are commonly prescribed to relieve pain but be warned – the relief is very temporary!

About 3 in every 10 people showing the symptoms of a bleeding ulcer will need surgery to stop the bleeding. If the bleeding is severe, then endoscopy is the most common surgical procedure used to stop the bleeding.

A doctor uses an endoscope to cauterize or seal the bleeding vessel using a heated electrical probe. Or he may close it off by injecting solutions into the bleeding vessel.

Doctors can also easily see the signs of all the different types of bleeding when using an endoscope. Blood clots, active spurting, slow oozing of blood from arteries, as well as swollen blood vessels that are not bleeding yet, can all be detected with the use of an endoscope.

Endoscopy is currently the gold standard for treating bleeding ulcers.

STOMACH ULCER

We explain all the Signs & Symptoms of Stomach Ulcers... ..and provide facts on most treatments.

If you have been diagnosed with stomach ulcers, or if you want to know if your symptoms are caused by a stomach ulcer, then this important message could be exactly what you need right now.

First we discuss all the signs and symptoms of all types of stomach ulcers, and then we provide some interesting facts on the most popular treatments (both pharmaceutical and natural). You will also discover the truth about why the most commonly prescribed treatment fails up to 70% of the time.

Your good health is as important to us as it is to you, so we encourage you to use this unique information wisely, because we know that by doing so you will regain optimum digestive health sooner than you think.

LET'S BEGIN WITH THE MOST COMMON SIGNS AND SYMPTOMS OF STOMACH ULCERS...

We will start with the most common symptoms of a stomach ulcer. Remember that if you have any form of stomach ulcer, it is highly likely that you are infected with *H. pylori* bacteria.

If you are worried that you are indeed suffering from the symptoms of a stomach ulcer or a peptic ulcer, then a proper diagnosis by a health professional is recommended.

Keep a look out for these ulcer symptoms – they are common to all types of stomach ulcers caused by *H. pylori* – including gastric ulcers, duodenal ulcers, and peptic ulcers.

- Abdominal pain – *H. pylori* can cause painful inflammation of the stomach and small intestine lining. Pain can also be caused by a buildup of gases, and constipation.
- Heartburn – Also called acid reflux, or GERD. When acid is low, digestion of food becomes slow and difficult. The result is that food sits in the stomach too long and gives off gases which can cause burning sensations in the stomach and throat.
- Anemia – Or iron deficiency – this is closely linked with an *H. pylori* infection. When an *H. pylori* infection has caused low stomach acid, it becomes particularly difficult to digest protein (which contains iron).
- Mild Abdominal Discomfort- Typically felt 2 – 4 hours before or after meals.
- Bad Breath – *H. pylori* organisms present in stomach acid create ammonia, which results in bad breath.
- Chest Pain -When *H. pylori* infection causes an inflammation in the stomach, the pain signals from the stomach can reflex into the chest, shoulder blade and stomach areas.
- Constipation – When *H. pylori* causes low stomach acid, food is not processed properly causing undigested food to be released into the intestine.
- Diarrhea – The diarrhea may only happen infrequently, or it may happen almost daily, depending on how chronic the infection of *H. pylori* is.
- Gastritis – Gastritis is characterized by an inflammation of the stomach lining. *H. pylori* uses its corkscrew shape to burrow into, and injure the stomach lining, which results in inflammation.

- Nausea & Vomiting – H pylori causes nausea, but the reason for this is not clear. It is thought that as the body attempts to rid itself of the infection, the ejection happens through the process of vomiting. These symptoms can sometimes be mistaken for morning sickness in pregnant women.

SECONDARY, BUT LESS COMMON SYMPTOMS...

- These ulcer symptoms are listed in no particular order, but they are important to note. If you are showing any of the symptoms shown above, then these secondary symptoms may also be experienced:
 - Anxiety
 - Depression
 - Fatigue or Low Energy
 - Headaches or Migraines
 - Skin Problems
 - Pre-Menstrual Stress
 - Sinus Problems
 - Sleep Problems
 - Weight Problems (Gain or Loss)

If one has any of the above symptoms, then it is possible that you may have a stomach ulcer. Fortunately, 90% of all ulcers are easily curable, but there is a hidden danger....

DIFFERENT ULCERS PRESENT DIFFERENT SYMPTOMS

There are 7 different types of stomach ulcers and the symptoms are different for each different type of ulcer. For example, duodenal and gastric ulcers have symptoms which are quite opposite, and this can be quite confusing.

Any symptoms of a stomach ulcer seen above should be regarded as a warning signal. If you notice any one particular ulcer symptom, then the best advice we can offer is that you keep a lookout for any other secondary symptoms that may follow.

Never hesitate to see your doctor for a proper diagnosis. Stomach ulcer symptoms should be taken seriously.

By making sure you know the real facts behind ulcers and the most commonly prescribed treatments, you can more easily decide on what the right treatment will be for you, so that you can live without any further pain and discomfort.

Are you sure you have a stomach ulcer? This is an important question because stomach ulcer symptoms can easily be confused with the symptoms of other GI Tract disorders. Always make sure by getting a proper diagnosis by a health professional.

Contrary to popular beliefs - up to 90% of stomach ulcers are proven to be caused by Helicobacter pylori...

If you didn't already know it -this is the single most important fact that you should know about stomach ulcers.

No matter what you have been told or what you have read elsewhere – this has been clinically proven over and over again using thousands of case studies – contrary to popular beliefs and claims about stress, bad eating habits, or free radicals (the clinical studies that 'prove' this theory are based on a tiny group people and are inconclusive).

It has also been proven beyond doubt, that when an infection of Helicobacter Pylori has been cleared, this is naturally followed by a healing of stomach ulcers. Therefore, the main objective of any good stomach ulcer treatment will be to remove all traces of helicobacter pylori bacteria.

Just knowing these 2 basic facts and the other important facts listed on this page, could save you from months of unnecessary pain and suffering.

HERE'S A LIST OF THE SOME POPULAR NATURAL ALTERNATIVES...

If you have already been diagnosed with H. Pylori, then you may want to explore these options. Sometimes big claims and promises are made, so always ask for clinical tests and a money back guarantee BEFORE you decide to part with your money!

- **Herbs** – Without doubt, the best natural treatment we have found for stomach ulcers and H. pylori is one now being used by Doctors and other Health Care professionals around the world. Clinically tested and proven to be a very effective herbal treatment for stomach ulcers, it is proven to eradicate all strains H. pylori completely, and without any negative side effects. This 100% natural treatment is an easy treatment to take, as opposed to the difficult treatment regime of Triple Therapy and its known negative effects.
- **Ayurvedic medicine**- widely practiced Holistic treatment in modern India and now steadily gaining popularity in the West. Ayurvedic medicine works on your diet, detoxification and purification techniques, herbal remedies, breathing exercises, yoga, meditation, and massage therapy.
- **Acupuncture** – tests on patients who have undergone acupuncture treatment for stomach ulcers show that acupuncture procedures can normalize certain processes of the gastro intestinal tract. There is not much evidence available to show exactly how effective acupuncture is as a treatment for stomach ulcers caused by H. pylori. Acupuncture is a painless treatment with thin metal needles being inserted to varying depths, and at specific acupuncture points. The needles are usually left inserted for 15 – 30 minutes. Treatment normally involves multiple sessions over a period of weeks or months.
- **Vitamins and Minerals** – Zinc, vitamin A and beta-carotene will boost your stomach lining's ability to repair and regenerate itself, however vitamins alone will not remove the cause of stomach ulcers. See more about vitamins in our recommended ulcer diet.
- **Homeopathy** – for a homeopath, the symptoms of the disease are much more important than the ulcer itself. A homeopath not only tries to heal the ulcer but also tries to remove the cause of the ulcer as well as the tendency for a relapse. Examples of homeopathic medicines used for stomach ulcers are argentum-nit, arsenic-alb, hydrastis, kali-bichrom, phosphorus, uranium-nit, terebintha, atropine, geranium, natrum-phos, medorrhinum, merc-cor, ornithogalum, lycopodium, pulsatilla and graphites.

THE 10 FACTS ABOUT ULCER TREATMENTS THAT DOCTORS WON'T TELL YOU ABOUT...

These important facts demonstrate how ineffective ulcer treatments really are – cold facts that have purposely been kept from you by health professionals and drug companies.

The sad fact is that nearly ALL doctors already know about these facts, because they all experience it almost all the time in their own practices – and with their own patients.

“The biggest cause of failure is due to patients not being able to complete their course of treatment...and this is attributed directly to the harsh and well documented negative effects of prescribed treatments”

- #1 – Most doctors simply have no options other than antibiotic treatments when it comes to prescribing treatments for H. pylori infections. The prescription will almost always be either a Triple Therapy (or Quadruple Therapy if the Triple Therapy fails)
- #2 – Doctors highly recommend drug therapy – yet they cannot guarantee that their prescribed treatment will work.
- #3 – H. pylori is becoming increasingly resistant to antibiotic treatments.
- #4 – Thousands of ulcer sufferers have taken more than 4 courses of the SAME antibiotic treatment- yet they still suffer from stomach ulcers and H. pylori.
- #5 – Approximately 65% of patients infected with H. pylori are simultaneously infected with Candida Albicans, and they don't even know about it!
- #6 – Some doctors spend more time treating negative side effects of Triple Therapy, than they do treating the stomach ulcer or H. pylori infection.
- #7 – Getting the right results after an H. pylori treatment is crucial, yet patients are literally forced into throwing good money away due to Blood Test results (these should never be used after treatment)
- #8 – The latest drugs being produced for the treatment of H. pylori infections are now being made more powerful in an attempt to be more effective – but sadly the negative side effects are only getting worse (this is the main cause of patients abandoning treatment.)
- #9 – The ONLY way to effectively CURE stomach ulcers caused by H. pylori infection, is to REMOVE THE CAUSE – not the symptoms.
- #10 – Many ‘old school’ doctors still hold on to the outdated ‘No Acid, No Ulcer’ mentality, and insist on treating the symptoms of Acid Reflux (GERD) only.

SOME NEGATIVE SIDE EFFECTS YOU NEED TO BE AWARE OF...

For most people stomach ulcer and H. pylori issues are first dealt with by a Doctor. The most widely prescribed treatment is known as Triple Therapy, and if that does not work then it may be followed by Quadruple Therapy. Both of these are antibiotic based and as such there are well documented and widely published negative effects that you need to be aware of BEFORE you take these treatments.

These include; Joint pain, diarrhea, dizziness, fever, flu-like symptoms, stomach upset, low blood pressure, kidney damage, increased liver enzymes, mouth ulcers, nausea, light sensitivity, itching, rash, skin discoloration, hives, vomiting, heartburn, shortness of breath, blood disorders and loss of appetite. Obviously these are fairly extensive and can be quite harmful, and therefore worthy of concern.

SOME SIMPLE STEPS TO HELP YOU FIND A SAFE AND EFFECTIVE TREATMENT

When you are suffering from stomach ulcers, the most reassuring thing you need to know is that you can rely on your treatment to work, without causing you any further problems due to negative side effects.

You should also know that by taking any treatment which is not both clinically and scientifically proven, or even guaranteed to work for you, then you run the risks of wasting your money, and staying unwell for as long as it takes to find a treatment that does work.

Right now, you are about to learn just how easily and quickly you can end your suffering, and avoid any further disappointments.

Some basic tips about treatments...

Ready to learn how to establish if a treatment will be effective? It will be well worth your time to check these 3 simple tips, and the '7 Questions' below.

TIP 1 – Make sure the manufacturers of the treatment are prepared to back their own product by checking for testimonials and guarantees and look for a track record.

TIP 2 – Make sure the treatment will work without causing any negative effects. In other words, it must be BE KIND TO YOUR BODY!

TIP 3 – Check for published clinical and scientific proof, and make sure it comes from a reliable source.

Beware of remedies when clinical tests are based on a sample group of under 40 people, or when a true success rate is not divulged, or when there is no guarantee.

WHAT IS THE MAIN CAUSE OF AN ULCER?

It's not stress or spicy foods....

Thinking the cause of an ulcer is either too much hot spicy food or a stressed-out lifestyle, is a school of thought that you can dismiss right now. Instead, scientific tests have proven that a small 'stealth invader' bacteria colonizes your GI tract without you even knowing about it, and it can cause some serious health problems if left unattended.

THE NO.1 CAUSE OF AN ULCER

No.1 position is held firmly by the bacteria known as H. pylori (or Helicobacter pylori). With nearly 3 in every 4 people infected, this is the most wide spread infection known to man.

Helico what? Well, its name may be bad enough to put you off, but what this little corkscrew bacterium can do to you is the what you really have to worry about.

H. pylori is responsible for causing 80% to 90% of all peptic ulcers and the World Health Organization reports that it is also present in 50% of all new gastric cancer cases.

Your stomach is naturally designed to protect itself against ulcers. A slimy layer of mucus protects your stomach lining against powerful acids (pepsin and hydrochloric acid). These acids are extremely harmful to unprotected body tissue, but at the same time are absolutely essential for proper digestion.

There is a fine balance that has to be kept between the aggressive acids and the defensive mucous layers. When that delicate balance is broken, ulcers can develop. H. pylori can upset this balance by producing urease which eventually neutralizes the stomach's acid and allows H. pylori to thrive in an acid free zone.

THE NO. 2 CAUSE OF AN ULCER

The second biggest cause of ulcers is through regular use of Pain Killers – in particular Non-steroidal Anti-Inflammatory Drugs (more often referred to as NSAID's).

These drugs typically contain aspirin or ibuprofen (and others) and basically make your stomach lining vulnerable to the harmful effects of acid and pepsin, by blocking the natural secretion of mucus needed to protect your stomach lining. This allows H. pylori to get through your stomach acid and into your stomach lining.

In the meantime the 'antacid' effect fools your stomach into producing more acid. This process upsets that fine balance and sets you up for a peptic ulcer or chronic heartburn.

If you really have to take these NSAID's, then do so only when necessary and always take them with meals. This will greatly reduce your risk of getting an ulcer, or more ulcers in the future.
[Learn More about Treatment of NSAID related Ulcers Here.](#)

OTHER MINOR CAUSES OF ULCERS

There are also some other contributing causes or factors as well that may aggravate or encourage the development of ulcers, but these are fairly low risk by comparison to H. pylori and NSAID's.

Here are the lesser causes of ulcers – most of these are to do with your lifestyle. It seems the “pleasure” of smoking and drinking can hurt you in the end – if you over-indulge that is! So, if your lifestyle has been, (or could be) the cause of an ulcer for you, then you have to ask yourself “IS IT REALLY WORTH IT?”. Only you can be the judge of that!

Unbalanced Diet

Common sense with eating can avoid future problems if you don't already have an ulcer. See our easy-to-follow ulcer diet – don't worry, it is EASY and you can still enjoy life – most of it is just plain old common sense!

Smoking

Cigarette smoking is a definite cause of an ulcer. The nicotine in tobacco increases the amount of stomach acid and concentration of stomach acid, (which again upsets the all-important balance) and this will increase your risk of an ulcer. The healing process may also be slowed by tobacco and nicotine intake.

Alcohol Consumption

Peptic ulcers have been found to be more common in heavy drinkers who have cirrhosis of the liver. Alcohol irritates and erodes the mucous lining of your stomach. This causes the volume of stomach acid to increase to a higher level than your stomach naturally needs. It is not proven that alcohol alone can be the sole cause of an ulcer or whether H. pylori bacteria or NSAID's must also be present.

Stress

Stress alone cannot be the sole cause of an ulcer, but it is considered as a contributing factor. Like smoking, both emotional and physical stress will delay the healing process. Physical stress can increase the risk of developing gastric ulcers.

Caffeine

Caffeine intake also increases the amount of stomach acid and concentration of stomach acid and can worsen an existing ulcer. The increase in your stomach acid levels is usually not due to caffeine only, and there will always be a partner to this – such as H. pylori, smoking or alcohol consumption. There are many people that do all 3, and they drink copious quantities of coffee as well.

Acid and Pepsin

Too much acid and pepsin can damage a healthy stomach lining and cause ulcers. Most times the damage is caused by other factors first, weakening the stomach linings protective mucus layer defenses to a point when even an ordinary level of gastric acid can cause an ulcer. Too much acid can also cause acid reflux, or GERD, which is chronic heartburn.

Family History

If your direct blood relatives have suffered from duodenal ulcers, and blood group O is also present in the family, then you are more at risk of getting this type of ulcer. Other than this there is no known correlation here. This is probably the least likely cause of an ulcer and is not worthy of undue worry.

NSAID'S AND STOMACH ULCERS

The 2nd Biggest Cause of Ulcers....

NSAID's are the 2nd biggest cause of ulcers. 100 million prescriptions are written in the United States for NSAID's, and a further 30 billion NSAID tablets are sold over-the-counter (without prescriptions) annually – that puts a lot of people at risk of developing peptic ulcers.

NSAID's are currently these are the world's most heavily, and most frequently prescribed drugs. The reason for this is that they are widely used for several common health conditions. For example, Aspirin is commonly used to prevent cardiovascular problems, while prescription and over-the-counter (OTC) NSAID's are frequently used for treatment of muscular pain, bone related discomfort such as arthritis pain, and inflammation.

1 in every 5 Americans is treated with NSAID's every year.
7 in every 10 people over the age of 65 use NSAID's weekly.
3 in every 10 people use NSAID's daily.

We also know that these non-steroidal anti-inflammatory drugs cause ulcers. The average risks for gastric ulcers are nearly 4% with less than 2 weeks use of NSAID's, and 7% with more than 4 weeks use of these drugs. For duodenal ulcers the average risks were 3.0% with less than 2 weeks use and 4.0% with more than 4 weeks use.

NSAID's - the Side Effects and Deaths....

The problem with non-steroidal anti-inflammatory drugs is that people are unaware of the side effects and self-prescribe in ignorance, because these drugs are available without prescription. To give you an idea, 7% of men and 12% of women used prescription NSAID's, while 20% of men and 30% of women used non-prescription NSAID's.

The gastrointestinal consequences of long-term NSAID use are significant. A recent US study has shown that the NSAID-related gastrointestinal death rate is higher than the death rates of cervical cancer, malignant melanoma and asthma.

The gastrointestinal consequences of long-term NSAID use are significant. A recent US study has shown that the NSAID-related gastrointestinal death rates are higher than the death rates of cervical cancer, malignant melanoma and asthma.

In the United States over 16,000 patients die each year due to NSAID-related gastrointestinal side-effects and a further 100,000 patients end up in hospital. That equates to nearly 50 NSAID-related deaths and 300 hospitalizations per day -this is a situation of epidemic proportion!!

How NSAID's Cause Ulcers

NSAID's interferes with the stomach's ability to protect itself from acidic digestive juices (gastric acid), and this is the primary cause of ulcers. Normally the stomach has 3 main defenses against gastric acid:

- the mucus layer that coats the stomach lining and shields it from stomach acid.
- the chemical bicarbonate that neutralizes stomach acid.
- blood circulation to the stomach lining that aids in cell renewal and repair.

NSAID's disrupts all three of these defense mechanisms. And when your stomach's defenses are down, even normal levels of gastric acids will damage the unprotected stomach lining and cause ulcers.

The good news is that NSAID-induced ulcers usually start healing as soon as you stop taking your medication. To speed up the healing process and relieve symptoms your doctor will probably recommend taking antacids to neutralize the acid.

H2-blockers or proton-pump inhibitors can also decrease the amount of acid the stomach produces, but this is an unnatural process, and you could find yourself undernourished. And of course, there are the side effects of these medications to consider as well.

If you have an NSAID ulcer and you have also tested positive for H. pylori, then it is highly recommended that this bacterium is eradicated. More drugs and more nasty side effects? No, not necessarily! H. pylori can be eradicated with the use of 100% natural remedies and because they are natural you won't suffer from negative effects either.

If you are taking these drugs and you think you have any symptoms of a peptic ulcer, please see your doctor a diagnosis. Delaying this can lead to complications. Surgery may be necessary if your ulcer recurs or fails to heal, or if your ulcer starts bleeding.

H. PYLORI, NSAID'S AND STOMACH ULCERS....

Both H. pylori and NSAID's cause ulcers, and there appears to be a relationship between the two. You can see from the following that eradicating H. pylori in people who are taking NSAID's is a good thing. In a recent test, 300 patients who needed NSAID treatment were tested for H. pylori. 165 patients tested positive.

Of these 165 patients, 80 were treated with non-steroidal anti-inflammatory drugs without eradicating H. pylori. Another 85 were treated for H. pylori with antibiotics (only 58% effective) before starting NSAID treatment.

Before treatment was started none of the patients had any trace of stomach ulcers. After eight weeks, endoscopy was performed and it was found that 26 of the 85 patients (or 30%) who had not had successful H. pylori treatment, had an ulcer. Of the 49 patients with successful eradication of H. pylori, only 1 patient (or 2%) had an ulcer.

The results show that eradication of H. pylori should be recommended for those at highest risk (age related – older people are at higher risk) and also for anyone who has been being prescribed long-term NSAID treatment.

Need to treat your ulcers or H. pylori... ..and you have to take NSAID's?

After years of research, a tried and tested natural solution has emerged into the global market, and this one has already been used by thousands of customers who have to take NSAID's at the same time.

This is a complete breakthrough in the treatment of H. pylori bacteria (the main cause of ulcers), and the main reason for this is that it is completely non-toxic and safe to take with any other medications.

Why take a chance on remedies or products with known problems or negative effects, or those which do not carry any guarantees? In fact, why even take a chance on your health with any treatment that has no scientific and clinical proof that it can work?

WHAT TREATMENT TO USE?

Sometimes you may feel like you are expecting too much from your treatment, especially if you have already failed with a prescribed treatment. The fact that this happens to about 70% of people visiting our site means you are not alone.

If you don't want to take a chance on accepting any treatment that has any chance of failure, then we strongly urge you to keep reading.... because we want you to have the real facts so you can make an educated decision about choosing a treatment that will work for you.

Making a rash decision about your treatment could mean you having to endure weeks, or possibly months, of ongoing medication – plus all those harsh negative effects.

REMEMBER! The main cause of all types of stomach ulcers is *Helicobacter Pylori*.

NO HELICOBACTER PYLORI => NO STOMACH ULCERS

Until our visitors eventually find their way here, most do not know that a safe, yet highly effective natural treatment for *H. pylori* is now available to them. To date this 100% natural treatment has been used successfully by over 10 000 happy customers since 2006 – with an astounding success rate of over 98%.

Fully Guaranteed - and No Negative Effects?

The best news is that this all-natural treatment is fully guaranteed to remove all traces of *H. pylori* from your digestive system – and without any negative effects.

Want some more in depth information about Stomach Ulcers & *H. pylori*?

Our Natural Health team has accumulated a wealth of information on *H. pylori* and have compiled an informative and essential report which contains everything you should know about *H. pylori*.

This information is a collection of the knowledge and experience gathered from a number of doctors treating their own patients in their own practices – and we sincerely hope this information will give you the edge in making an informed and educated decision about your treatment.....

STOMACH ULCER FACTS

If you are suffering with, or just think you may have, a stomach ulcer then you should get to know all the facts about stomach ulcers. This important information could save you from months of unnecessary stress and suffering, by putting you on the right track – right now!

Take a few minutes to learn the truth about why most doctors can't (and sometimes won't) tell you why the most commonly prescribed treatments fail nearly 70% of the time, and how this can affect you in ways you may not have thought possible.

We trust you will find this helpful in avoiding any further stress, suffering or disappointment when dealing with your stomach ulcer condition, so that you can regain your good health sooner.

SOME BASIC FACTS YOU HAVE TO KNOW ABOUT STOMACH ULCERS FIRST...

These are the facts about stomach ulcers most people don't know about. Some of them may come as a shock if you think that this doesn't happen to a lot of people;

Up to 90% of all types of stomach ulcers are caused by infections of *Helicobacter Pylori*, and NOT by spicy foods or by stress. *Helicobacter Pylori* can easily be transmitted from person to person by kissing, and also through sexual contact.

In poorer countries, 50% of the population are infected with *H. pylori* in childhood, and up to 90% of adult populations are also infected.

The World Health Organization reported that *H. pylori* is present in 50% of all new gastric cancer cases. Approximately 1 in every 8 people will develop duodenal ulcers or stomach ulcers in their lifetime. Stomach Ulcers affect more than 5 million people each year in the USA alone.

Every year over 300,000 people round the world have ulcer related surgery because of persistent symptoms or complications. Each year nearly 6,000 people die of ulcer-related complications in the USA alone.

Another major cause of ulcers is the prolonged use of aspirin and other painkillers, commonly known as NSAID's. Nearly 3 in every 4 gastric ulcers are caused by *H. pylori*.

30% of people aged between 30 – 40 years are infected with *H. pylori*, as are 40% of people aged between 40 – 50 years being infected, and 50% of people aged between 50 – 60 years being infected, and so on.

OTHER INTERESTING FACTS ABOUT ULCERS

- People of any age can suffer from ulcers.
- Women are just as prone to stomach ulcers as men are.
- Peptic ulcers will affect nearly 1 in 10 of all adults in Western countries.
- About 1 in every 20 gastric ulcers lead to stomach cancer.
- Duodenal ulcers may occur in adults of any age.
- Gastric ulcers affect mainly adults older than 40 years
- The older you get, the more prone you will become to *H. pylori* infection.

OVERLAPPING SYMPTOMS OF GI TRACT DISORDERS

Even Doctors get confused by the similar symptoms of GI disorders....

There are many overlapping symptoms when it comes to Gastrointestinal Tract illnesses, diseases and infections. Make sure you don't get confused by these, or you may end up taking a treatment for the wrong disorder.

Unraveling the confusion of Overlapping Symptoms...

This is a very important topic as there are many symptoms that overlap when it comes to Gastrointestinal Tract illnesses, diseases and infections. It is absolutely necessary for you to understand this, so that you are not confused by these before, during or even after any treatment you take.

For example, you may have experienced certain symptoms and your Doctor or Health Care Professional then does a diagnosis and pathology test that concludes you are H. pylori positive. Next, you complete a treatment to clear your H. pylori infection – only to find the same old symptoms show up soon after treatment.

This does not necessarily mean that your treatment has not worked, and that you are still infected with the H. pylori bacteria. You might be thinking that this doesn't make sense.

So, let us explain this...

When doing the initial diagnosis, Doctors normally tend to assess symptoms for the more common illnesses, diseases and infections. This also applies to the range of laboratory tests that they request. A good example of this is that we have found that between 65 to 70% of patients that test positive for H. pylori, will also test positive for Candida Albicans.

What is even more interesting is that the symptoms for H. pylori are VERY similar to the symptoms of Candida Albicans.

HERE'S THE PROBLEM!

The pathology tests used to determine status of H. pylori and Candida Albicans are usually different – so it happens that Candida infection, or Candida overgrowth, is largely overlooked.

Yet, most patients being treated for H. pylori have symptoms that relate to both H. pylori and Candida Albicans, so it is easy for doctors to get confused by these symptoms and to treat the wrong condition over and over again.

The golden rule is that if you experience persistent symptoms after a treatment, then this is a clear indication that you have a further underlying complication that needs to be identified and treated. Staying with the example above, and with the point about persistent symptoms, we would like to make a point about the difference between H. pylori and Candida Albicans infections.

CANDIDA ALBICANS – When Candida Albicans is activated, the yeast infection tends to multiply very rapidly. This is because the normal 60:40 ratio of 'good versus bad bacteria' becomes something like 20:80 where the bad bacteria takes control, leaving no hope for the good bacteria to cope.

H. PYLORI – By comparison H. pylori can take years to colonize in your stomach. It happens so slowly that we refer to this bacteria as a 'stealth invader'. In view of the above, we would suggest you should insist that your Health Care Professional does a blood test to determine your Candida Albicans status.

DEFINITION OF A STOMACH ULCER

A stomach ulcer is a general term that includes several other types of ulcers found in the digestive system. Over 810 million people have stomach ulcers right now, and some of them may not even be aware that a stomach ulcer could be the cause their abdominal aches and pains.

So what is a Stomach Ulcer?

There are many definitions out there with medical folk competing to see who can come up with the longest, most technical version. For example:

- A raw or inflamed area of the stomach lining.”
- “A Peptic ulcer is an ulcer of one of the areas of the gastrointestinal tract that is usually acidic.”
- “A break in the stomach lining that allows acid and digestive juices to damage the tissues beneath the lining. It can cause vomiting, pain and bleeding.”
- “A necrotic lesion characterized by a crater-like erosion of the stomach wall (gastric ulcer) or the duodenum (duodenal ulcer) often associated with painful symptoms.”

Well, at least you got the idea. The simplest definition we can offer is this;

A stomach ulcer is a small hole or erosion in the lining of the esophagus, stomach or duodenum. It is not much more than that! It sounds simple, but it really is a fairly serious condition that needs to be taken care of.

The most common type of ulcer found in patients in Western countries is the duodenal ulcer, which is located in the small intestine, which is connected to the bottom part of the stomach.

Who gets ulcers?

Adults older than 40 years of age are most susceptible to gastric ulcers while nearly 1 in 10 of all adults in Western countries are affected by peptic ulcers. This figure is even higher in Third World countries. Younger people are not immune – they are simply less likely to be affected. Apparently, the percentage chance of you getting an ulcer is directly related to your age – so as a rule of thumb we can assume a 1 year old has a 1% chance, while an 80 year old has an 80% chance.

Are ulcers dangerous?

Most ulcers are not dangerous, but when left too long they can cause internal bleeding. Of course, massive bleeding can be fatal.

Can Ulcers be cured?

Yes, most ulcers can be cured. The treatment of ulcers will differ according to the type of ulcer you may have. If you are infected with H. pylori then we recommend you try a natural remedy.

Our Natural Health team has accumulated a wealth of information on H. pylori and have compiled an informative and essential report which contains everything you should know about H. pylori.

This information is a collection of the knowledge and experience gathered from doctors around the world treating their own patients in their own practices – and we sincerely hope this information will give you the edge in making an informed decision about your treatment.....

We suggest you learn and understand more about H. pylori bacteria first, so that you can make an informed decision on the type of treatment you should take.

SOME GOOD ADVICE ON AVOIDING ULCERS...

See your doctor BEFORE you have any excruciating symptoms...

“But why should I see a doctor if there is nothing wrong with me?” – you ask? Well, to be really safe, you should ask your doctor to check you out for an H. pylori infection as this is the cause of over 80% of all stomach ulcers.

In Western countries about 20% to 30% of people under the age of 40 have the bacteria, while it infects around 50% – 60% of people over age 60. See the relation to the rule of thumb pointed out above? Note that not all people infected with H. pylori will get an ulcer – some people’s systems can tolerate the presence of H. pylori and may not be affected at all.

Painkillers and Anti-inflammatory drugs

Reduce your intake, or even better, stop taking painkillers that contain ibuprofen or aspirin for prolonged periods. Too many people take these for the tiniest of pains, not knowing they could be setting themselves up for the far worse pain that an ulcer is going to cause them!

Eat the correct foods

Although food does not cause ulcers, good nourishment is always a good idea. Statistics show that ulcers are more common amongst under nourished people. An easy-to-follow diet can help you become aware of the food sources that can cause an increase in acid levels.

Aim for a healthier lifestyle

Your stressful job will not cause an ulcer. Neither will an average intake of alcohol. Smoking in moderation is a bit riskier. Not one of these habits is going to really hurt you but pushing any of these to excess (and/or a combination of these), you are setting the stage for stomach ulcers, especially if you are infected with H. pylori. Get to know what the main causes of ulcers are, if you don't know the causes of ulcers, you won't know what to look out for.

DIGESTIVE INFLAMMATION & DISORDERS

CHAPTER 3

STOMACH CANCER

A deadly disease that is closely linked to H. pylori infections. H. pylori is found to be present in 50% of new gastric cancer cases. Stomach cancer is twice as common in men as it is in women, and most people who develop this type of cancer are over the age of 50 years. Cancer of the stomach is very rare in people under 40 years of age. Latest tests show that 1 in every 7 people are at risk of getting stomach cancer.

Interestingly enough, both the causes and the symptoms of stomach cancer (or gastric cancer) are almost identical to those of peptic ulcers.

It is important to note that the chances are far greater that you will have a peptic ulcer if you are showing any of these symptoms, so do not be too alarmed!

Of course if your ulcers are already at an advanced stage, then you will need further medical advice to see if you are at risk.

Only a doctor will be able to give you a proper diagnosis. The diagnosis methods for stomach cancer are very similar to the methods used for diagnosing peptic ulcers.

WHAT ARE THE MAIN CAUSES OF STOMACH CANCER?

Stomach cancer can be caused by a number of factors that damage the DNA in your stomach cells. When the DNA is damaged, healthy cells can grow out of control and form a tumor (a mass of malignant cells). These factors include:

- **H. pylori infection** – 75% of the world's population is infected with a bacterium called Helicobacter pylori (H. pylori) that lives deep in the mucous layer which coats the lining of your stomach. It is the primary cause of stomach ulcers, accounting for at least 80 percent of all cases. And the World Health Organization has indicated that close to 50% of the annual new cases of stomach cancer can also be attributed to H. pylori infection.
- **Nitrates and nitrites** - these chemicals are added to certain foods, such as processed or cured meats such as ham and bacon, sausages and other cold meats you normally find down at the deli. Nitrates and nitrites combine with other substances in your stomach to form carcinogens, which are known to cause stomach cancer.

- **Salted, smoked or pickled foods and red meat** – in countries where consumption of salted meat and fish and pickled vegetables is high, the corresponding rates of stomach cancer are also high. Consuming high levels of red meat, especially when the meat is barbecued or well done, has also been linked to stomach cancer.
- **Tobacco and alcohol use** – Both can irritate the stomach lining and are especially likely to cause cancer in the upper stomach area.
- **Low-income groups** – children and adults from low income groups are more likely to develop stomach cancer than those in higher income groups. This is due to several reasons. The main problem is in poor countries with poor sanitation and unhygienic living conditions where *H. pylori* spreads quite quickly.

Tests show 1 in every 7 people have a high risk of stomach cancer.
 4.6 billion people are infected across the world with the *Helicobacter Pylori*.
 Having stomach ulcers caused by an infection of *Helicobacter pylori* puts
 you at higher risk of stomach cancer!

Types of Stomach Cancer

Most stomach cancers start in the glandular cells in the mucous layer which coats the lining of your stomach and are called adenocarcinomas.
 There are 2 types of adenocarcinomas.

- **Type 1** occurs in the lower stomach, close to your small intestine known as the duodenum. Type 1 is usually a result of a chronic infection with *H. pylori* bacterium, or a bad diet, or a combination of both.
- **Type 2** occurs throughout your stomach and is more than likely a result of genetic factors. Type 2 is aggressive and is more likely to spread than type 1. Type 2 can spread through the stomach wall to your lymph nodes, and will eventually spread to your pancreas, liver and colon.

Although most stomach cancers are adenocarcinomas, there are other forms of the disease, including:

- **Lymphomas** – these are usually caused by an infection of *H. pylori* and can be cured if detected early enough.
- **Carcinoid tumors** – these account for a very small percentage of stomach cancers. Carcinoid tumors start in the hormone-producing cells in your stomach – they grow very slowly and do not spread to other parts of the body as frequently as the more common stomach cancers do.
- **GIST's (or gastrointestinal stromal tumors)** – also account for a very small percentage of stomach cancers. They can be found anywhere in the digestive tract, but most are found in the stomach. GIST's are not the same as other types of gastric cancers. They originate from different cells and require different treatment. GIST's can be fatal in a short time because they spread through your body very quickly.

TREATMENT OF STOMACH CANCER

The primary goal of any effective treatment is to remove the cancer. Choosing a treatment plan is a major decision, and it's important to spend some time researching all the options to make sure the treatment you select is right for you. It is always worthwhile getting a second opinion if you are unsure.

Treatment options include the following:

- **Surgery** – this is the most common treatment for stomach cancer. It may involve removing part or all of your stomach and possibly some of the surrounding tissues and lymph nodes as well. After a part of your stomach has been removed, the remaining part of your stomach is connected to your esophagus and your small intestine. If your whole stomach is removed, your esophagus will be attached directly to your small intestine.
- **Chemotherapy** – drugs used to help kill cancer cells are taken orally or intravenously. Sometimes it may be the only treatment needed, but most often doctors use chemotherapy in conjunction with other therapies, like radiation. The problem is that these drugs affect both healthy cells and cancerous cells. The result is a range of very unpleasant side effects such as nausea and vomiting, fatigue, and because of a shortage of white blood cells there is an increased risk of infection.
- **Radiation therapy** – high-energy X-rays can be aimed to at cancer cells in this treatment. The upside of this is that the radiation affects only those parts of your body which the radiation beam passes through. Even though doctors take care to aim the beam in a way that least affects you, it is important to note that any tissue, even healthy tissue which is touched by radiation, can be damaged. Side effects may include a burn on your skin from the radiation, as well as nausea, vomiting, and fatigue.
- **Clinical trials** – if you are at an advanced stage, you may be offered participation in a clinical trial. You must remember that the treatments used in clinical trials are experimental and have no recorded success rates. You could experience unexpected side effects, and there will be no guarantees offered.

CANDIDA ALBICANS (Candidiasis)

WHAT IS CANDIDA ALBICANS?

The Candida Albicans yeast is part of the gut flora, a group of microorganisms that live in your mouth and intestine. As and when the Candida Albicans populations start to get out of control, it weakens the intestinal wall, penetrates the bloodstream and releases toxic byproducts throughout the body. These toxic byproducts, as they spread, cause damage to your body tissues and organs and thus wreak havoc on your immune system. Candida Albicans is an opportunistic fungus (a type of yeast) that is the cause of many undesirable symptoms ranging from fatigue, weight gain, joint pain and excessive gas.

Many of us has Candida Albicans in our gut and a large proportion of us have an overgrowth of Candida, called Candidiasis. Trouble starts when there is some change in your body that allows it to overgrow. This change could be anything from a few treatments with antibiotics or a diet rich in sugar and carbohydrates or even stress. The major waste product of the yeast cell activity is Acetaldehyde, a poisonous toxin that promotes free radical activity in the body. Acetaldehyde is also converted by the liver into Ethanol (Alcohol), which might result in feeling drunk or hung over.

SO WHY IS CANDIDA A BAD THING?

Normally it is not, if the Candida Albicans population is kept under control by the friendly gut bacteria. However, when your immune system is down, the toxins produced by the Candida Albicans overgrowth become a struggle for the immune system to cope with. Many doctors do not recognize the systemic problems caused by Candidiasis and in the main only treat symptoms such as vaginal infection and oral thrush.

A large number of people who have completed a course of Matula Herbal Tea for treatment of their stomach ulcer, report back that the symptoms caused by Candida Albicans have greatly subsided and indeed been eliminated. This is no doubt due to the eradication by Matula Herbal Tea of [Helicobacter Pylori](#).

HELICOBACTER PYLORI VS CANDIDA ALBICANS

Between 65 to 70% of patients that test positive for H. pylori, will also test positive for Candida Albicans. What is even more interesting is that the symptoms of H. pylori are VERY similar to the symptoms of Candida Albicans.

The pathology tests used to determine the status of H. pylori and Candida Albicans are usually different – so it happens that Candida infection, or Candida overgrowth, is largely overlooked.

Yet, most patients being treated for H. pylori have symptoms that relate to both H. pylori and Candida Albicans, so it is easy for doctors to get confused by these symptoms and to treat the wrong condition over and over again. The golden rule is that if you experience persistent symptoms after a treatment, then this is a clear indication that you have a further underlying complication that needs to be identified and treated.

Staying with the example above, and with the point about persistent symptoms, we would like to make a point about the difference between H. pylori and Candida Albicans infections.

By comparison H. pylori can take years to colonize in your stomach. In view of the above, we would suggest you should insist that your Health Care Professional does a blood test to determine your Candida Albicans status.

HOW DO YOU GET IT?

Candida Albicans enters us as infants during or shortly after we are born. Usually, *the growth of the yeast is kept in check by our immune system* and thus produces no overt symptoms. But, should your immune response weaken, the condition known as *oral thrush (sore white patches in your mouth that looks like plaque)* can occur as a result. By six months of age, 90% of all babies test positive for Candida. And by adulthood, virtually all of us play host to Candida Albicans and are thus engaged in a life-long relationship.

Candida co-exists in your body with many species of bacteria in a competitive balance. The other bacteria partly keep your body's Candida growth in check – unless that balance is upset.

THE MAJOR RISK FACTORS WHICH MAY PREDISPOSE ONE TO THE PROLIFERATION OF CANDIDA ARE:

Antibiotics & Sulfa Drugs - Probably the chief culprit of all is any form of **antibiotics that kills all bacteria**. They do not distinguish good bacteria from bad. Antibiotics kill your "good" flora which normally keeps the Candida under control. This allows for the unchecked growth of Candida in your intestinal tract. *It is normally difficult to recover yeast culture from bodily surfaces.*

The prevalence today of Candida may be most directly related to the widespread societal exposure to antibiotics -- from prescriptions for colds, infections, acne and from additional consumption of antibiotic-treated foods such as meats, dairy, poultry and eggs. Notably, antibiotics do not kill viruses; they only destroy bacteria. Yet, they are universally prescribed for all colds, flus and other viral problems. Such indiscriminate and extensive use of antibiotics is not only considered a primary cause of Candida overgrowth but is recently being found to be responsible for the unbridled development of "killer" bacteria such as MRSA (Methicillin-resistant Staphylococcus aureus). This is a vicious hard to destroy bacteria that starts off as an external sore on your skin that can infiltrate internally into your organs, which eventually can lead to your death if your immune system is weak.

Steroid Hormones, Immunosuppressant Drugs - Drugs like cortisone which treats severe allergic problems by paralyzing your immune system's ability to react.

Pregnancy, Multiple Pregnancies or Birth Control Pills - These changes in a woman's body can upset the body's hormonal balance causing Candida to start growing.

Diets High in Carbohydrate And Sugar Intake - Yeast And Yeast Product as Well As Molds And Fermented Foods

Prolonged Exposure to Environmental Molds - This is a very important point to understand if you wish to get rid of an overgrowth problem. It suggests that Candida is not so much a problem as your body's own failure to control it!

WHAT ARE THE SIGNS OF CANDIDA INFECTION?

The result of heightened Candida overgrowth is a list of adverse symptoms of considerable length. Basically, the characteristics of Candida overgrowth fall under three categories, those affecting:

1. The gastrointestinal and genitourinary tracts
2. Allergic responses
3. Mental/emotional manifestations

Initially the signs will show near the sights of the original yeast colonies. Most often the first signs are seen in conditions such as:

- Nasal Congestion And Discharge
- Nasal Itching
- Blisters In The Mouth
- Sore Or Dry Throat
- Abdominal Pain
- Belching
- Bloating
- Heartburn
- Constipation
- Diarrhea
- Rectal Burning Or Itching
- Vaginal Discharge
- Vaginal Itching Or Burning
- Increasingly Worsening PMS Symptoms
- Prostatitis
- Impotence
- Frequent Urination
- Burning On Urination
- Bladder Infections

However, if your immune system remains weak long enough, **Candida can spread to all parts of your body** causing additional problems such as:

- Fatigue
- Drowsiness
- Lack of co-ordination
- Lack of concentration
- Mood swings
- Dizziness
- Headaches
- Bad breath
- Coughing & wheezing
- Joint swelling
- Arthritis
- Failing vision
- Spots in front of the eyes
- Ear pain
- Deafness
- Burning or tearing eyes
- Muscle aches
- Depression
- Eczema and psoriasis

In addition, **79 different toxic products are known to be released by Candida**, which places a considerable burden on your immune system. These get into your bloodstream and travel to all the parts of your body where they may give rise to a host of adverse symptoms.

The Candida **yeast colonies can dig deep into your intestinal walls, damaging your bowel wall in their colonization. Candida can also attack the immune system, causing suppressor cell disease**, in which your immune system produces antibodies to everything at the slightest provocation, resulting in extreme sensitivities.

If not controlled it can be dangerous. The persistent, constant challenge to your immune system by an ever-increasing, **long-term overgrowth of Candida can eventually serve to wear down your immune system and cause a seriously weakened capacity for resistance to disease.**

Women are more likely to get Candida overgrowth than are men. This is related to the female sex hormone progesterone which is elevated in the last half of the menstrual cycle. Progesterone increases the amount of glycogen (animal starch, easily converted to sugar) in the vaginal tissues which provide an ideal growth medium for Candida. Progesterone levels also elevate during pregnancy. Men are affected less frequently but are by no means invulnerable.

OUR RECOMMENDED TEST FOR CANDIDA OVERGROWTH

There is a Test that we highly recommend for both H. pylori and Candida Albicans:

It is the HPSA test GI Effects – Stool Analysis

HOW DO YOU GET RID OF CANDIDA OVERGROWTH?

To effectively treat Candida overgrowth there are four objectives:

1. To fully understand the concept of Candida as a chronic infection and to appreciate that treating it is a lifestyle change. It may take some time to treat, unlike the commonly understood treatment of bacterial infections with antibiotics. You must **commit to treating Candida fully** to really benefit.
2. To eradicate the Candida using anti-Candida products as well as **deprive the yeast of the food on which it flourishes (namely, sweets, sugars, refined grains, fermented foods, yeast products).**
3. Thirdly, to re-introduce good flora by **taking a good probiotic.**
4. And finally, to restore biochemical balance to your body and strength to your immune system which will allow your body once again to regain and maintain control over Candida growth.
5. **Prolonged usage of Matula Herbal Tea has been shown to be very beneficial to people who are suffering from Candida overgrowth in the intestines.** For external infections like vaginal thrush and fungal skin infections, the tea can be applied to affected areas twice a day.

RECOMMENDED COURSE OF ACTION

ACID AND ALKALINE BALANCE

Candida overgrowth manifests as hyper-acidity in your body. An acid environment is ideal to foster increased growth of yeast and fungus. Changes may also be made by selecting foods that are more alkaline than acid forming. See Acid & Alkaline forming Food List below.

It is a commonly recognized and an accepted fact that your immune system's efficiency is highly dependent on the proper biochemical balance in your body. This of course is dependent on proper and adequate nutrition to supply your body with all the required biochemical constituents (vitamins, minerals, enzymes, intrinsic factors, etc.).

Usually, such diets require the considerable restriction of carbohydrates (beans, fruits, breads, grains, cereals, peas, sweet potatoes and some squashes) sometimes altogether.

Although for some metabolic types this may be helpful, for others it may be responsible for worsening a condition lacking proper nutrition.

Starving the yeast is one thing, but starving yourself or unbalancing the biochemistry at the same time can only be weakening to your immune system and is therefore counter-productive.

In addition to the metabolic type diet, it is also recommended that you avoid foods which are known to stimulate Candida growth as much as possible until the Candida is brought under control. The foods upon which Candida are known to thrive and flourish include the following:

- **Sugar, Honey, Molasses, Syrup & High Quantities of Fruit or Juices**
- **Molds and Fermented Foods** Vinegar, cheese, soy sauce, sour cream, buttermilk, cider, tofu, ketchup, mustard, relish
- **Yeast Products** Brewer's yeast, yeast-based vitamins, buttermilk, dried fruits, melons and frozen or canned juices. This is especially important if you are yeast sensitive or yeast allergic. However, it should be understood that eating yeast products doesn't actually further the Candida, but it can prove irritating to anyone with an existing yeast sensitivity. Yeast products are not themselves, Candida yeast, and also, they are not live yeast. Many people with Candida overgrowth can handle them just fine.

DEALING WITH CANDIDA ALBICANS OVERGROWTH

This **is not** something that can be dealt with quickly. Because of the tenacity of this yeast and the relative difficulty of the dietary regime, Candida syndrome can last for quite some time. Doctors often had to treat patients for over a year before their tests came back clear. However, don't lose hope, because the whole way along the treatment path you will feel better and better.

The first step is to identify the possible cause or aggravating factor. After the cause is identified and eliminated, the treatment can begin. Treatment of Candida overgrowth includes adjusting your diet. The intention is to starve the Candida, bring in more beneficial bacteria and correct inflammation and nutritional imbalances. The strength of your general immune system should be addressed with as much intention as the Candida itself. To speed up your recovery process we suggest that you consult with a doctor of natural medicine to help with this last point.

HERE ARE SOME GENERAL DIETARY GUIDELINES AND SPECIFIC REMEDIES FOR CANDIDA OVERGROWTH:

As far as diet is concerned, you need to eliminate all 'foods' that feed Candida. Think 'what causes mould'?

Cut out all refined carbohydrates: *bread, flours, jams, sugars, pizza, cakes, pastries, cookies, chocolates, ice-cream, jellies, golden syrup, pastas.* Get the idea? Replace these with *brown rice, millet, buckwheat, quinoa, carob, rice cakes, corn cakes, rice flour, potato flour or other grain flours, polenta.* Some people need to cut even these alternatives out, and resort to a pure fat and protein diet.

Cut out dairy products especially *sweetened yogurts, cheese spreads, 'smelly' cheeses, yellow cheese and blue veined cheese.*

Cut out all vinegars, vinaigrettes, fermented alcohol (*wine, beer, cider*), *dried fruits, peanuts, pistachios and peanut butter.* **Avoid** *pickles and vinegar containing foods like mayonnaise, barbecue sauce, mustard sauce.* **Eliminate processed** *luncheon meats, commercial fruit juice, soya sauce, oxo, bovril and marmite.*

Limit your daily *fruit intake and avoid moldy or bruised fruits as well as fruits with high sugar content like melons and grapes.*

There is no limit on the number of vegetables, especially green leafy vegetables. **Very limited amounts of** *white cheese like cottage cheese or goats milk cheeses like feta are permitted.*

Remember to please find a Nutritionist who will determine your Metabolic Type so that you are able to identify the most suitable range of foods to include in your diet.

There are thousands of probiotic supplements available on the market. Researching all of them is difficult. Go for a product that has at least a 2 billion colony that can effectively pass through the acidic environment in your stomach without being destroyed. This way you are ensured of ingesting high numbers of active flora.

PROBIOTICS

- Replenish microflora in your intestinal tract for optimal balance
- Support optimal digestive and bowel health
- Support optimal cholesterol and blood pressure levels
- Help optimize vitamin and mineral absorption from your healthy diet

CHLORELLA

- Provides optimal support for your immune system
- Promotes natural detoxification in your body
- Supports your digestive system health, including regular and normal elimination
- Assists in supporting your ability to focus and concentrate
- Helps maintain a healthy pH balance

Oil of Oregano has been shown to be strongly anti-fungal. It also has some anti-viral properties. It is a strong antioxidant. It thus not only kills off excess fungus in your bowel, but also eases the strain on your immune system. Caprylic Acid active anti-fungal component of coconut oil. It is supportive of normal immune function and is strongly anti-fungal.

ACID REFLUX

WHAT IS ACID REFLUX?

Acid Reflux or **Gastro-esophageal Reflux Disease (GERD)** negatively affects the health and wellbeing of millions of people worldwide. Gastroesophageal reflux disease (GERD) is a chronic symptom of mucosal damage caused by stomach acid coming up from the stomach into the esophagus.

GERD is usually caused by changes in the barrier between the stomach and the esophagus, including abnormal relaxation of the lower esophageal sphincter, which normally holds the top of the stomach closed, impaired expulsion of gastric reflux from the esophagus, or a hiatal hernia.

The most common symptoms of GERD are indigestion and heartburn. GERD occurs when acid or bile from your stomach suddenly leaks back up through your esophagus (gullet) – usually when sleeping at night. It is an experience that causes sensitivity of the outer membrane/skin of your throat going into your stomach (esophageal lining).

If you allow GERD to become more frequent it will lead to inflammation (soreness and swelling) of your esophageal lining, this is called **esophagitis**.

GERD can be experienced with or without having esophagitis. However, the longer you leave acid or bile reflux untreated, the more likely it will cause damage to the esophagus that leads to esophagitis and in the advanced stages, esophageal cancer.

SYMPTOMS

As I have already pointed out briefly, the main symptom of GERD is heartburn. Heartburn is a form of indigestion that thankfully has nothing to do with your heart. It usually feels like a burning pain behind your breastbone (in the front of your chest, over the heart), and happens when stomach acid damages the inside of your esophagus.

You are more likely to experience Heartburn if one or more of the following activities are present:

- After eating a heavy meal
- Bending over
- Lifting
- Lying down, particularly on the back
- Smoking
- Being overweight
- Pregnancy

Symptoms tend to get worse after eating, especially after a large fatty meal.

If you are very sensitive to acid, you can develop symptoms without much reflux. However, some people are less affected by acid, and can have a lot of reflux without showing many symptoms.

You may also experience one or more of symptoms of GERD below:

- Inflammation of the stomach lining (gastritis),
- stomach pains caused by inflammation,
- an acidic, sour taste in your mouth,
- burning pain in your throat,
- flatulence, bloating and belching,
- burning pain in your throat and esophagus when you swallow hot drinks,
- regurgitating food (when food comes out of your stomach and back up your esophagus),
- nausea and vomiting, and
- in advanced stages of gastritis, vomiting blood.

CAUSES OF GERD

There are several causes that increase the frequency of GERD.

The first is that doctors simply prescribe anti-acid drugs that make matters worse because they lower acid levels in your stomach just when the acid is essential to optimize the digestion of the food you eat.

Inappropriate Prescription Of Anti-Acids

Doctors often ask two to three questions, without even testing stomach acid levels, and before you know it you have a Prescription of drugs to take. The most common treatment that doctors prescribe today is a proton pump inhibitor (called **Nexium**). A proton pump inhibitor is essentially a potent anti-acid. Nexium is a very expensive drug that at best will only mask the symptoms and certainly will not contribute towards restoration of good health. Therefore, Nexium is an inappropriate medication to treat acid or bile reflux (GERD). As with most allopathic drugs (conventional prescribed drugs) like Nexium and other branded allopathic drugs, they come with possible addictive properties together with several negative side effects.

The biggest cause of GERD is actually because of insufficient stomach acid. This will probably come as a major surprise to most of you reading this, **but it is the real truth.** As we get older, we tend to produce less hydrochloric acid and associated digestive enzymes that are essential to digest all the food we eat. If you have insufficient acid and associated enzymes in your stomach after eating a meal, the undigested food will simply not be able to begin the digestive process. The stagnant food sitting in your stomach then begins to ferment and shortly thereafter it putrefies whilst it is still in your stomach. This fermenting soup creates gas causing you to feel bloated with possible bouts of burping or flatulence (passing wind).

As your stomach is essentially a bag with a valve (Sphincter) at each end, the gas builds up causing the stomach to expand and stretch beyond normal levels. This expansion of the stomach lining then causes inflammation that in turn causes a great deal of pain and discomfort. This is called Gastritis.

When excess gas has built up, it must be released. This occurs mainly through flatulence, burping or, most commonly, a sudden release of acid or bile into your esophagus whilst you are asleep. **This is the sensation that we perceive to be the rush of acid when in fact it is the bile from the undigested food being putrefied in your stomach.** This happens mostly at night when we are sleeping because when the gas builds up beyond normal levels it will always be released through the path of least resistance, that just happens to be your lower esophageal sphincter (LES).

The above explanation is totally contrary towards the views expressed by both the advertising media (for Anti-acid drugs) and most Doctors, but it is the understanding that is necessary for you to understand how GERD can be treated highly effectively at once and for all.

Poor Sphincter Control

There is a sphincter (muscle) at the joint between your stomach and your esophagus. It relaxes to let food into your stomach but then tightens to stop stomach acid or bile coming out and back up into your esophagus. In some people, the sphincter muscle relaxes, and this causes acid or bile to reflux.

Having a HIATUS HERNIA can also cause poor sphincter control. In this type of hernia, part of the stomach pokes through your diaphragm (the main breathing muscle under the lungs). The muscles in your diaphragm are then stretched and don't allow the sphincter to completely close, so the acid or bile can then escape from your stomach back up into the esophagus.

Smoking Relaxes the Sphincter Muscles, So Makes Acid Reflux More Likely

Some people find that **particular foods** such as fatty foods, chocolate, or oranges, relaxes the sphincter, while others such as coffee and tomatoes directly irritate the Esophagus.

Particular Medicines

Certain chemical compounds found in medication can make GERD worse by relaxing the sphincter, for example Diazepam (also known as Valium or Antenex used for the treatment of anxiety, insomnia etc.). Others may directly irritate the esophagus, for example, potassium supplements.

Pressure on the Stomach

GERD can also happen when there is a lot of pressure on your stomach forcing the stomach contents out and back up into the esophagus.

This might happen after a very large meal, during pregnancy, if you are constipated, or when you wear clothes tight around the waist or bend forward.

According to one study, nearly three-quarters of patients with frequent GERD symptoms experience them at night. Patients with night-time GERD also tend to experience more severe pain than those whose symptoms occur at other times. One study found that patients with night-time pain reported levels of severity that were similar to those reported in angina and congestive heart failure.

The severity of heartburn does not necessarily indicate actual injury in the esophagus. For example, Barrett's esophagus, which causes precancerous changes in the esophagus, may trigger few symptoms, especially in elderly people. On the other hand, people can suffer severe heartburn without the presence of damage to the esophagus.

DYSPEPSIA

Up to half of GERD patients also have **dyspepsia**, a syndrome consisting of the following:

- Pain and discomfort in the upper abdomen
- Fullness in the stomach
- Nausea after eating

It is possible to have Dyspepsia without having GERD.

Regurgitation

Regurgitation is the feeling of acid backing up in the throat. Sometimes acid regurgitates as far as the mouth and be experienced as a "wet burp." Uncommonly, it may come out forcefully as vomit.

Less Common Symptoms

Many patients with GERD do not experience heartburn or regurgitation. Instead, symptoms may appear in other locations.

Patients may have the sensation that food is trapped behind the breastbone. Chest pain is a common symptom of GERD and it is quite common to experience sharp pains in the locality of the heart. If this occurs, then try and force yourself to belch and thus release the wind stuck in your stomach. You will find instant relief of this chest pain once you have released some of the wind in your stomach. If the chest pain persists around the locality of the heart, after the first attempt, try to release more wind again.

LESS COMMONLY, GERD MAY PRODUCE SYMPTOMS THAT OCCUR IN THE THROAT:

- **Acid laryngitis**, a condition that includes hoarseness, dry cough, the sensation of having a lump in the throat and the need to repeatedly clear the throat.
- Trouble swallowing (**dysphagia**). In severe cases, patients may even choke, or food may become trapped in the esophagus, causing severe chest pain. This may indicate a temporary spasm that narrows the tube, or it could also be an indication of serious esophageal damage or abnormalities.
- Chronic sore throat.
- Persistent hiccups.
- Coughing and Respiratory Symptoms

Asthmatic symptoms like coughing and wheezing may occur. In fact, in one study, GERD alone accounted for 41.1% of cases of chronic cough in non-smoking patients. The incidence was even higher when GERD and asthma were combined.

Chronic Nausea and Vomiting

Sometimes nausea persists for weeks or even months and is not attributable to a common cause of stomach upset may be a symptom of GERD. In rare cases, vomiting can occur as often as once a day. All other causes of chronic nausea and vomiting should be ruled out, including ulcers, stomach cancer, obstruction, and pancreas or gallbladder disorders?

DIAGNOSIS: Simple Acid Test

You can do this simple acid test at home. This test is an economical way for you to ascertain if you have too much or too little stomach acid. It is important that you do this test first thing in the morning before eating or drinking anything else.

Method: Mix half a teaspoon of fresh Sodium Bicarbonate, also called Bicarbonate of Soda or Baking Soda, into a small glass of warm water. Swallow the contents of the glass and relax for a few minutes.

Please note that this test is only effective if done on an empty stomach first thing in the morning. If you are presently taking any anti-acid medication, then please stop taking them at least 24 hours before doing this Simple Acid Test.

What the results will show you:

- If you belch dramatically within one minute of swallowing this mixture, it is likely you have **too much stomach acid**.
- If it takes two to three minutes to belch, your levels of acid are **probably normal**.
- If it takes longer than five or six minutes to belch, it is very likely that you have **too little stomach acid** to digest the food you eat.

There are other tests that can be done to diagnose GERD but they are both expensive and invasive (uncomfortable). If you have the typical symptoms of GERD, you probably will not need any further tests.

So just for your information these additional tests may include:

- **Endoscopy**, a thin tube with a microscope on the end is passed down your Esophagus towards your stomach. It enables doctors to see whether the inside of your Esophagus is red and inflamed.
- **Complex Acidity Test** on the inside of the esophagus the test is performed for a 24-hour period and involves a thin wire being passed through your nose and into your Esophagus. The wire measures how acidic your esophagus is and displays the results electronically.
- **Barium Swallow** a substance called barium, which shows up white on an X-ray, is swallowed to enable doctors to identify any abnormalities in your Esophagus.
- **Radiolabelled Technetium** in some hospital's radioisotope imaging may be used to demonstrate GERD. The technique uses very small doses of technetium-sulfur colloid to help confirm a diagnosis.

RECOMMENDED DIET FOR ACID REFLUX (GERD)

The foods listed in the Table below are the most common foods that are usually pretty safe for heartburn sufferers to eat.

Certain foods can aggravate your heartburn symptoms, and it's best to completely limit or avoid those foods and drinks that result in acid or bile reflux. There are some foods that have little or no potential for causing heartburn.

For a listing of foods that you may be able to enjoy occasionally, please check out the table for foods that are **Safe for Acid Reflux (GERD)**. For a listing of foods that should be avoided entirely, as they are usually responsible for a higher occurrence of heartburn, please check out the table for **Foods to Be Avoided**.

This is by no means a complete list, and in your personal situation, you may either find you can eat the foods from the "Avoid" group with no problem or have problems with foods not listed.

It is a good idea to keep a Food Diary. For approximately two weeks, write down what you eat, when you eat and any symptoms you may experience. This will help you and your doctor plan your diet and decide on any change in eating habits you may need.

DEALING WITH ACID REFLUX/ GERD

As with all health-related problems, the first step is to identify the cause. This has been discussed above. Remedial measures that can be taken are as follows: Firstly, eat less and chew more. The mixing of digestive enzymes with your food in the mouth kick starts the digestion process, minimizing the chance for fermentation in the stomach and facilitating the speedy passage of food through the stomach.

Choose foods that are in their natural state, or whole foods. Include plenty of vegetables, seasonal fruit and unrefined grains. Avoid refined carbohydrates, sugars, caffeine, chocolates and spicy foods. Avoid big rich meals, especially food fried in oils and fats.

Don't eat when angry or upset, nor when rushed and can't sit down. It helps not to lie down immediately after eating, this allows gravity to keep the stomach contents below the opening of the lower esophagus. Take a short and gentle stroll after a meal.

We recommend taking small sips of water throughout the meal. This does dilute the stomach acid a bit, but also buffers it, reducing the acidity and any discomfort with reflux. This may not help some people; the best is to try for yourself. Avoid cigarette smoking and too much alcohol.

FOOD GROUP WITH LITTLE POTENTIAL TO CAUSE HEARTBURN:

FRUIT

- Apple, fresh
- Apple, dried
- Apple juice
- Banana

VEGETABLES

- Baked potato
- Broccoli
- Cabbage
- Carrots
- Green beans
- Peas

MEAT

- Ground beef, extra-lean
- Steak, London Broil
- Chicken breast, skinless
- Egg whites
- Egg substitute
- Fish, no added fat

DAIRY

- Cheese, feta or goat
- Cream cheese, fat-free
- Sour cream, fat-free
- Soy cheese, low-fat

GRAINS

- Bread, only whole grain
- Cereal, bran or oatmeal
- Corn bread
- Graham crackers
- Pretzels
- Rice, brown or white
- Rice cakes

BEVERAGES

- Mineral water

FATS / OILS

- Salad dressing, low-fat

SWEETS / DESSERTS

- Red licorice
- Potato chips, baked

FOODS TO AVOID: GERD DIET

FRUIT

- Orange juice
- Lemon
- Lemonade
- Grapefruit juice
- Cranberry juice
- Tomato

VEGETABLES

- Mashed potatoes
- French fries
- Onion

MEAT • Ground beef, chuck

- Marbled sirloin
- Chicken nuggets
- Buffalo wings

DAIRY

- Sour cream
- Milk shake
- Ice cream
- Cottage cheese, regular

GRAINS

- Macaroni and cheese
- Spaghetti with sauce

BEVERAGES

- Liquor
- Wine
- Coffee, decaff or regular
- Tea decaff or regular

FATS / OILS

- Salad dressing, creamy
- Salad dressing, oil & vinegar

SWEETS / DESSERTS

- Butter cookie, high-fat
- Brownie
- Chocolate
- Doughnut
- Corn chips
- Potato Chips

DIVERTICULAR DISEASE

WHAT IS DIVERTICULITIS?

Diverticular disease is most common among the senior generation. In Western countries estimates are that 30 to 40 % of the population over the age of 60 has this problem.

Diverticula are pea-shaped pouches that form in your colon wall. The underlying cause of diverticula is constipation: Chronic constipation leaves long-standing fecal impactions coating your colon wall, at these sites chronic inflammation weakens your colon wall causing these pouches to form. It is thought by some, that the strain of defecation in this situation may also aggravate the formation of these pouches.

Diverticulosis is the condition of having diverticula present. Most people don't realize they have it and this condition is usually symptom-free. However, for a few people, diverticulosis results in spasms and constant pain.

If the pouches in the colon wall become inflamed or infected, the condition is called diverticulitis. This generally occurs when waste matter is trapped in a pouch, encouraging bacterial overgrowth. Diverticulitis can result in pain and fever. It often requires antibiotics and may require surgery.

HOW DO I DEAL WITH DIVERTICULITIS?

The key to preventing diverticulosis and repeated incidences of diverticulitis is a healthy diet. The latest approach for treating diverticulosis today is a high-fiber diet without all the pips and seeds which could get stuck in the colon pouches and contribute towards the pain of Diverticulosis. **A great bulk and stool-softening fiber is psyllium or at least 30 grams of fiber a day.** Drinking plenty of purified water each day is essential.

A natural and preventative approach for **diverticulitis** is to use an herbal type of antibiotic and a soft-fiber diet initially, with a switch to a high-fiber diet as progress is made. **Various traditional antibiotic herbs are available, such as Artemisia sap, Olive Leaf extract, Grapefruit Seed extract, Goldenseal and Matula Tea could also be used to assist with repairing the damaged colon lining.**

In an acute attack, you can give yourself cleansing by preparing an enema with 2 quarts lukewarm water and juice of one lemon to help rid your colon of build-up of fecal matter. You should also use charcoal tablets to absorb excess gas. Both measures help to relieve discomfort and speed healing.

FOODS TO AVOID

Refrain from eating nuts, grains, and seeds, but well-cooked brown rice is helpful. Eliminate dairy products, red meat, sugar, fried foods, and spices from the diet. Having your Health Practitioner test you for food intolerances is highly beneficial. **Get plenty of leafy greens, and do not overuse laxatives** as they can irritate the colon wall. A **good Pro-biotic** -"friendly" bacteria is essential to maintain a healthy balance, Kefir and Kombucha Tea is worth investing in. Aloe Vera juice is also highly recommended to ease inflammation. It is also important to take good omega 3 supplements to keep inflammation at bay.

It is always advisable to consult your general or medical practitioner regarding this matter as should it be left unattended; it could result in irreparable damage to your gut. You have one body, look after it.

For a more in-depth study of Diverticulitis, visit these following websites:

DYSBIOSIS

WHAT IS DYSBIOSIS?

Dysbiosis occurs when the bacteria in the intestines are out of balance, resulting in a vulnerability to the overgrowth of yeast, parasites, fungi and other harmful strains of bacteria. This can be caused by a combination of these bacteria as well as taking antibiotics and other drugs, eating hard to digest proteins, lack of **enzymes** in food, eating late at night, stress and not eating enough fiber.

A common scenario that triggers dysbiosis is antibiotics, as mentioned above. Antibiotics kill off most of our good bacteria and in turn our pathogenic bacteria take over; their growth is fostered by the presence of decaying undigested food matter that results from the lack of helpful bacteria.

Yeast and fungi feed on sugars, wine, vinegar, yeasty foods and are very difficult to get rid of. They thrive in the abnormal intestinal environment and then create viruses. The presence of these invaders is a decrease in our body's nutrient absorption which can result in a B12 deficiency.

Dysbiosis can result in IBS, autoimmune responses, cancer, eczema, acne, psoriasis, chronic fatigue and other chronic health issues. The consideration of Dysbiosis with digestive flora as an influence in the development of inflammatory diseases and cancer has received considerable experimental support over the past two decades.

SYMPTOMS

Dysbiosis does more than interfere with your digestion, it makes you tired. It may also alter your immune system and upset your hormonal balance. Dysbiosis can even make it difficult for you to think clearly and is known to cause anxiety, depression or mood swings. In fact, Dysbiosis can affect almost every aspect of health. If you have Dysbiosis, then you are likely to suffer from fatigue, headaches, intestinal upsets and many of the symptoms normally attributed to Candida.

Suspect an imbalance in the flora (a dysbiosis) in anyone who complains of stomach troubles. Digestive difficulty of absolutely any kind suggests there's something wrong with the trillions of microbes inside the gut.

- If You Have Stomach Upset After Eating
- Indigestion
- The Extremely Common Gerd (Reflux)
- Heartburn
- Slow Digestion
- Bloating, we think of Dysbiosis

If you have bowel problems, like excessive gas, lower belly pains, constipation, or diarrhea – then dysbiosis is our prime suspect too.

WHAT CAUSES DYSBIOSIS?

Antibiotics, anti-inflammatory drugs, cortisones, hormonal medicines including contraception are just some of the more common culprits. Acute or chronic parasite (or worm) infestations will also give rise to Dysbiosis. Major intestinal trauma or surgery may also have an important role in some individuals.

The pathology surrounding Dysbiosis is very like that of candidiasis. Bacterial enzymes can alter your intestinal environment in numerous ways, some of which can be easily measured in a properly collected stool sample and evaluated by a lab. Bacterial antigens are a type of substance usually a protein that stimulates production of an antibody that may cause dysfunctional immune responses that contribute to autoimmune diseases of the bowel and of connective tissue.

Effective treatment of Dysbiosis is as always best achieved by identifying and treating the underlying cause. Broadly speaking, one needs to eliminate allergic foodstuffs as well as food chemicals such as preservatives, colourants and flavourants, common “drugs” such as alcohol, caffeine and sugar.

Occasionally it may be necessary to use one of the stronger medicines to help eliminate more potent bugs like Giardia, or worms. You can then start to re-inoculate your bowel using a good quality probiotic supplement. For more difficult cases this is best done using the help of a specialist stool analysis laboratory. When this approach is not helpful, a more specialized diagnosis is required:

PUTREFACTION

Putrefaction Dysbiosis results from diets high in fat, animal meat and low in insoluble fiber. Putrefaction Dysbiosis is corrected by decreasing dietary fat including meat and increasing fiber by consuming more Bifidobacterium and Lactobacillus preparations which are bacterium producing lactic acid through fermentation found in your intestines.

If there is a decrease in friendly bacteria, the production of short-chain fatty acids and other beneficial nutrients also decrease. There is also an increase in ammonia which can have a negative effect on many bodily functions. Research suggests that this type of Dysbiosis is contributing towards colon cancer and breast cancer.

FERMENTATION (Small Bowel Bacterial Overgrowth)

This is a condition of overgrowth of bacteria in your stomach, small intestine and beginning of the large intestine that causes carbohydrate intolerance.

This may be the only symptom of bacterial overgrowth, making it indistinguishable from intestinal candidiasis. Gastric bacterial overgrowth increases the risk of systemic infection.

British physicians working with the gut-fermentation syndrome have tentatively concluded based on treatment results that most cases are due to yeast overgrowth and about 20% are bacterial in origin. The symptoms include abdominal distension, carbohydrate intolerance, fatigue, and impaired mental function.

Bacterial overgrowth here is encouraged by:

- Hypochlorhydria - a deficiency in hydrochloric acid produced by the stomach, it can lead to malnutrition and leaky gut.
- Sluggishness due to abnormal bowel motility.
- Immune deficiency.
- By malnutrition.

Gastric bacterial overgrowth increases your risk of systemic infection anywhere within your body and can lead to intolerance to carbohydrates. Any carbohydrate ingested is fermented by bacteria and results in production of toxic waste products.

Dietary sugars can be fermented to produce ethanol. Chronic exposure of the small bowel to ethanol may impair your intestinal permeability.

Exposure to antibiotics or a diet low in soluble fiber may create a deficiency of normal friendly flora, including *Bifidobacteria*, *Lactobacillus* and *E. Coli*. This condition has been described in patients with Irritable Bowel Syndrome (IBS) and food intolerance.

Deficiency and putrefaction Dysbiosis are complementary conditions which often occur at the same time and call for the same treatment regimen.

DEALING WITH DYSBIOSIS

Here, the trick is in getting the balance right. In the same way you would have the timing set in the engine of your car to make the ride smoother and more efficient, so too do we need to get the balance of fauna and flora right within the bowel. The guidelines laid out for managing Candida and other chronic gut infections apply here.

Essentially, eliminate all foods from the diet that may lead to overgrowth of yeasts and fungi. That is essentially all refined starches, sugars, dairy, vinegars, acidic foods like tomatoes, caffeine and fermented alcohols like wine, beer and cider. Eat a diet rich in whole foods like seasonal fruits and vegetables, free range meats, fish and poultry. Avoid the unnecessary use of any medications, especially antibiotics.

Make use of a doctor of natural medicines, like a homeopath, chiropractor or naturopath to help you get through infections as well as any other illness. Keep the powerful drugs of modern medicine for emergencies. These drugs all impact negatively on the delicate balance of bacteria and yeast in your bowel.

HELICOBACTER PYLORI INFECTION AND GASTRIC ATROPHY

Infection with the Helicobacter pylori bacteria causes inflammation and ulcers in your stomach lining, which may lead to a condition called gastric atrophy (which are the cells that line your stomach are destroyed by the H.Pylori bacteria). This condition may increase your risk of developing cancer of the esophagus.

For a more in-depth study of Dysbiosis, visit these following websites:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4566455/>

<https://www.digestivewellness.com.au/conditions/intestinal-dysbiosis/>

<http://healthmedicinecenter.net/irritable-bowel.htm>

<http://www.altmedrev.com/publications/9/2/180.pdf>

BARRAT'S ESOPHAGUS

The condition is named after the Australian-born British thoracic surgeon Norman Barrett (1903–1979), who described it in 1950.

WHAT IS BARRETT'S ESOPHAGUS?

Barrett's Esophagus is. The cancer can spread to the lymph nodes and other organs. Esophageal cancer arising from Barrett's Esophagus is the second fastest growing type of cancer in the United States.

The exact causes of Barrett's Esophagus are unknown, but it is thought to be caused in part by the same factors that cause GORD. Although people who do not have heartburn can have Barrett's Esophagus, it is found about three to five times more often in people with this condition. Indeed 10-20% of people with chronic GORD will develop Barrett's Esophagus.

Patients with Barrett's Esophagus frequently are found to have severe gastro-esophageal reflux disease. This observation has led to the widely accepted belief that Barrett's Esophagus develops because of long-standing reflux esophagitis (inflammation causing soreness and swelling of your esophageal lining) which can be caused by untreated acid or bile reflux. It is not known whether it is gastric acid or pancreatic proteolytic enzymes (necessary to digest protein in your stomach), bile or some other caustic substance that is responsible for the changes leading to Barrett's Esophagus.

THE SYMPTOMS INCLUDE:

The Symptoms can vary from person to person as it does not cause any particular symptom, but is associated with the following symptoms:

- Frequent and Longstanding Heartburn
- Trouble Swallowing (Dysphagia)
- Vomiting Blood (Hematemesis)
- Pain under the breastbone where the esophagus meets the stomach.
- Unintentional weight loss because eating is painful.



Photo Credit to Wikipedia: Endoscopic image of Barrett's esophagus, which is the area of red mucosa projecting like a tongue. Biopsies showed intestinal metaplasia.

RISK FACTORS

Barrett's Esophagus is an important consequence of long-standing acid or bile reflux disease (GERD - Gastro-esophageal Reflux Disease) because patients with Barrett's are at risk for developing cancer of the esophagus.

The acid reflux stimulates changes in the lining of your esophagus (the food tube connecting your mouth to your stomach), so that it resembles the lining of your intestines. This alteration (or metaplasia) represents a precancerous condition.

Many risk factors can be avoided, it is important to keep in mind that avoiding risk factors does not guarantee that you will not get cancer. Also, most people with a risk factor for cancer do not actually get the disease. Some people are more sensitive than others to certain factors causing cancer. Talk to your Health Care Professional about methods of preventing cancer that might be effective for you.

Doctors cannot always explain why one person gets cancer and another does not. However, scientists have studied general patterns of cancer in the population to learn what things around us and what things we do in our lives that may increase our chance of developing cancer.

DIET AND RECREATIONAL ADJUSTMENTS TO BE IMPLEMENTED...

Avoid Tobacco & Alcohol - Cancer of the esophagus is strongly associated with tobacco and alcohol use. Studies have shown that avoiding tobacco and alcohol decreases the risk of developing esophageal cancer.

Anything that increases your chance of developing a disease is called a risk factor. Anything that decreases your chance of developing a disease is called a protective factor. Some of the risk factors for cancer can be avoided, but many cannot. For example, although you can choose to quit smoking, you cannot choose which genes you have inherited from your parents. Both smoking and inherited genes could be considered risk factors for certain kinds of cancer, but only smoking can be avoided. Prevention means avoiding the risk factors and increasing your protective factors that can be controlled so that your chance of developing cancer decreases

Raw Diet - A diet with plenty of green and yellow fruits, vegetables and cruciferous vegetables (such as cabbage, broccoli, and cauliflower) may lower your risk of developing cancer of the esophagus.

For a more in depth study of Barratts, visit these following websites:

<http://www.ebook777.com/barretts-esophagus/https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3805371/>
https://en.wikipedia.org/wiki/Barrett%27s_esophagus
http://www.cdd.com.au/pages/disease_info/barretts_oesophagus.html

IRRITABLE BOWEL SYNDROME (IBS)

WHAT IS IRRITABLE BOWEL SYNDROME?

Irritable Bowel Syndrome (IBS) is a common complaint: some 10-25% of the population experiences the diverse symptoms this syndrome causes. **IBS is also called spastic colon, spastic bowel, mucous colitis, spastic colitis, colitis, intestinal neurosis, and functional bowel disease.**

In IBS the normal rhythm of the muscular contractions of your digestive tract becomes irregular and uncoordinated—the body's digestive system usually churns along like a good washing machine, but in IBS, the "wash cycle" is irregular and this interferes with movement of food and water. This means that your food, instead of "rinsing out" of your body efficiently, it accumulates in your digestive tract, which in turn, leads to the accumulation of mucus and toxins in your intestines.

The result of this is that gas and stools do not freely flow, and this is when the above-mentioned symptoms begin to appear, that just about anything that disturbs our intestinal bacterial balance. The ratio of good bacteria to bad bacteria—could have a hand in causing IBS and it's not serious in that it is not life-threatening; however, it makes for very uncomfortable living.



THE SYMPTOMS INCLUDE:

- Bloating
- Flatulence
- Diarrhea
- Constipation
- Abdominal Pain & Cramps
- Nausea
- Mucus in the Stool

SYMPTOMS...

Because many of the IBS symptoms are the same as those found in more serious digestive problems (such as Crohn's disease and ulcerative colitis which is inflammation of the walls of the bowel accompanied by the formation of ulcers). The first thing to do is to eliminate the possibility that the symptoms are related to one of these. This is achieved with special investigations such as colonoscopy or barium studies.

Women are around two to three times more likely to be diagnosed with IBS and four to five times more likely to seek specialty care for it than men. These differences likely reflect a combination of both biological (sex) and social (gender) factors. People diagnosed with IBS are usually younger than 45 years old. Studies of female patients with IBS show symptom severity often fluctuates with the menstrual cycle, suggesting hormonal differences may play a role. Endorsement of gender-related traits has been associated with quality of life and psychological adjustment in IBS.

Gender differences in healthcare-seeking may also play a role. Gender differences in trait anxiety may contribute to lower pain thresholds in women, putting them at greater risk for many chronic pain disorders.

DIET AND RECREATIONAL ADJUSTMENTS REQUIRED...

Dietary changes can assist in the relief of these symptoms. Avoid animal fat, butter, carbonated drinks, chocolate and candy, dairy products, fried foods, sugar, food additives, alcohol, and smoking. Most health practitioners recommend a high-fiber diet and supplementing with a bulking fiber like psyllium.

Diet should include well cooked unrefined whole grains, plenty of fruit and vegetables rich in antioxidants. Drinking plenty of purified quality water is also important. Combining some of the following herbs as a tea can help alleviate the discomfort of IBS: Chamomile, Lemon Balm, Marshmallow root, Licorice Root, Bitter Candy Tuft, Lemon Verbena and Peppermint.

Many health practitioners feel that food allergies are the main cause of IBS and recommend being tested for allergic reactions to foods. Common foods that trigger allergies include cheese, milk, chocolate, butter, coffee, corn, wheat and gluten, eggs, and nuts.

Controlling food allergies often stabilizes IBS.

For a more in-depth study of Irritable Bowel Syndrome, visit these following websites:

<https://www.niddk.nih.gov/health-information/digestive-diseases/irritable-bowel-syndrome/symptoms-causes>

https://en.wikipedia.org/wiki/Irritable_bowel_syndrome

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3039211/>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4188930/>

<https://www.nature.com/subjects/irritable-bowel-syndrome>

MATULA TEA

CHAPTER 4

SHORT INSIGHT ON MATULA'S HISTORY

Matula Tea's history began here. In the mid 1970's Doc Grouse immigrated to Africa from Europe. Ever since his arrival in Africa, he spent thousands of hours studying wild plants and how these medicinal plants have been used by the indigenous tribes of Africa in the preparation of remedies to fight a variety of diseases and ailments.

It is common knowledge, that some 80% of modern Western medicine is originally based on ancient plant recipes which have been passed on from father to son through the generations, in some cases over thousands of years. Doc Grouse firmly believes that "for every disease or illness, a natural solution can be found amongst the thousands of medicinal plants growing in various places in the world".

Because of his pioneering spirit, Doc Grouse concentrates on NEW breakthrough discoveries, based on plant remedies that have not been used by mainstream medicine before. He is not interested in replicating or copying existing remedies. In addition, he insists that before a remedy is made available for distribution, its efficacy and toxicity are scientifically tested by competent institutions.

Matula Tea is an excellent example of Doc Grouse's mission. There is nothing else like it – and there is nothing that is both as safe and effective on the market right now!



In late 1999, on one of his many walks he took with two old traditional healers in one of several sub-Saharan mountain ranges, Doc Grouse noticed some rather green bushy plants. He asked the healers what they knew about these plants. They explained in very simple terms that this particular plant was very effective for treating 'stomach ailments', when mixed with several other specific plants.

Later, during other walks to even more difficult and almost inaccessible areas, Doc Grouse was shown the other plants used for stomach ailments. As always, he carefully collected some samples and made notes of the healer's various comments and explanations. During the following few weeks, Doc. Grouse finely chopped the plant samples and then dried them in the sun. He then grounded all the premixed plant material in the exact ratios as instructed by the healers.

He was soon ready to test the first sample of the remedy on himself. He took a teaspoon of the mix and put it into a cup filled with boiling water and let it draw. Carefully and slowly drank the tea.

These are his comments; "I wanted to see if the herbal formula was going to have any negative effects on me, before trying it on anyone else. I wasn't really too worried, as I had noticed that the wild antelope loved these plants. I had also given some of the dry mix to some of my farm goats and sheep and they ate it with relish, and without any subsequent negative side effects. As I expected, the Herbal Formula did not have any bad effect on me at all. I carried on drinking it every day for 4 weeks. Thereafter, I was confident enough to give the herbal formula to a few patients who had complained of abdominal pains. In every case, the pain and discomfort were gone in a short while."

The First Trials...

A family member living in Europe, told Doc Grouse that she was suffering from advanced stage peptic ulcers. She had terrible pain and was constantly taking antacid tablets and was only getting temporary relief.

Doc Grouse sent her a one-month supply of Matula Tea, which she started taking twice a day for the next month. After one week, she was already feeling better, most of her pain had gone and at the end of her treatment, she was completely symptom free. She began her tea treatment in 2005 and to this day as never needed another course of tea nor has she used any other ulcer medication.

Another family member heard of the successful treatment and was also treated with equally good results. Then some of their friends asked Doc Grouse to give them Matula Tea and they were also cured after one 30-day course.

A few months later, a businessman from Denmark paid Doc Grouse a visit. In conversation, he revealed that he suffered badly from a stomach ulcer, which turned out to be a bleeding ulcer. Doc Grouse told him of his tests with Matula Tea and the good results and told him he was welcome to try the treatment. He readily accepted. As soon as he arrived back in Denmark he started his course. After 4 weeks, he phoned Doc Grouse and explained that there was no more bleeding, and he had no more pain.

Over the following years, Doc Grouse harvested more of the plants, prepared the remedy, and gave it to many people. Doc Grouse gave it to medical doctors as well to aid patients that were non-responsive to the antibiotic treatment. The same positive results were experienced.



LABORATORY “IN-VITRO” TESTING...

Anxious to find out what was behind the effectiveness of this Herbal Formula, Doc Grouse decided to invest in some laboratory “in-vitro” tests at the University of Stellenbosch.

World renowned authority and immunologist, Professor Patrick JD Bouic Ph. D undertook to do the necessary tests. The results were surprising to say the least! They showed that Matula Tea was extremely effective in the eradication of H. pylori, the bacterium known to cause 80% – 90% of all stomach ulcers and 50% of all new stomach cancer cases.

Professor Bouic has since been kind enough to give Matula Tea his personal endorsement as well, which you can see by clicking the PDF below. When we received the results of these tests, they were so good that we decided without hesitation to offer all our patients a 100% money back guarantee. In fact, we could find no good reason NOT to offer you a guarantee! In addition to this, our Matula Health Support team guarantees free and unlimited support to all customers.



[Test results and endorsement](#)

The Laboratory Test Results Explained....

*The tests show that at a concentration of 50% the inhibition of
Helicobacter pylori bacterium is 93%.*

So, what does this mean?

A 50% concentration means that the study used two identically equal portions, one portion containing Helicobacter pylori bacterium and the other exact sized portion containing Matula. Inhibition is the amount of the bacterium that was killed off when the two portions are brought in contact with each other.

Matula Herbal Tea is effective at killing off 93% of Helicobacter pylori every time that Matula comes into contact with Helicobacter pylori in your digestive system. After 30 days (60 doses) you can imagine just how incredibly effective Matula Herbal Tea really is. It gives Helicobacter pylori virtually no chance of survival.

Now consider the total effect when you are taking Matula Herbal Tea twice daily and it is effectively killing off 93% of the [Helicobacter pylori](#) with each dose!

After 30 days (60 doses) you can imagine just how incredibly effective Matula Herbal Tea really is. It gives Helicobacter pylori virtually no chance of survival or to regrow.

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100% MONEY BACK GUARANTEE

1. This 100% money back guarantee is expressly limited to the eradication of the Helicobacter Pylori Bacterium.
2. This guarantee is offered strictly to our terms and conditions below.
3. We do not recognize an H.Pylori Breath Test for 100% money back guarantee.
4. Please note that this guarantee is valid only for purchases from our website: www.matulatea.com.
5. The money back guarantee expires after 6 months from completion of your treatment. This is due to the fact that it's possible to be reinfected by a spouse, partner or family member, who may be infected by H. Pylori.
6. The HPSA Test should only be done 4 weeks (between 28 and 32 days) after completion of the course. The 4 week delay is requested due to the fact that the digestive system needs this period of time to eliminate any dead Helicobacter Pylori bacteria).

PROCEDURE

If you have been tested and diagnosed by your doctor confirming you are infected by the Helicobacter Pylori bacteria somewhere in your digestive tract, you must complete the 30-day treatment course of Matula Herbal Tea exactly as instructed. In the event that you are not feeling well and suspect the Helicobacter Pylori bacteria is still present and active, you are requested to be retested for the presence of the bacteria by means of a HPSA Test (H.Pylori Stool Antigen Test) or a GI Map Stool Test..

THE HPSA TEST:

When tested, before the Matula Tea treatment (1st test) and the test shows Positive, it means you are infected by H.Pylori bacteria. If the H.Pylori infection is nil or minimal, the test will show Negative and it is not necessary to be treated.

Therefore, if the 1st test shows Positive before commencement of the Matula Tea treatment- and shows Negative after the completion of the Matula Tea treatment and the 2nd test, that means your H.Pylori infection has been eradicated and the treatment worked.

If the 2nd test report shows Positive, this means, that the H.Pylori infection is still present and you are thus eligible for a refund of the purchase price of 1 box of Matula Tea.

THE GI MAP TEST:

The GI Map test shows the extend of the H.P. infection in detail. For example, if the infection is minimal and therefore normal and therefore of no concern to the you, the presence of H.Pylori infection will show as $<1.0e3$ (which means less than $1.0e3$ and is equivalent to decimal 1000).

If the H.Pylori infection, before the commencement of the Matula Tea treatment, is advanced and extensive, the result may be something like 7.0e5 or 6.0e4 (decimal equivalent being 700.000 and 60.000 respectfully).

If, after completion of the Matula Tea treatment, the 2nd test shows that the infection is still present and in excess of 1.0e3 (the decimal equivalent is 1000), then you are eligible for a refund of the purchase price of 1 box Matula Tea.

If the 2nd test shows that the presence of H.Pylori is <1.0e3 (less than 1.0e3 – which means less than 1000 in decimals), that means the treatment worked and your H.Pylori has been eradicated or reduced to below normal.

*** The HPSA or GI Map Test should only be done 4 weeks (between 30 and maximum 45 days) after completion of the course. The 4 week delay is requested due to the fact that the digestive system needs this period of time to eliminate any dead Helicobacter Pylori bacteria).**

IN CONCLUSION:

After completion of the Matula Tea treatment, you are covered by our money back guarantee if:

1. You test Positive after completing an H.Pylori Stool Antigen test or
2. Your H.Pylori count is greater than 1.0e3 after completion of the GI Map test.

Please email us a copy of your doctor's 'Before and After' HPSA test (H. Pylori Stool Antigen test) or a GI Map Stool Test, including your order number to support@matulatea.com which should confirm that the Helicobacter Pylori has not been fully eradicated and that you are still infected. Once we have received the signed and dated HPSA test or GI Map test written or typed in English and we will refund you your total purchase price, less shipping.

If on completion of the 2nd test the Helicobacter Pylori infection shows positive, but to a lesser extent than measured at the 1st test, then we might suggest that we supply you with an additional follow up course of Matula Tea. This follow up course will in most cases, eradicate any remaining Helicobacter Pylori bacteria, which could still be present and hiding in your intestines. This additional treatment will be supplied to you free of charge.

In the unlikely event, the further test shows, that the additional treatment did not eradicate the remaining Helicobacter Pylori infection, then we shall refund you the cost of the box of tea purchased.

*** Customers who purchase two or more boxes of tea to drink consecutively, without having either a GI Map Test or HPSA test done 30 days after the first box of tea has been completed, will invalidate their guarantee if they are only tested after completing the second box of tea'**

ADDITIONAL GUARANTEE....

In addition to our money back guarantee, we also offer our support guarantee. This ensures that you have unlimited access to our dedicated health team, who offer their full support and advice to you, while you are on the treatment and until such time that you are well again.

Information disclaimer: The results of a Matula Herbal Tea treatment can vary from person to person, due to differences in the severity of the Helicobacter Pylori infection and the general health and wellbeing of each person.

QUESTIONS & ANSWERS

CHAPTER 5

PRODUCT RELATED

Q: How is Matula Tea Packaged?

A: You will receive a small, sealed cardboard box beautifully printed on the outside with Matula branding. Inside you will find 60 individually packed and sealed teabags in dark green packets.

Q: How do I take Matula Tea?

A: Open sachet at the top, place sachet in a cup, pour boiling water and let it draw for a few minutes, when cooled down, enjoy!

Q: When do I take Matula Tea?

A: On Matula Tea for the best effect. Taking Matula Tea is really easy, with a recommended dosage of just two cups of pleasant tasting tea per day for 30 days. A. Matula herbal tea is to be taken for 30 days, twice a day. One cup taken before breakfast in the morning and the other at least 2 hours after dinner before going to bed.

Q: How long do I take Matula Tea for?

A: Although you might feel a lot better after a couple of weeks, it is most important to complete the treatment course. Should you for whatever reason wish to continue taking Matula herbal tea after you have completed the 30-day treatment course, it is not a problem, as the tea is completely non-toxic. However, if you merely wish to eradicate the *Helicobacter Pylori* bacteria, a 30-day treatment course should be sufficient.

Q: Has Matula Tea side effects?

A: It is completely safe to take, and it has been scientifically tested and proven to be less toxic than any other ordinary cup of herbal tea, and it tastes really good too!

Q: If I take Matula herba tea, do I need to take Antacid to reduce acid?

A. The majority of our customers have not found it necessary to take Antacid while being treated with Matula herbal tea. But if you are in doubt, you should consult your doctor.

Q: Is Matula herbal tea effective in treating Acid Reflux, Candida Albicans and Dyspepsia?

A: Yes, we have experienced very good results over many years. Also, successfully treated are various ailments associated with the Esophagus, Stomach and Duodenum. Further Matula herbal tea has been used to treat Ulcerative Colitis, Non-ulcerative Dyspepsia, Dysbiosis, IBS and has shown to reduce inflammation in respect of Diverticulitis.

Q: Will I experience any side effects when taking Matula herbal tea?

A: No. Laboratory tests have shown that Matula herbal tea is completely nontoxic. Matula herbal tea has been taken by thousands of customers over many years and no side effects have ever been reported. However, some customers, who also suffer from Candida Albicans overgrowth and without been aware of this, may experience symptoms which are very similar to those of Helicobacter Pylori infection.

Q. What are the ingredients of Matula herbal tea?

A. All the 8 ingredients of Matula herbal tea are grown wild in various parts of Southern Africa.

Oleo Europaea & Oleo Africana (Scientific name) **Oleaceae** (Family name)

Olive (Common name) – The Leaf of the plant are used

Tulbachia Violacea (Scientific name) **Alliaceae** (Family name)

Wild Garlic (Common name) – The Root and Rhizome of the plant are used

Clycyrrhiza Glabra (Scientific name) **Fabaceae** (Family name)

Liquorice (Common name) – The Root & Leaf of the plant are used

Cyclopia Intermedia (Scientific name) **Fabaceae** (Family name)

Honeybush (Common name) – The Leaf of the plant are used

Aspalathus Liniar (Scientific name) **Fabaceae** (Family name)

Rooi Bos (Common name) – The Leaf of the plant are used

Psidium Guajave (Scientific name) **Myrtaceae** (Family name)

Wild Guava (Common name) – The Fruit & Leaf of the plant are used

Syzygium Cordathus (Scientific name) **Myrtaceae** (Family name)

African Water Berry (Common name) – The Leaf of the plant are used

Q: Can I take Matula herbal tea during pregnancy?

A: We strongly advise all pregnant and nursing mothers to consult with their doctor before starting a treatment course.

Q: Can I give Matula herbal tea to my child?

A: If your child is under the age of 12 years, we advise you to consult with your doctor.

Q: Which type of test should I use to find out if I have Helicobacter Pylori?

A: The H.Pylori Stool Antigen test (HPSA) is very accurate and reasonably priced. This test is strongly recommended by us and most experienced medical practitioners.

Q: If I am on blood thinning medication, can I still take Matula herbal tea?

A: In this situation, we advise you to consult with your doctor before taking Matula herbal tea.

Q: If I am on other medication, is it safe to take Matula herbal tea?

A: Laboratory tests have proven that Matula herbal tea is less toxic than ordinary herbal tea. (see test reports here) Therefore there are no allergic reactions or contraindications with other medicines. However, if you are in doubt, please consult with your doctor or health practitioner.

Q: Is Matula herbal tea effective in treating Acid Reflux, Candida Albicans and Dyspepsia?

A: Yes, we have experienced very good results over many years. Also, successfully treated are various ailments associated with the Oesophagus, Stomach and Duodenum. Further Matula herbal tea has been used to treat Ulcerative Colitis, Non-ulcerative Dyspepsia, Dysbiosis, IBS and has shown to reduce inflammation in respect of Diverticulitis.

Q: If I take Matula herbal tea, do I need to take Antacid to reduce acid?

A: Most of our customers have not found it necessary to take Antacid while being treated with Matula herbal tea. But if you are in doubt you should consult with your doctor.

Q: Will I experience any side effects when taking Matula herbal tea?

A: No. Laboratory tests have shown that Matula herbal tea is completely non-toxic. Matula herbal tea has been taken by thousands of customers over many years and no side effects have ever been reported. However, some customers, who also suffer from Candida Albicans overgrowth and without been aware of this, may experience symptoms which are very similar to those of Helicobacter Pylori infection.

Q: What quality standards are used by Matula herbal tea?

A: The different herbs are sun dried after picking. When dry the herbs are blended in a specific ratio and then milled. Thereafter the tea blend is subjected to a process of steaming. This process will ensure that any form of bacteria and fungi will be eliminated. Thereafter the herbs blend is packed into standard tea sachet, which is further packed into a protective foil bag. The final processing and packaging is carried out by an accredited manufacturing company, which is registered by the FDA and further enjoys USDA NOP production standards certification, SGS organic production standards certification and is also HACCP registered.

Q: Why is Matula herbal tea supplied as a tea and not a tablet?

A: The main reason is that the absorption of the active ingredients from a liquid is far greater (2 to 3 times) than from a tablet/capsule. In addition, a liquid can more easily reach, cover and saturate the infected area of the stomach lining, thus allowing sufficient time to eliminate the H. Pylori bacteria.

Q: What dosage do you recommend?

A: We strongly recommend that you take two cups of Matula herbal tea per day for a continuous period of 30 days. Take one cup at least half an hour before breakfast in the morning and one cup one to two hours at night after dinner. It is important that you drink the tea on an empty stomach!

Q: Do you provide me with medical advice?

A: No, we are ethically committed to always refer you to your medical doctor for medical advice for any ailment. If you are unsure about your doctor's advice and opinion, then you can seek a second opinion from a doctor, who practices holistic or complementary and alternative, such as a naturopath.



QUESTIONS ABOUT CANCELLED AND RETURNED ORDERS

Q: What is your policy on cancellations and returns?

A: Our policy for cancelled orders and returned orders.

These policies are effective as from the time of receipt of your order:

1. **Refusal of delivery by customer:** The returned item will be subject to the purchaser paying the full sent and returned shipping costs, plus a 20% handling fee of the purchase price. After our receipt of the returned tea in good order, the purchaser will be refunded the balance due and will be informed by email.
2. **Our refunds policy:** All refunds will be paid via PayPal only. Due to legislation, refunds may only be paid back to the source of the payment (www.PayPal.com).
3. **Return time:** Should you wish to claim, we would need evidence from you by way of a document from the courier company, clearly showing the date of receipt. After receipt of the tea, the purchaser has 14 days to return an unopened, unused box of tea, which will be subject to the purchaser paying the full sent and returned shipping costs, plus a 20% handling fee of the purchase price. After our receipt of the returned tea in good order, the purchaser will be refunded the balance due and will be informed by email.
4. **Cancellation of your order:**
 - * As we endeavour to ship orders out between 6 – 24 hour's after receipt, any order cancelled after the 6 hour period will be considered as shipped, and therefore a 20% handling fee and sent and returned shipping costs will be deducted from the refund.
 - * If the order has been shipped after cancellation it will be a mandatory requirement that the parcel is refused on delivery.
 - * Shouldn't you accept delivery of the parcel then you shall be liable for full sent and returned shipping costs plus 20% handling fee.
5. **If your address, submitted to us is incorrect:** In such a case we will be notified by the courier company and we will request the purchaser by email to furnish us with the correct shipping address. Additional shipping and handling costs will be for the purchaser's account.

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QUERIES IN RESPECT OF PAYMENT, ORDERS AND WEBSITE

Please **CONTACT US**, if you experience the following:

1. You experience difficulties in completing payments.
2. You are not able to complete the order process.
3. You have by mistake duplicated your order.
4. If you wish to change your shipping address.
5. If you wish to cancel your order, please complete the contact form with details as to why you wish to cancel the order.
6. To contact us, please email: orders@matulatea.com and support@matulatea.com.

Q: *How does it work in respect of payment & orders?*

A: If you are using AOL, Hotmail, Gmail or Yahoo, you might not receive a reply from us due to very limited function of your email account.

All enquiries are answered by us within 24 hours of receipt during weekdays.

It is well known that the above accounts do not allow receipt of messages which include attachments or links to other websites, which our replies do.

In order to avoid any such problems, please use different email accounts, not the ones shown above. In addition, it is also important to whitelist us, as sometimes our emails get stuck in spam folders.

Q: *Can I use any web browser?*

A: You can view our website on any browser and all types of computers, tablets and mobile phones.

Q: *When I try to place my order, I get stuck in the PayPal system*

A: If you don't enter your name exactly as it is shown on your credit card or debit card, that is a problem. It is very important that you use the same case, capital, or lower case, as on your card. Further also check that you enter all the details required by PayPal.

Should you still be unable to complete your transaction with PayPal, please click on the link to contact Paypal

A friendly operator will be able to assist you during these opening hours: Monday through Friday: 4.00 am to 10.00 pm and Saturday and Sunday: 6.00am to 8.00pm.

Q: *I don't have a debit or credit card. Can I still use PayPal?*

A: You may then try PayPal's eCheque payment method.

Q: *I wish to place my order, how do go about it?*

A: By going to the bottom of the page “Buy Matula Now”. Look out for the “Buy Now” buttons, showing the currency of your choice. By pressing the chosen one you will automatically be connected to the PayPal online ordering process. Carefully follow the instructions and complete all the information required by PayPal. On completion, then please press the “Process Order Now” button and your order will be processed. Shortly thereafter PayPal will send you (and us) an Order Confirmation and we will then further email you our acknowledgement, that your order has been received by us.

Q: *On completion of my order, how long does it take to ship to me?*

A: We generally ship between 6-24 hours after receipt of order, but maximum after 2 business days. The only exception to this will be if we are waiting for additional information from our customers or if we have a public holiday in the country from which we ship.

Q: *Once the order has been shipped, how long will it take to reach me?*

A: Depending on where you live in the world, the shipping time is usually between 4 – 7 working days. We ship from South Africa to you the most reliably and fastest way- by courier service. The companies we have chosen is DHL & Aramex Courier Service, 2 of the largest and most reliable courier companies in the world.

Q: *Once my order has been shipped, how do I check the delivery status of my order?*

A: DHL & Aramex courier service offers a tracking facility, which means that you or we can anytime establish the exact whereabouts of the parcel:

- DHL
- Aramex

Delays can happen if the parcel is retained for inspection by the customs department in the country of destination. As our product is a pure herbal unfermented tea, it has for many years been accepted by customs worldwide.

Q: *How do I contact you?*

A: To contact us, please email: orders@matulatea.com and support@matulatea.com.

Q: *Do you have a customer service centre?*

A: Yes, we do. Our well-trained and helpful service team are always ready and happy to help you with your questions and all questions and enquiries are promptly answered by email.

Q: After I have placed my order, I did not receive confirmation from you by email. What went wrong?

A: The reason for this problem is that some internet service providers, like AOL, Hotmail, Gmail or Yahoo, block certain incoming emails as spam or junk mail. You might not receive a reply from us due to very limited function of your email account.

All enquiries are answered by us within 24 hours of receipt during weekdays. It is well known that above accounts do not allow receipt of messages which include attachments or links to other websites, which our replies do.

In order to avoid any such problems, please use different email accounts, not the ones shown above.

Q: Can I place my order for Matula herbal tea on the phone?

A: No. We are only able to accept orders through PayPal or by direct payment into our bank account. (see following question).

Q: If I live in a country, which is not included in the list of countries shown on the PayPal online order form, how do I then pay for my order?

A: Should you wish to pay via direct eft into our bank account, please email us on orders@matulatea.com and we shall forward you the bank details.

Q: My order does not go through the PayPal system. What do I do?

A: It is of utmost importance that you enter your name exactly as it is shown on your credit/debit card. Please ensure that you use same case as on the card, Capital or lower case. A further problem arises if you do not enter all details as requested by PayPal. Please double check such details. Should you still experience problems, please contact PayPal for assistance.

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