

Autism Paradigm Shift

An International Public & Professional Release

*The Urgent Need to Embrace Nonconforming Thought
And a Return to Nutrition and the Natural Medical Sciences
In Effectively Conquering Current and Future Occurrences of
Autism Spectrum Disorders and Many Related Conditions*

Presented by

NO HARM FOUNDATION, INC.

NATURAL OPTIONS FOR HEALING AND RECLAIMING MEDICINE

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And

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Keynotes of this Revision for Our Current Users

Over the last several years, our commitment and promise to all of you has been to continue to use all resources available to us to provide through this website our best and updated dietary recommendations for our program. After much thought regarding nearly another full year of clinical experience combined with more and more reports back from participating families all across the country and beyond, Dr. Shauna has made the confident decision to cut all grains completely out of the Spectrum Balance® Protocol (SBP) - even within the Phase 3 long term lifestyle guidelines. This represents the most noticeable and important changes for this revision of the diets and the accompanying documentation.

To be truthful, the only reason that *some* grains were included in SBP in the very beginning and have not been totally eliminated prior to now is because so many people have felt that they could not even “attempt” the diet without at least some cereals, rice and/or pasta being included, since grain-based foods often represent the bulk of what children are accustomed to eating prior to starting the Protocol. So with reluctance we have tried our very best to permit only moderate amounts of the least objectionable suspects. However, time and ongoing research has shown us that grains of any kind (gluten-containing or not), even in *extremely* limited portions, will slow the positive process in virtually every case, and will stall out completely or reverse progress in others. So now we must adopt the very strong recommendation that you eliminate them completely from the diet **for the entire family**.

We discussed within our last revision that the Spectrum Balance® Protocol has most in common with a “Paleo” dietary philosophy, in that we eliminate grains and legumes and greatly restrict dairy. Many have expressed the notion that they are “looking forward to going back to their old eating habits”, so let’s dispel that right here. Although there will most likely be a time after you’ve achieved the positive results you’re looking for that you can loosen the SBP dietary restrictions and follow a more generic Paleo-style diet for maintenance, there will never be a time when we will advise you to return to eating grains, legumes, sugars and processed foods loaded with additives if you expect and desire to maintain your health.

This Protocol was originally created to try to produce a positive response in symptomatic children, along with the hope that they will not always be as sensitive to the “no-no” foods. But this doesn’t diminish the fact that some foods will just **never** be **good** for them - or good for the rest of the family either for that matter. Although we feel that *wheat* represents the most problematic grain and *soy* the most problematic legume, **all** of the members of these two food groups produce various degrees of negative effects, so you must do your very best to concentrate on the many forms of superior nutrition available to you. The human body is just not designed to process or efficiently utilize seed-based foods and they will never do anything but clog up your system and make you prone to disorders and disease of all types.

We continue to find that if you have a variety of creative recipes on hand, it really eases the transition to avoiding these problem foods that most of us seem to like and crave. Currently, one of the best recipe resources can now be found in the growing abundance of Paleo recipe websites. Many of these recipes can be used with SBP without any variations, and others can be easily modified by just omitting or substituting for “forbidden” ingredients like nuts during Phases 1 & 2 only. For example, we recently Googled “Paleo sweet potato recipes” and got 290,000 results. “Paleo rice recipes” got 577,000 and Paleo pasta recipes got 470,000. So give it a solid try because it will all be worth it to your family’s precious health.



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Our Ongoing Work

The No Harm Foundation was formed in 2008 with the core mission of providing a global conduit for badly needed information, education and support for the public and medical practitioners of all types regarding the proven connections between improper nutrition and the perplexing worldwide explosion in Autism Spectrum Disorders (ASD's), as has been pioneered through the research and clinical work of Dr. Shauna Young and her Assertive Wellness Research Center of Durango, Colorado.

Since that point in time it has become exponentially apparent to us that improper and inadequate early nutrition not only represents the primary etiology for the vast majority of occurrences of ASD's, but also both the causes and root answers for virtually all of the major maladies that are negatively affecting the fetal, infant and child populations of this planet. All the new drugs that will ever be created in attempts to prevent and cure disease will pale in comparison to the incomparable power that our bodies obtain from proper and natural nutrition, and much more of the world needs to rapidly acknowledge, embrace and broadly implement such intelligent and cost-effective strategies.

Effective modern nutritional and natural medical science is not currently seeing anywhere near their positive global implementation potential, yet effective, affordable and actionable answers for dramatic reductions in virtually all of these negative conditions that are impacting our youth as well as adults are already developed and presently available. Quality whole foods and countless natural medicinal remedies are capable of delivering health answers at fractions of the expense and hazards associated with pharmaceuticals. The public just needs to become aware of this.

The most recent statistics reveal that the destructive disorder of Autism now impacts in the U.S. alone, an unconscionable 1 in 60 children. Putting this figure in tragic perspective; that's more kids than are being stricken by diabetes, AIDS, cancer, cerebral palsy, cystic fibrosis, muscular dystrophy and Down Syndrome – **all combined**. After the hundreds of millions of public, corporate and governmental dollars that have been thrown at this one problem alone to date, the only real result we're all seeing is progressively worsening numbers. The social and financial implications for our world from this and other avoidable medical abominations are both staggering and expanding, and yet we see this dark and looming forecast as greatly avoidable.

We at the No Harm Foundation have been working diligently on behalf of the countless millions of affected families out there who need real, actionable and affordable answers for the health of their families – not a generation from now, not ten years from now...but **now**. In the midst of this highly challenging worldwide economy and exacerbated healthcare crisis, very few of these families possess the hundreds if not thousands of dollars a month that are required under many current drug and other therapy models in inadequate management of

such destructive conditions as Autism. Although the various political factions may disagree as to how to make the system work best, **all** can agree that we need to save on costs so that available resources can be better reserved for those most in need.

Our capabilities are to *prevent* countless new cases of adverse medical disorders and to offer families already affected new treatment options – low-cost, non-invasive, non-toxic and effective options that virtually anyone can afford to implement, and without risk. We believe that these same discoveries may also be destined to bring positive redirection and new hope for many predominantly adult mental disorders such as *OCD, Chronic Depression, Bipolar/Schizophrenia and Alzheimer's*.

In the face of disturbing international statistics for infant mortality, malnutrition, growth disorders, child obesity and learning & behavioral disorders that include ASD's, which are all rapidly colliding with diminishing private and governmental economic resources to attempt to adequately address and mitigate such problems, it is becoming obvious that the only methods that will reverse the disturbing trends involve delivering modernized education along with superior and sustainable sources of foods and other nutrition as opposed to relying on preventative and treatment strategies that will necessarily involve pharmaceuticals and other costly and even potentially dangerous healthcare practices. It is painfully clear that that current paradigm is no longer working in broad application.

It has certainly been our hope and expectation that by freely releasing the vast majority of Dr. Young's building research and clinical data into the public domain, we would see an exponential bloom of collaborative participation by countless other researchers and practitioners around the globe that would assist us in advancing, perfecting and implementing what we have proven to ourselves and countless others in order to accelerate positive change on a worldwide basis. Yet it has become obvious to us, especially over the last couple of years, that our highly anticipated *passing of the baton* with best intentions that we orchestrated, will not alone be sufficient to stimulate in adequate time the paradigm shift that we see as absolutely necessary to take global nutrition practices and health management along the paths that will start reversing the statistics in disease and disorder back in the right direction. So the mission goes on.

Our paradigm-breaking work that has demonstrated the linkage between nutritional imbalances and deficiencies with Autism Spectrum Disorders as well as a broad assortment of other disorders that are impacting the youth and adults of our world, represents the first and best hope in making true and sustainable change while there's still time to reverse the alarming negative trends in avoidable disease and death, and mitigate the unaffordable associated financial stress to government at all levels.

We intend to network and partner with numerous individuals, companies, agencies and other humanitarian organizations worldwide to research and develop technologies, combine resources and facilitate projects that will fill in parts of this crucial global endeavor, and to take a leading role in bringing viable, affordable, actionable and sustainable sources of nutrition and natural medicinal resources to the peoples of our world. We always look forward to discussing any forms of sponsorship, partnering, media exposure or other promotion and support that will serve to advance these crucial goals.

NO HARM FOUNDATION, INC.
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SUPPORT OUR GLOBAL MISSION

**PLEASE HELP US PROMOTE *REAL AND PROVEN SOLUTIONS* FOR
CHILDREN AND ADULTS SUFFERING WITH AUTISM, ADD, ADHD AND OTHER
AUTISM SPECTRUM DISORDERS**

Since 2001, I have had the pleasure of serving as General Manager of the Assertive Wellness Research Center located in Durango, Colorado, and over that time I have been witness to nearly miraculous reversals in the health and wellness of a great number of individuals with highly-varied ailments and conditions who have had the confidence to travel to the Center from every U.S. state and a number of foreign countries, solely as the result of private and professional referrals.

One of the most astounding testaments to the power of natural medicine and proper nutrition that we have experienced has centered around my sister Dr. Shauna Young's work for more than four years now with a multitude of children and adults who had been suffering under the symptoms that have been clinically diagnosed as **Autism, Attention Deficit Disorder (ADD), Attention Deficit Hyperactive Disorder (ADHD), Asperger Syndrome** and other closely-related learning and behavioral conditions cast under the net of **Autism Spectrum Disorders (ASD's)**.

Through her intuition, clinical experience and persistence, Shauna has rediscovered a long-ago identified condition of toxicity and imbalance in the human body that appears to demonstrate a direct link in causation to a good percentage of cases of ASD's, but even more important, she has also theorized and subsequently clinically-proven time and time again that a safe, uncomplicated and inexpensive dietary and supplement protocol is capable of producing rapid, undeniable and apparently non-regressing reversal and/or elimination of symptoms in an unbelievably-high majority of the cases that she has worked with.

So right up front, here are the bullet points on what you're probably looking for:

- Shauna's work has proven to us that not only is there a common link to many cases and syndromes along the Autism Spectrum, but that in a large percentage of such cases we find that the conditions and symptoms are ***highly and rapidly reversible***
- Such effective reversals of symptoms can in many cases be achieved with no more than implementation of uncomplicated and manageable changes in diet, and the first noticeable incremental improvements can usually be measured in days and weeks as opposed to having to wait many months and even years

The primary goal of the No Harm Foundation is to aggressively help in getting this highly-important message out to the general public and media with the hope that countless other medical practitioners will be stimulated and encouraged to join Shauna in making this information and help available to their clients and patients, and that the research and

application of this productive new direction of medicine will be magnified a thousand fold worldwide.

This is highly-important subject matter and we truly hope that this material will start to supply part of the answers that you and countless other families are searching for. Please understand that this story has been a very difficult and a regrettably-long process in getting out, and although certainly not all of your questions will be answered in this writing, it is our most sincere goal that the broad public release of this information will spark and usher in an entirely new paradigm in research and real help for countless suffering children and adults.

Our extreme preference with this writing would have been to be able to supply you with a list of trained practitioners local to you, but regrettably that resource does not yet exist. There is no doubt that the potential for maximum individual success increases greatly where one-on-one assessment and consultation with a healthcare professional is possible. However, due to the fact that enough of Shauna's clients have shared no more than their copies of her dietary protocol with friends and relatives who have reported being able to achieve various levels of undeniable success on their own, we have reached the point of confidence that a good deal of benefit can be achieved at home until greater resources become available.

We know that surely some percentage of those who decide to follow this Protocol will achieve no dramatically apparent result without individual professional assistance, but the potential upside here definitely justifies giving it a try. There's certainly nothing to lose, and everything potentially to gain.

As there is no way that Dr. Shauna's office is able to personally and effectively answer all your questions by phone, email or otherwise, we hope that the information you will find here will be able to address many of the issues and questions that she regularly hears from all around the country and beyond. After reading this information completely, we will do our best to help you where possible with your remaining questions if you will email to info@noharmfoundation.org or phone the Assertive Wellness Research Center in Colorado at (970) 385-7577.

If you are a physician, therapist or other healthcare practitioner and would like more information about participating in this program, you may also call (970) 385-7577 Tuesday through Friday (Mountain Time). Be sure to register your email with us through our website at www.noharmfoundation.org so that we will be able to keep you posted on new developments, protocol revisions, and on upcoming seminar and training resources that will be organized at the earliest opportunity.

We sincerely hope that you elect to join and help us in this worthy & necessary effort

DISCLOSURE & DISCLAIMER

The entire contents and information provided in this writing are intended only as a free-sharing of knowledge resulting from private research and clinical experience, and represents only the opinions of Shauna K. Young, PhD, CTN of the Assertive Wellness Center, Inc. Neither in her capacities as a practicing Traditional Naturopath nor as a Doctor of Philosophy in Natural Sciences, does Dr. Young diagnose or treat any disease or give out what is legally-deemed, “medical advice”.

It is important to understand that the Spectrum Balance[®] Protocol & Diet have been created to address the theorized condition of abnormal and unmanageable stress being induced on the body, and the brain specifically, due to specific chemical disruptions associated with mineral imbalances that may result from improper nutritional choices. It is proposed by Dr. Young that by effectively restoring these balances with specific corrective dietary changes, many subjects may experience and have experienced reductions and/or elimination of some or all of the symptoms that have been classified under clinical labels such as PDD-NOS, Attention Deficit Disorder (ADD), Attention Deficit Hyperactive Disorder (ADHD) and various degrees of classic Autism. As these syndromes and disorders have not been formally classified by any medical body or authority as “diseases”, then successful instances of reduction and/or full reversals of symptoms should not be in any way referred to as “cures”.

No official clinical trials and/or double-blind tests have been conducted using this Protocol and it has not been endorsed by the U.S. FDA or any medical body, agency or association. This entirely new field of study warrants significant additional research and much broader clinical application, and the authors make no representations whatsoever that following this Protocol will provide the same level of desired progress for all subjects, especially when considering all the various underlying and unknown factors that may be present in each individual case and without each subject having the ability to receive personal consultation and assessment with Dr. Young or another trained healthcare professional.

This writing was not created and is not presented to be a technical paper and it was prepared most-importantly so that the material could be easily understood for education of and consideration by the general public. The information contained is only provided for educational purposes and is not intended to replace a one-on-one relationship with a qualified healthcare professional. Dr. Young encourages each and every one of you to always make your own health care decisions based upon your own desires and research, and through consultation with trained practitioners.

Dr. Young is herewith making no philosophical, cultural, religious, environmental or other such judgments about the foods recommended or discouraged, and certainly you will need to take into account any foods that you or your children have known allergies or other sensitivities to. The Spectrum Balance[®] Dietary Protocol is not derivative of any other dietary philosophy to Dr. Young’s knowledge and is definitely not consistent with all requirements of classic gluten-free and/or casein-free (GF/CF) dietary protocols. Therefore, any child or other person who has received evidence by testing of sensitivities/allergies to these or other dietary factors should exercise proper caution with deviation from any special diet that is currently producing positive and cumulative results.

These statements have not been evaluated by the U.S. Food and Drug Administration. No protocols, foods or products herein discussed are intended to diagnose, treat, cure or prevent any disease, or to replace the need for regular medical care. If you are pregnant, nursing, taking prescription medication or have any medical condition, consult with your physician before making significant changes in your diet and/or supplementation.



Shauna K. Young, PhD, CTN, CBS, OSJ

Shauna Young is the owner and Medical Director of the Assertive Wellness Research Center of Durango, CO, which first opened its doors in 2001. Since its humble beginnings, her center has now to date had the distinct pleasure of seeing thousands of clients who have had the confidence to travel from every U.S. State and even several foreign countries based almost exclusively on referrals from other practitioners and clients who have been pleased with the consultation, products and help.

Shauna completed her initial education and obtained her degree as a Naturopath under a regimented correspondence curriculum through the Herbal Healer Academy, a school duly certified by the American Naturopathic Medical Association. Since 2001, she has been practicing as a Traditional Naturopath within the disciplines of her continuing education and certification with the American Naturopathic Certification Board (ANCB) and as a Certified Biofeedback Specialist (CBS) with the Natural Therapies Certification Board (NTCB).

In 2005, after four years of clinical observations and experience, Shauna began targeted research regarding her theorized negative effects of excess and stored manganese on the human neurological and sensory input systems and their possible symptomatic connections to Autism and many other neurological, learning and behavioral disorders in both children and adults. Based on her nonconforming theories and the promising clinical success produced from applying only this early research, originally referred to as "The Popeye Protocol" and currently as the "Spectrum Balance[®] Protocol", Shauna received invitations for speaking presentations and subsequent Distinguished Awards of Excellence in both 2006 and 2007 from the internationally-recognized Global Foundation for Integrative Medicine.

Shauna holds a Bachelor of Science Degree in Natural Sciences and based on the merits of her research, theories and doctoral thesis on Manganism as it relates to Autism, was awarded a Doctor of Philosophy (PhD) in Natural Sciences from the University of Natural Medicine in Santa Fe, New Mexico. In February of 2008 she was also knighted into the international Sovereign Medical Order of the Knights Hospitaller in recognition of the unique impact of her work with Autism and for positively advancing the field of natural medicine in general. The mission of the Knights Hospitaller is to promote higher levels of international health and to establish, equip, staff and maintain humanitarian and medical treatment centers worldwide.

She has also been appointed to the faculty of the University of Natural Medicine in Santa Fe, NM and serves as the Chief Medical Advisor for the No Harm Foundation (www.noharmfoundation.org), a Colorado not-for-profit organization formed with the primary goal of releasing this vastly important information with the intent of ushering in a new paradigm in research and provide real help for countless suffering children and adults. This is expected to serve as a lightning rod issue to create permanent positive change in how the role and importance of natural medicine is perceived by the public and medical communities.

For many years Shauna has been an international lecturer on many aspects of natural medicine and is frequently interviewed regarding the Spectrum Balance[®] Protocol, Autism Spectrum Disorders and many other health related topics. She is author of her first published book, "***If Naturopaths Are Quacks, Then I Guess I'm a Duck***", a both realistic and humorous look into life as a Naturopath practicing in the United States today, and she is currently working on her second book "***Erasing Autism***" that will specifically highlight and chronicle her research and uniquely successful work with Autism Spectrum Disorders.

THE SPECTRUM BALANCE® DIETARY PROTOCOL OVERVIEW

Shauna K. Young, PhD, CTN

I first theorized and began creating and making test use of the initial version of this dietary therapy in June of 2005, which I referred to at that time as the "Popeye Protocol". Since then I have continued to lecture, give seminars and refine the Popeye Protocol through my clinical work. The most recent version of this work that you now have in your possession is now entitled the "Spectrum Balance® Protocol", or as often referred to later in this writing as the "Protocol".

This represents a very manageable, risk-free and inexpensive option that has resulted in the spectacular results we have seen with the many children and adults we've worked with for more than five years now. Although the period of time needed to achieve results has varied depending on individual factors and especially with regard to how well the subjects (and/or their parents) have followed the dietary guidelines, the usual response time for the first significant changes to be noticed have been averaging between 10 and 30 days. Think about it - worst case, the child does not respond, but still suffers no side-effects resulting from eating a healthier-than-normal diet for a few weeks. Best case scenario, a completely noticeable and improved situation by the end of a few months, and at extremely minimal cost and complication. This simple and inexpensive Protocol, time after time has resulted in complete & sustained reversals of symptoms *regardless of the person's age*.

Believe it or not, I have been talking about this program and my findings to whoever will listen in the global medical communities **for more than seven years now**. I also began speaking with a number of the prominent Autism groups and found that nearly all of them declined to even go as far as to watch a video recap on DVD of several of my formerly Autistic, ADD and ADHD kids and their Mom's telling their own stories. There are absolutely no rational and logical reasons for this.

I finally came to realize that part of the problem is that the sheer simplicity of the Protocol makes it difficult to accept the results we're regularly seeing. It's extremely difficult to believe that something as simple as avoiding certain foods and adding other foods, some fatty acids and many times a few common supplements to a person's diet could have such profound impact, but as a Naturopath I understand that life often hands us these simple and natural solutions. So instead of continuing to lecture to skeptical organizations and more clinical ears, I reached the decision to start bringing my work directly to the people who seem most willing to listen and believe – **the parents**.

The clinical diagnosis of Autism is often considered to be a permanent brand not only on a child, but on the entire family: One that causes medical science to stop looking for any kind of **cure** and instead merely to cast around for something that might **help**. With most recent estimates showing 1 out of every 88 children (and growing) now being diagnosed Autistic, and many more somewhere else along the Autism Spectrum (ADD, ADHD, PDD, Sensory Integration Disorder, etc.), something obviously needs to be done to stop this horrible progression.

We have no doubts that there are numerous contributing factors to the development of Autism and other ASD's. I am constantly asked about the vaccine damage controversy. Although many parents have reported by their own observation, rapid onset of symptoms in their children closely following vaccinations, it is obvious that the majority of children who are vaccinated continue to be asymptomatic with regard to ASD's.

Let me just say right here that while I'm definitely no fan of vaccines, I do always support whatever *informed choices* parents make for their own children. Although I do not feel that vaccine damage is by any means a lone cause of the problems, I like many practitioners and researchers believe that they may act for some children as "the last straw" so to speak in cascading into these syndromes. It is very questionable as to whether this will ever be specifically proven (and admitted to), so we hope that vaccination will always remain a choice and decision for each informed family to reach independently.

How about genetic links? With as much energy and research as is being put into addressing this question, I have seen no data that evidences any more than miniscule genetic commonality for the disorders. Might there be some level of genetic *predisposition* that makes one child more prone to developing these conditions than the next? Sure; but where the allopathic medical community seems always obsessed with labels and categorization for every state of disease and disorder, the job of a good Naturopath is to be less concerned about specific causation of symptoms that have been clumped under a label, than to just look for what's necessary to try to reduce and eliminate them.

So what do I personally and professionally suspect is the primary culprit in causing these devastating symptoms? Although without question there are many possible contributing and complicating factors, I believe that potentially a very large number of these cases may be brought on and/or exacerbated by no more than an intolerable excess of the mineral/metal **manganese** in the brain that has accumulated due to over-consumption and other exposure, combined with insufficient bio-available **iron** and simultaneous suppression of the normal and natural regulatory mechanisms that our bodies use to naturally keep such an imbalance from occurring.

We refer to this imbalance as the "**Menefe Syndrome**": "*Mn*" is the periodic symbol for manganese and "*Fe*", the symbol for iron. *Mn* & *Fe* sounded out together equals "Menefe". I know that many doctors and researchers often take pride in naming syndromes and diseases after themselves, but I never cared too much for labeling a condition that attacks millions of children worldwide the "Young Syndrome", or the like. So *Menefe* it is...

A little general info about manganese is warranted here. Manganese is one of those *trace nutrients* one wouldn't normally consider giving a lot of thought to, as our bodies usually maintain its levels in regular fashion. It is a naturally-occurring mineral that is found in many types of rock. Sometimes referred to as the "brain mineral", small quantities are important in the utilization of mental capacities and functions as well as in the formation of tendons, ligaments and in maintaining the structural integrity of the lining of various organs. But obviously the "brain mineral" idea caught my attention.

The first medical record of suspected problems associated with environmental overexposure to manganese was noted in 19th Century miners and was commonly referred to by the syndrome originally labeled "Manganese Madness". This was more-accurately cases of manganese "toxicity" as compared to what we are classifying as the Menefe Syndrome, however it was very instructive to find that the sufferers of Manganese Madness were nearly always in a state of **high to extreme sensory overload**.

This condition that afflicted these manganese miners exposed to toxic dust, appeared to cause symptoms of "*emotional liability, irrationality, hallucinations and impulsivity*". Chronic exposure led to "*muscular weakness, ataxia, tremors, immobile facial expressions and extreme speech disturbances*". These symptoms, often mistaken for Parkinson's in adults, also sounded to me suspiciously similar to Autism in a child. Further reading revealed that other very common symptoms of manganese excess can be speech difficulties and extreme reactions to sensory input - light, touch, smell and sound.

The neurological aspects from this overload are most likely due to the fact that the primary site of internal collection for manganese (described in neurological textbooks as "a neurotoxic metal"), *regardless of the source of exposure*, is the basal ganglia; the mass of nervous tissue buried within the cerebral hemispheres of the brain that is closely associated with the other nerve cell collections of the thalamus and hypothalamus. Since this nerve collection center is primarily responsible for coordinating and smoothing out the movements of the body and for organizing the sensory messages being sent to the cerebral cortex, it's no wonder that the neurological symptoms can the first to appear.

Abundant international research studies have been completed over decades that well-document not only the consequences of manganese overload in compromising brain function in animals and humans, but that adequately describe this competitive game of *musical chairs* so to speak that is competitively played between manganese and iron in a crucial brain chemistry balancing act. Again,

the point of this abbreviated writing is not to overcomplicate this science for the reader, but anyone who wishes to perform a basic Internet search will locate an abundance of documentation on this subject.

Illustrated very simply, try to picture the consequences of this *sensory overload* in this way: Three people are in a room together trying to listen to me explain this concept. Unfortunately there are ten television sets that are all on different channels blaring away at top volume. There are also ten radios blasting away on ten different music stations. How will these subjects react?

- Let's say that Person #1 keeps darting from input source to input source; their attention being caught by a word or phrase coming from one of the TV's or radios only to be distracted again by something else being said on another station, and so on. This very quickly becomes exasperating
- Person #2 thinks to themself, "Forget all this noise! I'm going to concentrate on this one TV screen and see if I can figure out what's going on". They concentrate and concentrate – even going so far as to repeat the words and phrases being heard in an attempt to be able to retain any information to the exclusion of all the noise going on around them. They may even strike out, rave or shout if someone disturbs them in their concentration
- Person #3 just can't handle all the input! They put their hands over their ears, close their eyes and shut down. If you try to penetrate in, they strike out to protect their fragile peace from the intolerable noise and input

According to medical science, Person #1 might be considered to have ADD, Person #2 – Asperger Syndrome, and Person #3 - Autism. All of these conditions manifesting differently in various people, but in response to *identical input*. Think about it for a second: *How do you think you would react?*

Although there's no way of knowing all the sources of this manganese that may be attributed in each particular case, I do now regularly see and recognize the disastrous result of these excesses and associated sensitivities in both children and adults. Our research has revealed that beyond food sources, we can also be exposed to manganese through such means as our water and combustion emissions. However, I believe it likely that in most cases the storing of excess manganese can be more attributed to the lack of iron in a person's diet and/or the lack of the bioavailability and absorption of iron due to dietary factors and other gut-related problems, than specifically to the high consumption of or other exposures to manganese. This is why at our Center, in addition to the manganese issues, we prefer to simultaneously address any gut and mal-absorption issues. No food or supplement in the world will be effective if you are not absorbing the nutrients in the first place.

I have seen the suspected culprits in manganese excesses be anything from toxic exposure (in the case of a welder), to the use of many soy baby formulas, to a low-iron diet coupled with excessive vitamin consumption. Wherever the excess comes from, it's important that you get rid of it! The best thing you can do for the issue for yourself and/or as a parent is to become a diligent food and product label reader. You will need published reference materials or at least our lists to identify generic food items that are relatively-high in manganese, however we have seen amazingly-high levels of manganese listed right on the labels of anything from baby foods and formulas, to popular breakfast cereals and many other processed foods, so pay strict attention! Our recommendation is that if the content for manganese is not shown on a label, then play it safe and either research it, or avoid it.

Since I have practiced as a Traditional Naturopath, a named "diagnosis" doesn't mean much to me. I have more of a tendency to look at symptoms and how and why they occur, than to have a need to give something a name or label. In my practice, I choose to use a form of evoked potential bio-feedback to try to detect bodily stress in response to an excess, and that's how I originally suspected the condition and syndrome. But quite frankly, no matter the result of any form of testing, if a person/child is exhibiting these recognizable symptoms, I'd go ahead and try the Protocol at any rate.

So instead of concentrating on any specific “diagnosis”, just refer under our *Frequently Asked Questions* section to my list of some of the most common clinical symptoms of manganese overload and how they may relate to all kinds of diagnosis’s and syndromes. There are sometimes more than these listed, but anyone presenting any or many of these in particular will put me on high alert.

The issue that is constantly raised and I believe *obsessed over* by many in the allopathic medical community and even in Autism groups, is how to *precisely* identify and quantify the presence of excess manganese in a manner acceptable to them using standard medical testing procedures. To this I respectfully respond, “Who cares?!” When the above-mentioned symptoms are present, why initially jump to expensive and invasive testing procedures and possibly to drugs? Why not just *try* the dietary Protocol for at least a short time and see what happens? Aside from the presence of any specific allergies, I am not aware of any possible side-effects from this type of dietary modification. Although I would highly suggest having the support of a health professional whenever possible, even parents at home can start this program independently and just see how it goes.

We have had both children and adult clients come to us who have elsewhere had metals testing done in the forms of blood work and/or hair analysis that do not seem to evidence any “excesses” of manganese. The problem with this limiting assumption is at least three-fold:

1. The problem we have theorized, which has been supported with plentiful historic third party research, is that the manganese sensitivity occurs most specifically *within the brain chemistry*, so neither blood nor hair testing alone will necessarily reveal and/or confirm this condition
2. We are talking here about *individual* sensitivity to manganese, and not a syndrome that can be applicable or susceptible to all children or adults. I often use the analogy of a person being allergic to a food such as peanuts: As one person could eat a pound of peanuts and have no ill effects and the next person may experience a violent allergic response to a miniscule exposure, it is obvious that the *response* produced by the peanuts is far more important in the equation than just the *amount of peanuts* that might be measured and quantified in one’s body
3. There is much disagreement and conflicting information in nutritional and toxicological research fields as to what actual levels of ingestion and retention of manganese is even considered *safe* above very trace amounts. We have found numerous studies internationally that have pointed to negative consequences suspected from manganese levels that are currently considered to be within *acceptable* standards. We certainly hope that our work will motivate more definitive research and reconsideration regarding this important matter

But as it turns out, there’s more to it than just Manganese & Iron: “The Spinach Paradox”

Spinach happens to be one of the very first foods that demonstrated to us its ability to help trigger the stabilization of excess manganese and rapid reduction of unwanted symptoms in my child clients, however the wonder-leaf also became a point of temporary frustration for us due to a subsequent realization that at first seemed to be a potential contradiction in the logic of our already successful dietary Protocol. We have referred to this turning point in understanding as “The Spinach Paradox”.

By the summer of 2008, we had a good deal of client cases under our belt and we were aggressively ramping up our efforts to get the word out to the medical and Autism research communities in order to attract help in dramatically advancing and expanding the work. One complaint that we were hearing over and over from parents was that we didn’t have enough food items categorized on the diet to allow diverse enough meals for the whole family over extended periods of time.

It was true; at that time we had a fairly short listing of no more than a couple dozen foods on our two “eat” and “avoid” lists, and due to the fact that things seemed to be working so well despite our having so little available pertinent reference information, we had been extremely cautious about adding more

foods into the mix that might create unknown or unwanted interactive consequences. Why try to fix a process that didn't seem to be in any way broke? But still, we had to agree that we might have greater and more consistent compliance if we were able to add greater variety to the meal possibilities.

One day my brother Doug sat down at his computer to try to locate more foods that I might be able to recommend with confidence. Logical Internet searches involved lists of "foods that are highest in iron", and lists of "foods that are highest in manganese". He later described a particular day that resulted in so much confusion and frustration that he was literally afraid to bring the new data to my attention.

The concern arose when a particular search result located a list of foods that were considered to be "*excellent sources of manganese*", and he noticed that near the top of the list was one of our Protocol heroes...*spinach*. How was it possible that spinach, one of our first assumed *trigger foods* that put us on our path of discovery, was considered as good a source of dietary *manganese*, as it was of *iron*? I think he nearly had a panic attack. Was this revelation destined to throw our entire theory out the window? Were we now back to square one??

However, as our ongoing research has revealed to us, the answer as to why spinach "works" within the Protocol is more complicated than just its ability to simultaneously provide both minerals and then have the iron simply "win out" over the manganese. As we started researching the overall nutrient content of foods more completely, it became increasingly obvious that there are other factors that have influence on this important mineral balancing act such as certain vitamins and compounds present or absent in foods that tend to either enhance or inhibit iron absorption and utilization.

Our intent in this writing is not to overcomplicate our food selection and rating process for you, so just know that there are a number of underlying factors within the nutritional profiles of the foods taken into consideration, and therefore we suggest adhering to our food rating system in preference to any seeming contradictions that may result from simply searching, cross-referencing and contrasting lists of high-iron and high-manganese foods. Additional information will surely become available soon.

Spinach continues to have a net-positive effect in the whole process, however over time we have identified a number of foods that we feel are even superior for our purposes. But never the less, we will always be thankful to spinach in serving as one of the first heroes for the kids in our program.
Popeye saves the day once again!

Potential Application and Effectiveness beyond ASD Cases

I, like many practitioners who work with ASD's, believe that less-severe symptoms associated with many diagnoses of PDD-NOS, ADD, ADHD, Sensory Integration Disorder and others are all less-pronounced expressions along the same Autism Spectrum, and therefore may share in this same dietary/nutritional imbalance that is producing various degrees of "brain fog" consequences.

As the majority of our clients seek our help for general wellness, and to a growing degree for help with ASD's, we have far less clinical experience with specific psychological issues. However, we have seen sufficient benefit from our Protocol with both children and adult clients to suggest that the same dietary links and imbalances that we have identified (the Menefee Syndrome) may be contributing factors in many other disorders that involve informational processing breakdowns in the brain.

So for physicians, other practitioners and therapists, this represents an additional consideration for trying this dietary modification therapy with patients who are dealing with such disorders as OCD, Tourette Syndrome, Chronic Depression, Generalized Anxiety Disorder, Bi-Polar/Schizophrenia and even Alzheimer's. Certainly no harm will be done, and if such cases are going to positively respond to these dietary changes, this "trigger" effect should result in some subjectively and objectively noticeable improvements in as little as 2-4 weeks of strict compliance, so this will not represent a very protracted or laborious experiment in exchange for the potential upside.

Now I know what many of you will be thinking when first reviewing the attached diet, because nearly all the parents say the same thing: You'll be wondering how you'll get your kids to eat these foods, right? I mean, "Don't all kids hate sweet potatoes and spinach"? The answer to this, as unbelievable as you may find it, is a big **NO**. The children (and the adults) *almost to a person* have all found themselves, once exposed to it, actually craving many of the iron-rich meats, veggies and fruits suggested on the diet. One 9-year-old I was discharging from regular monitoring after a few months was very concerned that since he was technically going off the program, whether he could still eat spinach because he "loved it so much". His Mom assured him that he could have it anytime he wanted it; something she never expected to say to her formerly vegetable-hating picky eater!

Trust me; most kids tend to adapt to the diet readily. And even if they don't at first – *make them stay on it!* You're the adult, and *you* get to make the choices. A few of the kids (like the one who only liked fast-food and cereals) threw some major tantrums and/or went a little hungry for a couple of days, but in the end they have virtually all come around to adapting to and enjoying the diet. Honestly, the biggest adaptation problem we have seen is with parents who are resistant at first to preparing breakfasts for the family that involve more than just pouring something out of a box, or lunches that aren't between two slices of bread. We truly wish that we could make the diet even easier, but ***unless you are prepared and able to avoid the types of foods that have helped create the problem in the first place, you cannot have the expectation of achieving real and sustained improvements.***

Before putting people and especially *children* on lifelong courses of very serious and expensive drugs with very real potential for side-effects and/or into very expensive behavior modification programs, why not get the person on this high-iron/low-manganese Protocol and see if there is any positive result? The usual response time for the first significant changes to be noticed is quite rapid, and no one in this world is going to be damaged by a few weeks of this diet – in simple contrast to the prospect of starting on many prescription drugs where it often seems that potential side-effects can be as bad or worse than the targeted condition or disease itself.

One of the drawbacks to so many of the other dietary regimes I have reviewed that are designed to aid various conditions, is that they are quite difficult to maintain. They require a lot of portion control, specific shopping, very limited choice, and just forget about ever traveling or eating out! It usually also means making one meal for the affected child or adult and another meal for everyone else. The diet I am recommending will be wholesome, healthy, tasty, varied and satisfying for the whole family.

The "portion control" for this Protocol does not include anything *measured in ounces* except in the case of dairy and specific supplements that we might individually recommend. Neither do we include instructions on how many times a day to eat something in particular, or dictate any one food that you ***must*** eat. Truthfully I tried to do that at first because that type of strict regulation is far more readily accepted by the medical community at large, but it just didn't work as well, and I'm completely results-oriented.

My standard instruction to parents is exactly this: "***Every time your child wants something to eat, just make sure whenever possible that it's from one of our "Best Choices" columns***". This includes breakfast, lunch, dinner AND snacks. If at first they only like a few things on the lists, then let them eat those foods – over and over. It always amuses me when I hear, "I love salmon" or "I love spinach" out of the mouth of a child (especially one who had little or no language skills before the dietary Protocol), but it just keeps happening.

So in summary, you'll find that the basics of the Protocol are just that – very basic. As I mentioned before, I honestly believe that one of the barriers to acceptance by most medical doctors (or even by the public in general) has been how simple and easy this actually is: Give the digestion system some support, increase bio-available iron consumption, enhance iron absorption and minimize manganese intake. Pretty simple isn't it? How can something as easy as balancing the iron and manganese levels in the body erase these horrible and debilitating symptoms? Answer again: "***I don't yet have every answer, but who cares as long as it works!***" This is a gift. Be grateful for it.

FREQUENTLY ASKED QUESTIONS

How do I know if my child is, or I am, a good candidate for this Protocol?

1. If any person is displaying associated symptoms and/or has been diagnosed anywhere along the Autistic Spectrum (PDD-NOS, ADD, ADHD, Sensory Integration Disorder, Asperger Syndrome, classic Autism, etc.) or has any other form of chronic psychological or behavioral issues, then it's worth a try. As this is just about "food", no one will be harmed in trying.
2. If the person in question is displaying any of these *particular* symptoms:

A. **Oversensitivity to sensory input:** This is first and foremost, and I have rarely seen anyone in our program who didn't display at least some of this. Sometimes it can be an overreaction to a single sensory source such as light, noise or certain sounds, but it's often from combinations of input. This can manifest in ways such as not wanting to be around other people (especially in a classroom, restaurant or shopping mall), flinching, squinting or watering eyes in bright light, intensely smelling everything from fabrics to foods (sometimes getting very offended by strong smells), to always complaining that they are "being yelled at". It can also induce claustrophobia and a tendency to physically strike out at anyone who gets too close. On the "touch" end, I've seen kids who refuse haircuts because they can't stand the way the little cut hairs "hurt" them, who can't stand wearing bedclothes, or who keep tearing off their clothes because of the little tags in the neck of a shirt. If your child is light or sound sensitive, hates going to the mall, doesn't like to go to the movies, constantly sniffs all his/her food or hates all the shirts with tags on them, you're probably looking at a case of sensory overload. ***Although it shows up in varying degrees, this is the most common of the issues and reflects the basis of the problem.***

B. **"Extreme" Dreaming:** Frequent, horribly frightening and very realistic Technicolor nightmares that they have difficulty waking up from are quite common. Others might just dream very frequently and in extreme detail. Children often times don't voluntarily tell their parents about these dreams, but it will manifest in a kid who always wants to sleep with Mom and Dad, or at the very least can't sleep without a nightlight. Others tell long very-involved stories about the vivid dream they had the night before. At least 90% of the time these affected people tell me that the worst part of the dreams are that objects, people or quite commonly "demons" or other scary beasts, are "coming at them from everywhere", or that they are being "pounced on" or otherwise attacked. Another strange aspect of these dreams is that for some reason in many people, the syndrome seems to invoke some of the darker areas of the subconscious resulting in dreams that the person is actually *ashamed of for even thinking*.

C. **Impulsivity and/or "Blurting":** This can range from saying inappropriate things or acting out, all the way to violence – sometimes even extreme violence. A common statement to look for from older vocal children and adults is, "I know I shouldn't be doing that, but I just can't stop myself", which is often accompanied by tears of frustration or recriminations that they are "a bad person". It took me a long time to stop being shocked at some of the things children said to their parents or siblings, or sometimes even to me during office visits. These things range from the odd or inappropriate to incredibly sarcastic, cruel or lewd. I've had everything from kids who tell me how horrible their parents are, to those who started screaming and cursing at, or even hitting, their parent who was with them.

D. **"Scenario Building", or hearing voices in their head:** So common that it is nearly universal, is this "scenario building". It involves hearing your own voice (or sometimes someone else's) in your head making up wild stories and primarily-negative fantasies. In children (especially the younger ones) this manifests most often in fear and particularly in paranoia. They very often are afraid of other children, teachers, normally harmless animals, or of what they project someone may do to them – even their own parents. Some of the scenarios related to me by children have been absolutely chilling, and there have been some

very shocked expressions on the faces of Moms who find out that their own beloved kids are afraid of them or their Fathers. It also shows up regularly as the “tall story teller” with a child who either wildly exaggerates or just commonly lies altogether. The thing to remember is that because of the high sensory input, this “tall tale” stuff is quite often not an exaggeration in their mind, but rather *exactly as they remember it happening*.

E. Related Physical Symptoms and Especially Digestive Complaints: Not always, but with enough regularity to definitely mention, I see that kids who fall into this category also have chronic stomach pains, diarrhea or constipation, rashes, eczema, allergies or asthma. Presenting with these symptoms alone I would not necessarily first consider our syndrome, but these often accompany the other more-recognizable ones.

Is this program expensive to take on?

In a word...**no**. Even with those clients who are able to travel to see us, we usually only recommend limited supplements, and the necessary food items can all be easily included on your family’s usual shopping list. If you’re not accustomed to eating anything beyond fast-food, then this will probably be somewhat more expensive for you. If you usually eat quality foods, then you probably won’t notice a significant difference in your budget as the diet is mostly based on avoidance and substitution.

How difficult is this diet to follow? Can we still eat in restaurants?

The diet is actually relatively simple. No measuring or worrying about specific portions or searching for foods and ingredients you’ve never heard of, and the best part is that the diet will be healthy, nutritious and delicious for the whole family. There’s no justification for having to make more than one meal for the whole gang – a real plus for busy parents. Although eating out can present a real *wildcard*, an occasional restaurant that offers good quality food should not present much risk.

Do I have to eat the same foods as my child?

The best results we’re witnessing here in Durango and hearing back from many of our home-based programs are consistently from the families that have ***all family members eating by the SBP Diet guidelines***. We can’t stress the importance of this enough. Trying to make different meals for various kids and adults in the same household is not only time consuming and overly complicated, but produces feelings of exclusion for those who are made to feel that they’re being singled out for special treatment. If a child is to properly appreciate that this represents “healthier” eating choices for *them*, then how are they able to accept that *their* foods are somehow not good enough for the rest of the family? And also, if you keep junk food in your house, whether it’s under your bed or on top of the fridge, your child will find it. Set a good and healthy example and eat by this diet as a family. Your positive attitude that the changes are “no big deal” will go a long way with your kids, and *trust us here*; Dad, Mom and everyone else will see that they feel better on the SBP Diet as well!

How do I get my picky-eater kid to eat healthier foods and go without a few favorite items?

Actually, it’s probably much easier than you might think. Unlike adults who are set in their ways, once you show kids a better way to go, they generally grab onto the changed lifestyle with gusto. I have seen two-year-olds (and older) who walk around with open bags of raw spinach eating from it like another kid might with a bag of potato chips. Besides, it’s not essential that you serve a large variety of foods in order for this process to start working. If the child initially only seems to like a limited number of food items on the diet, then let them eat just those for a little while. Many of the most beneficial foods can also be blended into “smoothies” that most kids don’t have much problem with. Purees that mix meat and vegetables, or fruit and vegetables (not fruit with meat), can be very effective. I know some of this may sound a little far-fetched at first, but trust me - the kids usually do just fine. It’s generally harder to change the habits of the parents than of the kids!

We are practicing vegetarians. Do have suggestions for us regarding this diet?

We continue to attempt to apologize in advance to our many adult friends out there who have adopted a vegetarian or vegan lifestyle not only for themselves, but attempt to likewise raise their children with such choices - many times from infancy. We surely can appreciate that choice, but best success with the SBP Diet is proving to be much slower if not nearly impossible in such cases due primarily to the

challenges of getting enough protein and iron from the plant-source foods that we don't otherwise restrict in Phase 1 of the diet. As we try to remind people, we neither have the agenda nor desire to challenge or debate the validity of dietary choices in a family based on philosophical, cultural, religious, environmental or any other priorities. Ours is simply a mission of sharing information and education that people are willing to freely use or reject at their discretion. As they say, *don't shoot the messenger!* For example; the reality that our bodies are able to utilize a nutrient such as dietary iron obtained from animal foods much more efficiently than the iron contained in vegetables does not represent "*our opinion*", but a simple **fact** of biochemistry. The prospect for the anti-nutrient action of phytic acid/ phytate producing mineral depletion and resulting imbalances in our bodies is not our "*opinion*", but is instead a **fact** of nutritional science that has been well researched, studied and documented, but not adequately valued, reported or properly applied to human nutrition over many decades. Just do a little research on these important topics for yourself.

Some of these recommendations go against what I've been told or have come to believe. Is it really healthy for me or my family to eat this way?

Regardless of your prior education, assumptions, beliefs and resulting choices for your *personal* diet, we only ask for you to continue to look beyond a number of the food choices that have been marketed and pushed upon consumers over the last several decades, and to possibly reconsider the growing evidence, such as that being continually confirmed by the positive results from the SBP Diet, that maybe less than ideal nutritional needs of developing infants and young children (or even adults) can be and are being met with just **any** profile of desired foods. And please never feel that you have to just take our word for it: Just a little research and investigation on your part will reveal plentiful and mounting evidence that there are far more potential consequences for the function and wellness of the bodies of ourselves and our children than we've been led to believe for a long time now. Many researchers and the nutritionally educated are starting to get it, and there's a multitude of books, online writings and other resources that will supply you with added confirmation that people need to reeducate themselves about the dramatic benefits and consequences of their food choices.

How long should this take to see any results?

That's difficult to predict with any consistency as every case is certainly different, although we need to reinforce that the people who adhere most strictly to this Protocol will always see the fastest results. As a general rule, the younger (and smaller) the child, the quicker the parents usually see some results. In general – let us stress that – *IN GENERAL*, we are commonly seeing the first significant changes beginning somewhere within the first 30 days of strict and proper compliance.

Is it normal to experience ups & downs, good & bad days and other inconsistencies while on this diet?

Absolutely. As much as we would like to say that everyone sees progress in some uniform, cumulative and predictable manner, the *majority* of people see ups and downs that if not anticipated, may seem like setbacks or regression. The process can be very different for many due to individual sensitivities to the Menefee Syndrome and the particular severity and duration of the condition and unwanted symptoms. Setbacks almost always settle down within a couple of days, ***so stay with it!***

Is it normal in the beginning that my child seems to still feel hungry after meals?

Many people quickly recognize that the SBP Diet reduces many of the carbohydrate foods that have commonly become large parts of the modern diet of many. The abrupt reduction of these foods is often associated with cravings and feelings of less fullness until your body efficiently adjusts to using higher percentages of protein and healthy fats as fuel and to alternate sources of fiber, in preference to all the breads, cereals and other low-value carbs that provide those accustomed feelings of "fullness", but may also promote weight issues, blood sugar irregularities and in the case of some foods, the specific nutritional imbalance that we have identified. Do quick calorie counts of a few meals and you'll be reassured that you're not starving anyone. Just do your best to be a little patient initially.

If my child's (or my) behavior or symptoms actually seem to get "worse", either immediately after starting the diet or several weeks into the diet, does that mean that the process is not working correctly?

We like to say that any resulting changes in symptoms and behavior are indications that you're making positive progress. It is important to understand that all we're doing here is substituting some foods for other foods, so here's our logic regarding the process that I think will make sense to you:

- Obviously the best and most desirable reaction and outcome will be rapid, progressive and cumulative improvements
- But another positive indicator and reaction may actually be a temporary worsening of some symptoms. If the Menefee Syndrome were not indeed present, then it would be more likely to notice *absolutely nothing* from the dietary changes
- Therefore, the *WORST* outcome we could expect would be to notice absolutely no changes, good or bad, over the entire process

What do I do regarding missing foods items that you don't have anywhere listed?

If a particular food item isn't listed and categorized, *just don't eat it!* Usually missing whole food items simply means that we have not yet been able to locate the nutritional information we need to properly rank them to our satisfaction. We ask people to appreciate that beyond the U.S., we have practitioners and families all around the world considering if this diet makes reasonable sense, and we therefore try our best to only refer to generic whole foods that much of the world will also have access and availability to. Packaged and otherwise processed foods will always represent unknown variables in the ways that they may influence your program dependent on such factors as the sources, ingredient quality and content, chemical content, GMO food content (a steadily increasing concern) and other and potentially undisclosed and unknown factors. Your best control is always to prepare meals with whole and organic foods whenever and wherever possible. When you can't always locate organic, then just do your best to buy from trusted sources. There are TONS of whole food items in the diet now, so please just do your best with these for the time being.

Isn't there some way to just make this diet "easier"?

We hear and acknowledge frustration from many that the SBP dietary suggestions seem for various reasons to be difficult to adopt, and we can understand their hopes that the process can somehow be made *simpler*. One of the initial observations and comments that we commonly hear is that "There's no way that my child will be able to eat this way because all his/her favorite foods are on your *Don't Eat at All for Now* lists." It's very important for those who feel that way to pause and try to recognize that there's an extremely good and self-evident reason for that predicament. It's not like we or others set out to see just how many of the favorite foods of children or adults we can deprive them of. There are powerful chemical reasons that many people feel quite literally "addicted" to certain foods, and just because someone craves a particular food is not sufficient validation of its nutritional value or necessity in their diet. Over the last several decades our poor eating habits and high consumption of processed foods has really taken us off a cliff, and we must now rebuild our knowledge and reprioritize the importance of proper nutritional choices – especially for those very early in their lives. Remember that the SBP dietary recommendations are simply offered for you to *try*, or *not try*, along with our sincere hope that if you do elect to give it a solid effort, you will rapidly start seeing some confirmation that the process is benefiting the wellness of you, your child and the entire family, and that this will give you confidence that these lifestyle changes are well worth it in many ways.

How do we know when we should transition between the three "Phases" of the program?

Transitions from using only the Best Choices list foods to more on the Moderation lists should ALWAYS be done based on behavior and NEVER simply on the length of time on the Protocol. You cannot just say, "I've been on Phase 1 for 'X' number of weeks, so it's time to move to Phase 2". When your child is behaving and learning the way you would like them to, then and *only* then is the time to move on to the next Phase. As everyone is different, it's going to be up to you, your medical practitioners and therapists to judge the level of results and best transitions. Once you have moved on

to Phase 3 we strongly believe that you'll appreciate that this represents an excellent dietary lifestyle to stay on indefinitely, but remember that if you see any signs of regression, you can always temporarily return to the more strict requirements of Phase 1 anytime you wish.

What about the use of medications & supplements along with this diet?

We at No Harm Foundation, and especially Dr. Shauna, are often asked about medications and nutritional supplements that we recommend or do not recommend. First and foremost, our goal is always to have the dietary changes do most of the work whenever possible, however we know that often there are other issues that children and adults are experiencing that the diet alone can not be expected to completely address. Please understand that as we are not medical doctors, we can in no way legally or even ethically advise you about the use or dosage of any prescription drugs. You will need to consult with your prescribing physicians for all such guidance. There are so many nutritional supplements available out there, yet with unpredictable availability (especially with international considerations), so it's rarely practical or even responsible for us to try to recommend generic supplementation for people to try to locate in their markets or even health food stores. There are superior and inferior brands and many other variables in your choices out there, and Shauna always prefers to keep supplements minimized and fairly customized to the individual case at any rate.

THE SPECTRUM BALANCE® PROTOCOL DIET

Revision: 150205

Since foods form the cornerstone and most vital parts of this Protocol, pay particular attention to our relative rankings of the many food items that follow. Due to still expanding research, this is a growing yet incomplete list considering all the food choices out there, but this guide should easily give you enough options to create a variety of complete meals and snacks, and ones that the whole family will enjoy and benefit from nutritionally. If you are not prepared and ready to strictly follow these recommendations, then just wait until you are. It is imperative to understand that ***an inadequate 50% compliance will in no way produce a 50% or more positive result, so treat this program very seriously if you wish to achieve any significant success.***

Now, please trust that we know what many of you will be thinking when first reviewing these lists...*"What do you mean to not eat (...whatever). I've heard that it's very good for you!"* Understand that the key here is that we are suggesting that you concentrate on eating certain foods and avoiding certain other foods because of their *overall* nutritional profiles and the ways that they might ease, perpetuate or aggravate the symptoms present. Therefore we suggest adhering to our food rating system regardless of any seeming contradictions with more "conventional" thought out there. Once balance is restored in the body and ongoing dietary responsibility is practiced in the future, many foods that may be your favorites will return to being fine to consume, at least in moderation. If you don't see a particular food item in *any* of our categories, it's because we haven't yet been able to locate sufficient information to classify it with any confidence. The lists will expand as further research is completed, so the Golden Rule for now is...***If you don't see a food listed, then please just avoid it!***

Our intent with this simple guide is to not overcomplicate the food selection and rating process, so just know that there are a good number of underlying factors taken into consideration when ranking these foods with specific regard to their influence on an all-important nutrient balancing act, such as certain vitamins and compounds being present or absent that tend to either enhance or inhibit nutrient absorption and utilization. We have taken into account both nutrient as well as "anti-nutrient" properties of foods in creating this unique reference.

The processing and packaging of foods always has negative impact on their nutritional content, so ***whole*** foods and ***fresh*** juicing are always preferred. Whenever possible, try to only steam your cooked vegetables and avoid microwaving. Only ***un-sulfured*** dried fruits should be used where indicated. Also remember that we are rating foods with the assumption that you're preparing most meals from home. Be aware that restaurant and fast-foods will be of unknown and varying nutritional quality and therefore may produce suboptimal results for you.

We're making absolutely no philosophical, cultural, religious, environmental or other judgments about these foods, and you'll certainly need to take into planning any foods that you or your children have known allergies or other sensitivities to. Just do your best to use this ranking system to plan meals using those food items that you can locate and are agreeable with. With a little creativity and practice, we're sure you'll find plenty on these lists that your child and the rest of the family will be happy to eat – ***and most important, it will all be worth it!***

Most Important Factors:

You will find that the foods groups that follow are divided into three very important categories:

"Best Choices" – These are the foods that you will want to utilize in planning your meals whenever and wherever possible. Any positive results that you will achieve from these dietary changes will be in direct proportion to how well you comply with these recommendations. The food items in this category reflect our best suggestions that will allow you to hopefully notice initial results within the shortest timeframe.

"Eat Only in Moderation" – The primary purpose of this second column is to offer you a greater assortment of foods for your meal planning, but their value in the dietary therapy is considered to be mostly "neutral", in that our expectation is not that they will be especially *beneficial* in your overall program, but more that they will not be *detrimental* in your program. A good rule of thumb: Try to eat a mix of at least 2-3 portions (by volume) of *Best Choices* items to every 1 portion (by volume) of *Eat Only in Moderation* items.

"Don't Eat at All for Now!" – Just what it says, and this is by far the most important classification of our food instructions to strictly comply with. ***If you do not avoid the foods in this column virtually completely during at least the first Phase of this dietary program, then you run the risk of negating much of the progress being achieved.*** Taking one step forward only to take one step backward will help no one and will drastically reduce your patience and potential with this Protocol.

It is important to realize and appreciate that unlike many highly-specific and potentially-lifetime dietary protocols that are recommended in support of many Spectrum Disorders, our Spectrum Balance® Protocol is designed to produce certain primary changes and bring greater equilibrium in the body, and once positive response is experienced the diet will transition to being less stringent. As reinforced above, it is of the utmost importance that you maintain strict compliance in the beginning, however we generally see your initial and long term maintenance plan being broken into three “Phases” that will progress according to your own body’s response and rate of improvement. ***Don’t be frustrated by any temporary ups and downs in your progress!!***

Phase 1: *Typically* the first 4-8 weeks on the program are the most important to the pace of your progress, and during this time we ask that you eat foods predominately from the “Best” columns with all others from the “Moderation” columns. If you do not have a healthcare practitioner helping you monitor your program, then you will want to strictly stay in Phase 1 as long as you are seeing building progress

Phase 2: *Typically* the remainder of at least your first 3-6 months on the program. Although we ask that you always consider the Best Choices that we recommend for the vast majority of your dietary needs, it will become less imperative that you completely avoid all foods in our “Don’t Eat” category. Again, you alone set and control the pace of your progress, but a little “cheating” here and there in Phase 2 should not be of any major consequence. ***Always base these transitions on changes in behavior***

Phase 3: Once you have been able to see how your body is reacting to the dietary changes over the first 3-6 months, most people are able to start eating with more balance within all three categories, but you should always remember what your body has told you about what’s best for you and continue to eat in a more healthy pattern in order to preserve your highest level of wellness. Continue to avoid grains and legumes and minimize consumption of dairy on an ongoing basis (***see Phase 3 Diet attached***)

So please do your best to be patient and compliant with the process and know that if a “favorite food” just happens to appear in our “Don’t Eat at All for Now” category, you may only be asked to live without it temporarily with the exception of a few types of foods that just might never work positively with your body *no matter how much you may like their tastes*. There are plenty of great foods available out there so try your best not to focus on the minority you should avoid in order to stay healthier! Always be mindful of the date at the top of this document due to the fact that we make changes and updates as often as practical. Our clients are always welcome to check back with us and we’ll be happy to furnish anyone with an updated version if available.

Note to our vegetarian friends: Please be aware that those who have chosen a vegetarian or vegan lifestyle for yourselves and/or your children will have a special challenge with this program as you review our restrictions on most of the grains, soy & legumes and nuts that serve as staples for most non-meat and non-dairy eaters. Because the absorption of meat-source iron (*heme iron*) tends to accelerate progress with this Protocol at a far greater pace compared to plant-based iron (*non-heme iron*), vegetarians will be at a disadvantage. *Just a fact.*

FIRST: YOUR “COMPLETELY AVOID” LIST

Processed Foods – Eat *whole foods* whenever possible and avoid or at very least minimize eating processed and pre-packaged foods. If all you have to do is pour it out of a bag or box, add liquid and stir, you can be pretty sure it’s full of chemicals. This is not just a SBP Diet rule, but a general rule of thumb for good health.

Artificial Sweeteners – Completely avoid *ALL* of them. The pink, the blue, the yellow, and become an effective food label reader to keep you and your kids from ingesting these substances in processed foods. Be aware that many times there are also artificial sweeteners hiding in chewing gums, toothpastes, drink mixes, etc.

Processed Sugars – Avoid all processed sweeteners and especially high-fructose corn syrup (HFCS), which is commonly found in processed foods. Stay with sparing use of natural sweeteners and herbals such as Stevia.

Grains & Legumes – Do your best to avoid all possible. Watch your processed food labels closely because wheat and soy ingredients are hiding everywhere. No soy milks for anyone and no soy formulas for infants.

Cow’s Milk – We make cautionary allowances for limited use of some dairy foods unless you have known contraindicating issues. Yes, unprocessed dairy can be superior to processed, but please avoid drinking all milks for the time being and see how the changes benefit your health and the way that you feel.

Multi-vitamin Supplements – It’s best to avoid all of them for now. Many of these contain vitamins and minerals that may be able to build up in cumulative concentrations within the body that may actually *contribute* to the problems. Often when people start adding up the numbers, they find that they’re actually consuming nutrients at hundreds of percent of requirements and recommended intakes. Place higher reliance on getting more of your nutritional needs from your foods as compared to supplements. Saves money too!

SPECTRUM BALANCE® PROTOCOL DIET

Revision: 150205

Food Categories & Relative Ratings

Food Items are Listed Alphabetically within their Categories

FRUITS – *Be reasonable about servings of fruits due to sugar considerations*

Best Choices	Eat Only in Moderation	Don't Eat at All for Now!
Acerola Apricots Cantaloupe Melon Cherries – Black Clementines, Cuties Currants – Black Gooseberries Grapefruit – Pink, red, white Guava Honeydew Melon Kiwi Lemons Limes Mango Papaya (non-GMO) Passion Fruit Plums Tangerines Watermelon	Apples & Applesauce Avocado Casaba Melon Cherries – Red & white Cranberries – Raw, dried, sauce Currants - Zante Dates Figs Nectarines Oranges Peaches Pears Pomegranate Prunes	Bananas Blackberries Blueberries Boysenberries Coconut - Raw or dried Elderberries Grapes Pineapple Raisins Raspberries Strawberries

JUICES & OTHER DRINKS - *Be mindful of the sugar content of fruit juices!*

Best Choices	Drink Only in Moderation	Don't Drink at All for Now!
Pure water – <i>Maintain hydration with adequate water intake!</i> Apricot Black Cherry Carrot Cranberry Grapefruit Guava Mango Papaya (non-GMO) Tangerine	Almond Milks - Original, vanilla or chocolate Coffee Orange Pear Sparkling water – Can be flavored with Stevia Tomato (non-GMO) Vegetable Juice	Apple Coconut Milk and Coconut Water Grape Pineapple Pomegranate Prune Rice Milk Soft Drinks – Regular or diet Soy Milk Teas – None for now

GREENS

Best Choices	Eat Only in Moderation	Don't Eat at All for Now!
Chinese Cabbage (Bok Choy) Collard Greens Dandelion Kale Lettuce – Butter, Red, Romaine Mustard Greens Swiss Chard Turnip Greens Watercress	Arugula Beet Greens Cabbage – All common types Fennel - Bulb, greens Onions/Scallions Radicchio Sauerkraut Spinach	Chrysanthemum Greens Endive Lettuce - Iceberg

VEGETABLES

Best Choices	Eat Only in Moderation	<i>Don't Eat at All for Now!</i>
Asparagus Broccoli Brussels Sprouts Carrots Cauliflower Celery Jerusalem Artichoke Peppers – Banana Peppers – Bell (red, orange, yellow) Peppers – Hot Chili Peppers – Pasilla Pumpkin Squash – Butternut Squash – Zucchini Sweet Potatoes (<i>not the same as True "Yams"</i>)	Artichokes Cabbage – All common types Cucumbers Eggplant Jicama Leeks Olives Onions/Scallions Parsnips Pickles Peppers – Ancho Peppers – Bell (green) Peppers – Green Chili Peppers – Jalapeno Peppers – Serrano Radish Rhubarb Spinach Squash – Acorn Squash – Crookneck (non-GMO) Squash – Spaghetti Squash – Summer varieties Tomatillos Tomatoes – All (non-GMO) Tomato Sauce & Paste Turnips Water Chestnuts	Beets Cassava Corn – White & yellow Green Beans Mushrooms Okra Peas - Green Potatoes – All (white, gold, French fried, hashed, etc.) Rutabagas Seaweed Yams (<i>True "Yams" are not the same as Sweet Potatoes, but are not common in the U.S.</i>)

BEANS/ LEGUMES - *Avoid all you can right now for best progress*

Best Choices	Eat Only in Moderation	<i>Don't Eat at All for Now!</i>
<p><i>None are Best Choices for now!</i></p>	<p><i>None are good choices for now!</i></p>	Adzuki Black Beans Fava Beans (Broadbeans) Garbanzo Beans (Chickpeas) Green Beans Kidney Beans Lentils Lima Beans Miso Mung Beans Navy Beans Peanuts (<i>yes, "legumes" not nuts</i>) Peas – Green Pinto Beans Refried Beans Soy Beans & Soy Products Tofu White Beans

***Note regarding the Herbs & Spices below:** We have simplified the following section by only separating herbs and spices into “Allowed” and “Don’t Eat at All for Now” classifications. The Allowed choices can all be regularly used as long as an item does not constitute a main part of a meal, and all others should be avoided completely at least until Phase 3. Organic, garden grown, freeze dried and minimally processed versions of herb and spices are always preferred. *As always, if you do not see a particular food item listed, then assume that we have not yet found sufficient information to rank it with confidence and please just avoid it for now!*

HERBS & SPICES - *Fresh or freeze-dried are superior to powered or with added salt*

Allowed	More Allowed	Don’t Eat at All for Now!
Basil Bay Leaf Capers Chili Powder Chives Coriander (Cilantro) Dill Weed Garlic – Fresh, freeze dried Ginger – Fresh, freeze dried Marjoram Mint - Spearmint, Peppermint Oregano Paprika Parsley Pepper – Red or Cayenne Rosemary Sage	Salt – Celtic, Sea Salts, other natural forms only Tarragon Thyme	Allspice Cardamom Celery Seed Cinnamon Cloves Cumin Curry Powder Fennel Seed Garlic – Powered or salted Ginger – Powdered Lemon Grass Mustard Seed Nutmeg Pepper – Black or white Poppy Seed Saffron Salt – All processed “table” versions

MEATS & POULTRY – *Buy only nitrate-free processed meats (like sausages)*

Best Choices	More Best Choices	Don’t Eat at All for Now!
Beef – Grass-fed, organic is much preferred Beef Liver Bison – Grass-fed, organic Chicken - Meat with skin is best Chicken Liver Cornish Game Hen Deer Duck	Elk Goat Lamb Pheasant Pork, Ham, Bacon (nitrite-free) Quail Rabbit Turkey – Meat, ground, turkey sausage, turkey bacon	Hot Dogs/ Franks – Beef & Pork

FISH & SHELLFISH - *Wild caught is always preferred over farm raised & GMO*

Best Choices	Eat Only in Moderation	Don’t Eat at All for Now!
Catfish Eel Halibut Lobster Mackerel Mahi Mahi Octopus Salmon – Atlantic, Chinook, Coho, Sockeye (non-GMO) Sardines Squid Shrimp Tuna – Fresh preferred over canned (avoid soy broth) Whitefish	Anchovy Cod – Atlantic or Pacific Crab – Mixed species Grouper Monkfish Orange Roughy Oysters Pollock Scallops Sea Bass Snapper Tilapia Trout Yellow Tail	Clams Shark Swordfish

NUTS & SEEDS - Avoid all for the time being for best progress

Best Choices	Eat Only in Moderation	Don't Eat at All for Now!
<i>None are Best Choices for now!</i>	<i>None are good choices for now!</i>	Almonds Almond Butter Black Walnuts Cashews Cashew Butter Chestnuts Chia Flaxseed Hazelnuts Macadamia Peanuts Peanut Butter Pecans Pine Nuts (Pinion) Pumpkin Seeds (kernels or whole) Sesame Kernels (dried) Sesame Seeds Soybeans (roasted or other) Sunflower Seeds (kernels or whole) Walnuts

***Regarding use of the Dairy items below:** Because of general health considerations more than because of Spectrum Balance® considerations, we caution against making dairy foods a significant portion of *anyone's* diet. However we are not of the belief that small inclusions of dairy in the diet of lactose tolerant individuals will result in the negative impact that we see from the consumption of larger quantities. All dairy items should only be eaten in moderation using the following simple guideline: **Eat no more than 1 oz. in total dairy over an entire day, and ideally not every day.** The reason that more cheeses are allowed where milks are not, is that it is far easier and realistic to measure and eat a single ounce of cheese in a meal than it is to drink only an ounce or so of milk.

DAIRY & EGGS

Best Choices	Eat Only in Moderation*	Don't Eat at All for Now!
Butter – Grass fed, organic is much preferred Eggs – Free-range raised are much preferred	Cheese – American Cheese – Blue Cheese – Cheddar Cheese – Cottage Cheese – Feta Cheese – Mozzarella Cheese – Mexican Anejo Cheese – Monterrey Cheese – Muenster Cheese – Provolone Cheese – Ricotta Cheese – Romano Cheese – Swiss Cream Cheese Goat Cheese Sour Cream Yogurt – Goat Milk	Cheese – Parmesan Cow Milk Cow Milk – Chocolate, flavored Egg Substitutes Goat Milk Yogurt – Cow Milk Yogurt – Coconut Milk Yogurt – Soy

GRAINS, FLOURS & NOODLES - *Avoid all you can right now for best progress*

Best Choices	Eat Only in Moderation *	<i>Don't Eat at All for Now!</i>
<i>None are Best Choices for now!</i>	<p>* Although these choices are preferred to other options, we strongly suggest that you concentrate on recipes that transition your tastes and lifestyle away from reliance on baked goods and grain foods.</p> <p>Arrowroot Carob Flour Sweet Potato Flour Tapioca – Pearled & Flour</p>	<p>Almond Flour Amaranth Barley Buckwheat Bulgur Coconut Flour Corn Flour – White & Yellow Corn Meal – White & Yellow Couscous Kamut Macaroni Millet Noodles – Egg & Spinach Noodles – Rice, Soba, Somen Oats, Oat Flour & Oat Bran Polenta Quinoa Rice – Brown, White Rice Flour & Bran – Brown Rice Flour & Bran – White Rye Flour Soy Flour Spaghetti Spelt Wheat Flour & Bran – All Wild Rice</p>

BREADS - *Avoid all you can right now for best progress*

Best Choices	Eat Only in Moderation	<i>Don't Eat at All for Now!</i>
<i>None are Best Choices!</i>	<i>None are good choices!</i>	<p>Bagels Biscuits Cornbread English Muffin – White & wheat French Bread Oat/ Oat Bran Bread Pita – White & wheat Pumpernickel Rice Bran Rye Bread Spelt Bread Tortillas – Corn & flour Wheat Bread – Whole, bran, germ</p>

BREAKFAST CEREALS - *Applies to both generic & brand name products*

Best Choices	Eat Only in Moderation	<i>Don't Eat at All for Now!</i>
<i>None are Best Choices!</i>	<p><i>None are good choices!</i></p> <p><i>Avoid <u>all</u> cereals for best results</i></p>	<p>All processed & sugared cereals Corn flakes - Unsweetened Corn grits – White or Yellow Cream of rice Cream of wheat Millet – Puffed, cooked Oatmeal or oat bran cereals Rice – Puffed, unsweetened Wheat cereals - All</p>

OILS, CONDIMENTS & COOKING

Due to the fact that we suggest heavily restricting the use of grains and flours, “baked goods” won’t be a significant part of your diet. If you’re baking with only the limited approved food items, baker’s yeast can be used in very small amounts as long as you’re not currently dealing with Candida or other yeast excess health issues.

Best Choices/ Allowed	Use Only in Moderation	Don't Eat at All for Now!
Butter Coconut Oil Cod Liver Oil Flaxseed Oil (<i>but do not use for cooking</i>) Olive Oil Pepper – Red or Cayenne Salt – Celtic , Sea Salts Vinegar – Balsamic is best <i>*Although the above oils are the most-preferred to use, still be sensible about use and portions</i>	Almond Oil Avocado Oil Bacon Grease Baker's Yeast Baking Powder Baking Soda Cream of Tartar Horseradish Ketchup – Low sugar Lard - Pasteurized Mayonnaise – Natural Mustard Pickle Relish Sesame Oil Vinegar – Cider or Red Wine Worcestershire Sauce	Butter Substitutes - All Canola Oil Margarine – Regular Margarine – Soy Palm Oil Peanut Oil Pepper – Black or White Rice Bran Oil Safflower Oil Salt – Table Shortening – Lard or Vegetable Soy Sauce – All (Tamari) Soybean Oils Sunflower Oil Vegetable Oil – Canola or Corn

SWEETENERS & FLAVORING – *Decrease your reliance on all sweeteners!*

Best Choices	Use Only in Moderation	Don't Eat at All for Now!
Stevia - Herbal sweetener, also available in many flavors	Brown Sugar Carob – Unsweetened Honey Vanilla Extract	Agave (use Honey instead) Any and all artificial sweeteners Maple syrup Molasses White processed sugar - All forms

SNACKS & TREATS

Best Choices	Eat Only in Moderation	Don't Eat at All for Now!
Celery or carrot sticks Fresh fruit or veggie chunks from <i>Best Choices</i> list Freeze-dried or dehydrated fruits from <i>Best Choices</i> list Jerky, Pemmican (nitrate-free) Sweet Potato Chips - Natural	Fresh fruit or veggie chunks from <i>Moderation</i> list Freeze-dried or dehydrated fruits from <i>Moderation</i> list Mozzarella cheese sticks Popcorn (air-popped or with <i>Best Choices</i> oils) - Limit servings to no more than 1 cup (popped) Tapioca pudding (no artificial sweeteners)	Cookies Corn Chips Crackers – Too many types to categorize accurately Graham Crackers Nuts Pork Rinds Potato Chips Pretzels Raisins Rice Cakes Sugar Candies Tortilla Chips

THE SPECTRUM BALANCE® PROTOCOL
PHASE 3: Lifestyle Dietary Recommendations
Revision: 150205

Once you or your medical/therapy support personnel believe that you have attained and stabilized your goals using the primary Spectrum Balance® dietary modifications, we now want to give you our best recommendations for maintaining and building upon your achievements. Congratulations on teaching yourself valuable lessons that you'll be able to use to help keep you and your family feeling their best over a lifetime. Proper nutrition is the foundation of sustained health and wellness, so please don't fall back into the poor eating patterns that rob your body and brain of their unlimited potential. **Phase 3 represents a "lifestyle" eating and nutritional pattern; not a temporary "diet"!**

We'd really love to be able to tell you that you can now just go back to eating the same as you did previously, but over time we're seeing so much better prolonged and sustained success and general wellness with the ongoing practice of continuing to minimize or even avoid altogether just a minority of the multitude of food choices available to us. As everyone has different levels of sensitivity to the anti-nutrients and mineral imbalances that we address with the SBP Diet, pay special attention to how you feel as you begin making any changes in your program and watch closely for what your body tells you about any foods you resume eating that start negatively affecting the way you feel.

The good news is that you now have the knowledge to recognize problems early on and to use the foods you're eating to keep control over them. **Remember that you can always temporarily return to the more strict requirements of the SBP Phase 1 Diet anytime that you wish.**

So here are some guidelines to help keep you on track toward feeling better and better.

The Most Important Factors:

Remember that because processed and packaged foods will always be more likely to contain unwanted and even undisclosed ingredients we have concern for, we will still recommend that you continue to make whole foods and home prepared meals the greatest portion of your diet. Avoid over-cooking and especially avoid microwaving your foods in order to preserve their best nutrient values. As always, you'll certainly need to take into account any foods that you or your children have known allergies or other sensitivities to when planning your meals using the following lists.

You will find that the **large majority** of our food choices for your Phase 3 plan are now divided into only **two** important categories:

"Best Choices" – These are the foods that you will want to utilize in planning your meals whenever and wherever possible. Any positive results that you have achieved and will continue to achieve from these dietary changes will be a direct function of how well you stay with these recommendations. You'll find now that fewer of your favorite foods will continue to be restricted.

"Continue to Minimize or Avoid" – We consider these to be the foods that promote the imbalances in your body that you've worked so hard to stabilize, so please continue to minimize or even avoid eating them altogether for best continued results. Where appropriate, we've made specific comments within the columns to warn you of the *worst of the worst* choices.

***Reminder to our vegetarian friends:** Please be aware that those of you who have chosen a vegetarian or vegan lifestyle for yourselves and/or your children are still advised to keep your consumption of legumes (especially soy), grains (especially wheat) and nuts as a much smaller portion of your total diet in comparison to your intake of fresh fruits and vegetables. Yes, the sprouting, fermenting and soaking of these seed-based foods will reduce some of the anti-nutrient content and their potential to promote mineral imbalances and deficiencies, but to unknown, un-measurable and inconsistent degrees, so please take care.

PHASE 3: Lifestyle Dietary Recommendations

THIS IS YOUR BASIC “CONTINUE TO AVOID” LIST

If we are able to impress upon you anything toward your journey to greater health from this point forward, it would be to continue to avoid all of the following. It's very common when people take a first look at our Spectrum Balance® Protocol Diet, that their first words are, “*Oh no, many of my (or my child's) favorite foods are on your avoid lists!*” Of course there's a very good reason for this. Our eating patterns that have been formed and driven by cravings produced by both natural and artificial chemical compounds present in many of our foods are greatly contributing to the weakening of our bodies and to the disruption of the wellness of society in general. ***So please continue to avoid...***

- ✓ **Processed Foods** – Continue to eat whole foods whenever possible and to minimize your consumption of processed and prepackaged foods. If all you have to do is pour it out of a bag or box, add water and stir, you can be pretty sure it's full of fillers and chemicals. Faster and cheaper – you bet, but poor choices for optimal wellness for sure. This is not just a “SBP rule”, but a general rule of thumb for good health.
- ✓ **Artificial Sweeteners** – Continue to avoid *ALL* of them - the pink, the blue, the yellow and continue being an effective food label reader in order to keep you and your children from ingesting these substances in processed foods and drinks. Also be aware that many times there are also artificial sweeteners hiding in chewing gums, toothpastes, drink mixes, etc.
- ✓ **Processed Sugars** – Stay away from white table sugars, high-fructose corn syrup (HFCS) and as many other processed sweeteners as you are able. And again, a major point of control over this factor is to minimize your consumption of processed, packaged, ready-to-eat foods.
- ✓ **Soy & Other Legumes** – Do your best to continue to avoid all legumes in your regular diet. Watch those processed food labels closely because soy ingredients are hiding everywhere and even show up in canned fish and other meats. Avoid soy milks for anyone and soy formulas for infants. Soy tends to be very high in both manganese and phytic acid content, and statistics show that in excess of 90% of the soy available in the U.S. results from genetically modified (GMO) crops, which just adds another reason to locate and rely on superior sources of protein and fiber.
- ✓ **Wheat & Other Grain Foods** – The more we understand wheat and other grains through our own work and the work of others, the more our concerns build regarding the large amounts of phytochemicals and anti-nutrients we are regularly ingesting due to our strong addictions to these foods. *Gluten*-containing grains only represent one part of the complex problem. So very many people are reporting back to us that they just *feel so much better* when they continue to eliminate grains from their diets. *Again...* watch those packaged foods, because wheat ingredients are quite prevalent and you'll be amazed when you really start reading labels.
- ✓ **GMO & Modified Oil Products** – Try to avoid all foods of known ***genetically modified*** origin and those that contain unnatural ***trans-fats*** labeled as “shortening” and “hydrogenated”, or “partially hydrogenated vegetable oil”. Do your own research on these menaces to health.
- ✓ **Multi-vitamin Supplements** – It's best to continue to avoid these unless you have received specific recommendations from someone trained in nutrition, and they will most likely also prefer that you supplement with specific and isolated nutrients at any rate. Many broad spectrum products contain a number of minerals and various other compounds that have the potential to build in cumulative concentrations within the body and can produce or contribute to the problem. Often when people put all their supplements together and start adding up the numbers, they find that they're actually consuming hundreds of percent of recommended daily values. Particularly avoid any supplements that include ***manganese***. We get *plenty* of it from our fresh fruits and vegetables.

SPECTRUM BALANCE® PROTOCOL
Phase 3: Lifestyle Dietary Recommendations
Revision: 150205

Food Categories & Relative Ratings

FRUITS – *Be reasonable about servings of fruits due to sugar considerations*

Best Choices	More Best Choices!	Continue to Minimize or Avoid
Acerola Apricots Apples & Applesauce Avocado Bananas Blackberries Boysenberries Cantaloupe Melon Casaba Melon Cherries – Black, red & white Clementines, Cuties Coconut Cranberries – Raw, dried, sauce Currants – Black, Zante Dates Elderberries Figs Grapefruit – Pink, red & white Grapes	Guava Honeydew Melon Kiwi Lemons Limes Mango Nectarines Oranges Papaya (non-GMO) Passion Fruit Peaches Pears Plums Pomegranate Prunes Raisins Raspberries Strawberries Tangerines Watermelon	Limit your consumption of: Blueberries Pineapple

JUICES & OTHER DRINKS – *Be mindful of the sugar content of fruit juices!*

Best Choices	More Best Choices!	Continue to Minimize or Avoid
Pure water – <i>Maintain hydration with adequate water intake!</i> Almond Milks - Original, vanilla or chocolate Apricot Black Cherry Carrot Coconut Water (not “Milk”) Cranberry Grapefruit Guava Mango Orange	Papaya (non-GMO) Pear Pomegranate Prune Sparkling water flavored with plain or flavored Stevia Tangerine Teas – Herbals Tomato (non-GMO)	Limit your consumption of: Apple Juice Coconut Milk Coffee Grape Pineapple Soft Drinks – Health store quality Teas – Black & Green Vegetable Juice Continue to avoid completely: Rice Milk Soft Drinks – Artificial sweeteners Soy Milk

GREENS

Best Choices	More Best Choices!	Continue to Minimize or Avoid
Arugula Beet Greens Cabbage – All common types Chinese Cabbage (Bok Choy) Collard Greens Dandelion Fennel (bulb, greens) Kale Lettuce – Butter, Red, Romaine	Mustard Greens Onions/Scallions Radicchio Sauerkraut Spinach Swiss Chard Turnip Greens Watercress	Chrysanthemum Greens Endive Lettuce – Iceberg (zero nutrition)

VEGETABLES

Best Choices	More Best Choices!	Continue to Minimize or Avoid
Artichokes Asparagus Beets Broccoli Brussels Sprouts Cabbage – Common types Carrots Cauliflower Celery Cucumbers Eggplant Jerusalem Artichoke Jicama Leeks Mushrooms Okra Olives Onions/Scallions Parsnips Peppers – Ancho Peppers – Banana Peppers – Bell (Red, orange, yellow) Peppers – Green Chili	Peppers – Hot Chili Peppers – Jalapeno Peppers – Pasilla Peppers – Serrano Pickles Pumpkin Radish Rhubarb Rutabagas Spinach Squash – Acorn Squash – Butternut Squash – Crookneck (non-GMO) Squash – Spaghetti Squash – Summer varieties Squash – Zucchini Sweet Potatoes (<i>not the same as “True Yams”</i>) Tomatillos Tomatoes – All (non-GMO) Tomato Sauce & Paste Turnips Water Chestnuts	Cassava Corn – White & yellow Peas – Green Peppers – Bell (Green) Potatoes – All (white, gold, French fried, hashed, etc.) Seaweed Yams (<i>“True Yams” are not the same as Sweet Potatoes, but are not commonly found in the U.S.</i>)

BEANS/ LEGUMES

Best Choices		Continue to Minimize or Avoid
<p><i>None are best choices!</i></p> <p><i>Avoid all possible for your best long-term results</i></p>		Black Beans Fava Beans (Broadbeans) Green Beans Kidney Beans Lentils Lima Beans Mung Beans Navy Beans Peanuts (<i>yes, “legumes” not nuts</i>) Peas – Green Pinto Beans Refried Beans White Beans <p>Continue to avoid completely:</p> Adzuki Beans Garbanzo Beans (Chickpeas) Miso Soy Beans & all Soy Products Tofu

HERBS & SPICES - *Fresh or freeze-dried are superior to powered or with added salt*

Best Choices	More Best Choices!	Continue to Minimize or Avoid
Allspice Basil Bay Leaf Capers Celery Seed Chili Powder Chives Coriander (Cilantro) Cumin Curry Powder Dill Weed Fennel Seed Garlic – Fresh, bulb Ginger – Fresh Lemon Grass Marjoram	Mint - Spearmint, Peppermint Mustard Seed Nutmeg Oregano Paprika Parsley Pepper – Black or white Pepper – Red or Cayenne Poppy Seed Rosemary Sage Salt – Celtic, Sea, natural forms Savory Tarragon Thyme	Limit your consumption of: Cardamom Cinnamon Cloves Garlic – Powdered or salted Ginger – Powdered Saffron Salt – Processed “table” versions Turmeric

MEATS & POULTRY - *Locate nitrate-free processed meats, such as sausages*

Best Choices	More Best Choices!	Continue to Minimize or Avoid
Beef – Grass-fed, organic is much preferred Beef Liver Bison – Grass-fed, organic Chicken - Meat with skin is best Chicken Liver Cornish Game Hen Deer	Duck Elk Goat Lamb Pheasant Pork, Ham, Bacon (nitrite-free) Quail Rabbit Turkey – Meat, sausage, bacon	Hot Dogs – Beef & Pork

FISH & SHELLFISH – *Wild caught is always preferred to farm raised*

Best Choices	More Best Choices!	Continue to Minimize or Avoid
Anchovy Catfish Clams Cod – Atlantic or Pacific Crab – Mixed species Eel Grouper Halibut Lobster Mackerel Mahi Mahi Monkfish Octopus Orange Roughy Oysters Pollock	Salmon – Atlantic, Chinook, Coho Sockeye (non-GMO) Sardines Scallops Sea Bass Shrimp Snapper Squid Tilapia Trout Tuna – Fresh preferred over canned (avoid soy broth) Yellow Tail Whitefish	Shark Swordfish

***Regarding use of Dairy items below:** Because of general health considerations more than because of Spectrum Balance® considerations, we caution against making dairy foods a significant portion of **anyone's** diet. However we are not of the belief that small inclusions of dairy in the diet of lactose tolerant individuals will result in the negative impact that we see from the consumption of larger quantities. All dairy items should only be eaten in moderation using the following simple guideline: **Eat no more than 1 oz. in total dairy over an entire day, and ideally not every day.** The reason that more cheeses are allowed where milks are not, is that it is far easier and realistic to measure and eat a single ounce of cheese in a meal than it is to drink only an ounce or so of milk.

DAIRY & EGGS

Best Choices	Eat Only in Moderation	Continue to Minimize or Avoid			
Butter – Grass fed, organic is much preferred Eggs – Free-range raised are much preferred	Cheese – American Cheese – Blue Cheese – Cheddar Cheese – Cottage Cheese – Feta Cheese – Mexican Anejo Cheese – Monterrey Cheese – Mozzarella Cheese – Muenster Cheese – Parmesan Cheese – Provolone Cheese – Ricotta Cheese – Romano Cheese – Swiss Cream Cheese Goat Milk & Cheese - Raw Sour Cream Yogurt – Cow Milk Yogurt – Goat Milk	<p>Limit your consumption of:</p> Cow Milk – Raw			<p>Continue to avoid completely:</p> Egg Substitutes Cow Milks - Processed Goat Milks - Processed Yogurt – Soy
		<p>Continue to avoid completely:</p> Egg Substitutes Cow Milks - Processed Goat Milks - Processed Yogurt – Soy			

OILS, CONDIMENTS & COOKING

Best Choices/ Allowed	More Best Choices/ Allowed	Continue to Minimize or Avoid			
Avocado Oil Bacon Grease Baker's Yeast Baking Powder Baking Soda Butter Coconut Oil Cod Liver Oil Cream of Tartar Flaxseed Oil (<i>but do not cook for cooking</i>) Horseradish Ketchup – Low sugar Lard - Pasteurized Mayonnaise – Natural Mustard Olive Oil Pepper – Black, white, red or Cayenne Pickle Relish Salt – Celtic, Sea Salts Sesame Oil	Vinegar – Balsamic Vinegar – Cider or Red Wine Worcestershire Sauce	<p>Limit your consumption of:</p> Soy Sauces – Any			<p>Continue to avoid:</p> Butter Substitutes - All Canola Oil Margarine – Regular Margarine – Soy Palm Oil Peanut Oil Rice Bran Oil Safflower Oil Salt – Common table varieties Shortening Soybean Oil Sunflower Oil Vegetable Oil – Canola or Corn
		<p>Continue to avoid:</p> Butter Substitutes - All Canola Oil Margarine – Regular Margarine – Soy Palm Oil Peanut Oil Rice Bran Oil Safflower Oil Salt – Common table varieties Shortening Soybean Oil Sunflower Oil Vegetable Oil – Canola or Corn			

SWEETENERS & FLAVORING - Decrease your reliance on all sweeteners!

Best Choices		Continue to Minimize or Avoid
Brown Sugar Carob - Unsweetened Honey Stevia - Herbal sweetener also available in many flavors Vanilla Extract		Agave (use Honey instead) All artificial sweeteners Maple Syrup Molasses White processed sugar - All forms

A special note about these last five food categories:

As these last food groups are filled with many of the food items that we believe are responsible for creating or at very least contributing to the very syndromes that we work to eliminate, we want you to continue to be very cautious about adding significant portions of these foods back into your diet and to watch closely for the signs of any return or worsening of the unwanted symptoms. As we are all very different individuals, we each need to listen to what our own body is telling us about foods that may make us feel worse after being off them for a while. So with that caution in mind, you can try adding back some of these foods in moderate portions and frequency and watch for any regression.

BREAKFAST CEREALS - Applies to both generic & brand name products

Best Choices	Eat Only in Moderation	Continue to Avoid
<i>None are Best Choices!</i>	<i>None are good choices!</i>	All sugared cereals Buckwheat – Kasha Corn flakes Corn grits – White or yellow Cream of rice Cream of wheat Millet – Puffed, cooked Oatmeal or oat bran cereals Rice – Puffed Wheat cereals – All

NUTS & SEEDS – Nuts are fine as snacks and toppings, but eat only in moderation

Best Choices		Continue to Minimize or Avoid
Almonds Almond Butter Cashews Cashew Butter Chestnuts Chia Flaxseed Pistachio Pumpkin Seeds Sesame Seeds		Macadamia Pecans Pine Nuts (Pinion) Sunflower Seeds (kernels or whole) Walnuts Continue to avoid: Hazelnuts/ Filberts Peanuts Peanut Butter Soybeans - Roasted or other

GRAINS, FLOURS & NOODLES

Best Choices	Eat Only in Moderation	Continue to Avoid
	<p><i>* Although these choices are preferred to other options, we suggest you to continue to concentrate on recipes that transition your tastes and lifestyle away from reliance on baked goods and grain foods.</i></p> <p>Almond Flour Arrowroot Flour Carob Flour Coconut Flour Sweet Potato Flour Tapioca – Pearled & Flour</p>	<p>Amaranth Barley Flour Buckwheat Flour Bulgur Corn Flour – White & yellow Corn Meal – White & yellow Couscous Kamut Macaroni Noodles – Egg, Mung, Rice, Soba, Somen, Spinach, Wheat Oats, Oat Flour & Bran Polenta Quinoa Rice – Brown, White Rice Flour & Bran – Brown, White Rye Flour Soy Flour Spaghetti – Wheat, Spinach Spelt Flour Wheat Flour & Bran Wild Rice</p>

BREADS

Best Choices		Continue to Avoid
<p><i>None are Best Choices!</i></p>		<p>Bagels Biscuits – Plain, Buttermilk Cornbread English Muffin – Wheat or White French Bread Oat/Oat Bran Bread Pita Pumpernickel Rice Bran Bread Rye Bread Spelt Bread Tortillas – Corn & Flour Wheat – Whole, Bran, Germ</p>

SNACKS & TREATS

Best Choices	Best Choices (in Moderation)	Continue to Avoid
<p>Celery or carrot sticks Fresh or dehydrated fruit & veggie chunks Jerky, Pemmican (nitrate-free) Nuts from <i>Best Choices</i> list (low-salt & no sugar added) Raisins Sweet potato chips – Natural Tapioca pudding (natural)</p>	<p>Cheese sticks Popcorn (air-popped or with <i>Best Choices</i> oils) - Limit servings to no more than 1 cup (popped)</p>	<p>Candies – Sugared or artificial sweeteners Cookies Corn or Tortilla Chips Crackers (made from grains you should continue to avoid) Graham Crackers Potato Chips Pretzels Rice Cakes</p>

THE FINAL WORD & A REQUEST FOR YOUR HELP

The current medical establishment knows nothing beyond demanding “empirical evidence”, being the results of years of highly-expensive research and double-blind testing, in order to accept this type of theory and dietary Protocol. They keep asking me “Why *specifically*, does this work?”, and “Where do all of these theorized imbalances come from?”, and “By what *exact* biological processes does your Protocol work” and all sorts of other questions that, quite frankly, are neither my primary concerns nor issues that we have all the *exact* answers to at this point in time, as we freely and openly admit. After all; I’m a Naturopath, and no one is exactly burying me in millions of dollars to help me expand this research and my base of case studies.

Unlike them, we’re interested in more than *empirical evidence*, as our sole intent is simply to do our best to create positive results for these kids and adults without a downside. I honestly have no way of knowing at this time how many or what percentage of children and adults who exhibit symptoms both within and outside the Autism Spectrum are even appropriate candidates for this Protocol. But let me just say that wherever I’ve been able to find my identified commonalities in clinical observation and assessment, the results have been amazingly impressive in the vast majority of cases. ***Our results over the last ten years are simply far too good to continue to be ignored.***

As I have absolutely nothing to “patent” here, I made the decision late in 2009 to disseminate the results of my years of work directly to the public at no cost. I do hold the Copyrights to these writings, however I even grant you the right to make copies of these documents for use by friends, family, neighbors or your doctor - ***just as long as you don’t do so for financial profit.*** Please don’t just copy and give out the “diet” portion alone, as it is not sufficiently informative or compelling without the background of the work.

If you diligently use this Protocol at home or with the assistance of a healthcare provider and start achieving any level of noticeable success, we simply ask and hope that you will do several things in return:

1. First and foremost, tell others! Circulate our information and your personal story of hope to everyone you know in the ADD and Autism communities and post entries on the blogs of research and support groups
2. If you have not done so already, we encourage everyone to please join our email update list at www.noharmfoundation.org so that we will be able to keep you informed as to new developments
3. Please email us at results@noharmfoundation.org with any feedback regarding your experiences (positive or not) with the dietary Protocol so that we will be able to exponentially build and advance this research. We love to hear all your personal stories and hope to soon also have a blog appearing on our website to serve as an open forum for people to share their experiences with others internationally
4. Lend your support by making a charitable donation of any affordable size with your check by mail to **No Harm Foundation at 150 Rock Point Drive, Suite C, Durango, CO 81301**, or with your credit card through the website www.noharmfoundation.org so that this work will continue and gain higher exposure and use. Either method will generate you a donation receipt for tax purposes

Although it is very important to us that families everywhere are able to access this valuable information and experiment with this program at no direct cost, we want you to consider this to be our “***pay it forward***” contribution to the wellness of society. The No Harm Foundation is a not-for-profit organization with the missions of advancing the field of natural medicine, preserving health freedom and choice for the public, and broad dissemination of this information about new hope for Autism and other disorders to the general public and medical communities.

The amount of your donation is not important, but simply consider in retrospect what the information was worth to you and to the wellness of your child or other family member and please just do what

you can to help us with our continuing efforts to get the word out to countless others and to advance education and effective research on the subject. As resources become available, a portion of this No Harm charitable fund will also be utilized to subsidize and supply the expenses of families with less-than-fortunate circumstances in getting the help they need from our Center and from other healthcare practitioners who choose to join us.

We fully understand any frustration you might feel around the void of localized help available to you at this time, but please know that we have been aggressively trying to attract help and support for this project from the medical communities, a number of Autism organizations and media outlets for several years now, and we have accepted the realization that only by this information directly reaching the attention of the general public will sufficient attention be stimulated and directed towards a form of real progress for the millions of families worldwide that are dealing with these destructive conditions.

Just as soon as possible we will be making available additional written and video training materials that will be able to more extensively explain the science behind my work and provide families more comprehensive instruction on trying to get the best results possible with this dietary Protocol from home until broader professional help is organized. These helpful training materials will be available to you for only modest donations to the No Harm Foundation. Please understand that this is the absolute best we are able to do until such time as enough health practitioners can be trained and join our network so that we can refer one-on-one professional support in your own geographical areas.

You can greatly help this cause in the meantime by sending this message on to any affected families you might know, to therapists and physicians, to any contacts in the media and to anyone else who cares that these syndromes are now needlessly affecting a tragically growing number of our kids. With your help, we'll be able to stimulate enough public and professional awareness so that we can accelerate into a new paradigm of research, prevention and effective care.

A large part of our intention in releasing and sharing our findings to date, is to be joined by as many other open-minded practitioners as possible in order to expand this exploration and with it, the number of affected children and families that could be benefiting from this program **right now**. There's only so much that we can continue to do by ourselves. We need a great number of forward-thinking practitioners, organizations and media outlets who are unwilling to accept the hopeless confines of this prison, and who are willing to listen and join me outside this "box" that has been labeled "Autism".

I also need **you** – the Moms and Dads out there with affected children to open your minds and hearts and give this a try. This program is safe, and it could be as effective for you as it has been for so many of my clients. There is no down-side, nothing to lose, and so very much to gain. Your child trusts you with their health and well-being. Please always do your best to be worthy of that trust.

Be well,

Shauna