

# GD Relief – Helps Digest Proteins

## About GD Relief

- GD Relief is a comprehensive digestive enzyme complex designed to help break down proteins, fats, and carbohydrates. It uses enzymes derived from pineapple and papaya, as well as bacterial and fungal enzymes.
- GD Relief provides bacterial and fungal proteases (enzymes that break down proteins) that help target hard-to-digest proteins, such as those found in wheat and milk. *Aspergillus oryzae*, for example, is rich in dipeptidyl peptidase IV (DPP-IV), a type of enzyme that helps digest peptides found in both gliadin and casein, proteins from wheat and milk.<sup>1-4</sup>
- Protease from *Aspergillus oryzae* has also been linked to an increased abundance of *Bifidobacterium* and *Lactobacillus* in experimental models, considered to be beneficial types of bacteria.<sup>5,6</sup>
- GD Relief contains the proteolytic enzyme serratiopeptidase from *Serratia marcescens*. Not only does this enzyme help with protein digestion, but it also has many anti-inflammatory effects and has been used to reduce inflammation associated with ear, nose, and throat disorders.<sup>7-10</sup>
- Also included is the enzyme lipase, which helps digest fats. Lipase from *Candida rugosa* has been shown in experimental models to both help with the breakdown of fats and favourably influence gut bacteria. For example, it is associated with an increase in indicators of a healthier gut environment.<sup>11</sup>
- The inability to digest milk sugar (lactose) is quite common. GD Relief provides lactase to help reduce indigestion and bloating that occurs with lactose intolerance.<sup>12</sup>
- GD Relief contains several enzymes to help break down the many different types of carbohydrates and starches found in plants. This includes alpha-galactosidase from *Aspergillus niger*, which digests sugars from soybeans and other legumes humans cannot otherwise digest.<sup>13</sup>

## How to Use GD Relief

- Take 1–2 capsules per day with meals or as directed by a health care practitioner. Consult a health care practitioner for use beyond 4 weeks.

PATIENT NAME: \_\_\_\_\_

**PRACTITIONER NOTES:**

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## Cautions and Contraindications

- Consult a health care practitioner if symptoms persist or worsen. Consult a health care practitioner prior to use if you have diabetes, kidney or liver disorder, a gastrointestinal lesion or ulcer, are taking an anticoagulant/blood thinner, an anti-inflammatory, or antibiotics, are having surgery, are pregnant, breastfeeding, or have an allergy to latex or fruits (e.g., avocado, banana, chestnut, passion fruit, fig, melon, mango, kiwi, pineapple, peach, and tomato). Stop use if rash, difficulty breathing, hypersensitivity/allergy, nausea, vomiting, diarrhea, gastrointestinal disturbance, or abdominal pain/epigastric pain occurs. Keep out of reach of children.

## Drug Interactions

- Serratiopeptidase has fibrinolytic activity. When taken with antiplatelet or anticoagulant drugs, it theoretically may increase the risk of bruising and/or bleeding.

## Quick Tips for Optimal Health

- Complete gluten avoidance is currently the only known treatment for celiac disease, as avoiding all gluten allows for the healing of the digestive tract. However, this is difficult to maintain as many processed foods are contaminated with gluten. An estimated one-third of people with celiac disease are exposed to gluten despite their best attempts to avoid it.<sup>14</sup>
- While extremely low amounts of gluten may not lead to a relapse for people with celiac disease, there appears to be a definite dose-dependent effect.<sup>15</sup>
- Non-celiac wheat/gluten sensitivity has been estimated to be 5–7 times more common than celiac disease. While it is not associated with the same degree of intestinal damage, ingestion of wheat or gluten may still cause abdominal pain, diarrhea, constipation, bloating, headaches, and more.

PRACTITIONER CONTACT INFORMATION:

- There appears to be a genetic overlap between celiac disease and non-celiac wheat/gluten sensitivity.<sup>16,17</sup>
- Lactose malabsorption, the inability to completely digest the sugar found in dairy milk, has been estimated to have a worldwide prevalence of 68%.<sup>18</sup> Lactose malabsorption can be responsible for many digestive complaints, including bloating, abdominal pain, and flatulence, but here too, there is a dose-dependent effect. Many people have a small amount of lactase activity and only have symptoms when their lactose intake exceeds that activity.<sup>19</sup>
- Less well-recognized are a number of specific types of carbohydrate intolerances, such as fructose or sorbitol intolerance, which may also contribute to gastrointestinal symptoms and mimic related conditions, such as irritable bowel syndrome.<sup>20</sup>
- One diet that has shown effectiveness in reducing symptoms related to carbohydrate intolerance, as well as irritable bowel syndrome, is the low-FODMAP diet. This diet restricts foods with high amounts of several types of carbohydrates (including fructose and lactose). It generally requires the help of a health care practitioner to implement.<sup>21</sup>

## References

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