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

(“speech”, “noise”, “loud”, “voice”, “delay” and “vocal” keywords)

[1310] Failsafe eating improves writing, listening and hearing (February 2015)

I was almost in tears of joy today. We have had speech difficulties with my Miss 4 - did not speak till 3 and would always shut down in attempted speech therapy. Today in our first session back for the year (and in a break from challenges) she spoke directly to the therapist and said every word as asked. Ok, so they were wrongly pronounced, but the fact that she SPOKE in a session was INCREDIBLE. Yeah for progress! And yeah to all you brilliant mums (took me way too long to come around! Just could never believe it would make such a difference) - Jane

[1281] Chromosomal deletion, a severe speech delay, global developmental delay helped by diet (November 2014)

Almost three weeks into our salicylate free diet and seeing some nice changes. I should add we have also changed to A2 milk and less wholegrain wheat in breads and cereals. My boy seems calmer, less oppositional and able to reason with. But we've also noticed a change in his fine motor skills...his hand writing has changed and he has done up the buttons on his shirt for the first time ever. His language also seems better, with lots of new words and a subtle change in the way he speaks.

Our boy has a chromosomal deletion, a severe speech delay, global developmental delay and sensory processing disorder so we've been dealing with a lot his whole almost 7 years! I kind of wish I had looked into his diet earlier but we are here now.

3 months later: We still doing low sals and things seem a bit calmer. Still some challenging behaviour but hes got a lot going on poor boy! Interestingly his craving for fruit has gone, I'm limiting to golden delicious apples, pears and bananas...max two pieces a day now - Sandra

[1273] What has failsafe meant for you and your family? (August 2014)

At my absolute worst, with a diagnosis of fibromyalgia, chronic fatigue and IBS, with speech issues, constant headaches, psoriasis, untold medications and a very real chance of having to use a wheelchair, I can easily say FS saved my life. I'm now fit and active, run a business, teach belly dancing and thoroughly enjoy life – Sue

Was unable to sleep, itchy, always tired and cranky, loss of motor skills and at times loss of speech and thought. Failsafe has given me my life back thank you – Rona

Our family was falling apart over our very bright 7 y.o. son's loud, argumentative, nonsensical melodramatic behaviour. Failsafe eating returned him to the calm, loving, intelligent child we thought we'd lost. From struggling with Year 2 Maths he is now a self-sufficient straight A student with an academic scholarship for Yrs 11 & 12, plans to study Law, his driver's licence - and a girlfriend! - Belinda

[1235] How long does it take for diet to kick in? (facebook thread, October 2013)

Mine were the same for the first 4-5 days & then withdrawal symptoms kicked in, especially the sleep issues... We're on day 12, so hoping it is going to get better again soon. Good luck! P.S. speech concerns are getting continuously better! – Di

[1234] One-liners (October 2013)

Sue's book has been really helpful with our 2.5 year old boy. He was developing a stutter and drawn out speech impediment, but since we have changed his diet, it seems to have rectified the situation. It is alarming to learn that this was caused by foods - Ryan by email

[1231] Aspergers thread from facebook group (October 2013)

Not Aspergers/FS as such but I worked with a little boy (5) who has autism and when on a FS diet he was back to all normal development until he had something not on the diet...and then he would literally be in the corner of the room banging his head on a wall and no speech at all – Tallara

Yes my daughter is off completely artificial chemical free, a few natural chemicals she has reacted to I have eliminated. Nearly completely dairy free and now I'm going gluten free. She has recently been diagnosed with Asperger's and although this is not a cure it has made amazing changes in her behaviour for the most part. Gluten apparently affects their speech and such and most cannot tolerate dairy - Haylee

[1215] One-liners (July 2013)

The incredibly positive feedback I am getting from parents is what keeps me handing out your brochures – speech pathologist

[1211] To do the diet or not, a facebook thread (July 2013)

I don't do failsafe but cut out additives ie preservatives, colours and flavours, as a way of managing my daughter asthma. When I did it I noticed a great change in my son’s behaviour, he's in kindergarten this year and doing really well, with the occasional down days (usually my fault for slipping with food). So good luck, I noticed results far quicker for my daughter’s asthma, but it did work for sons behaviour, tied in with me trying to be more calm and consistent with managing behaviour. He doesn't have ADD or anything, was just really loud and impulsive, I couldn't manage his behaviour all the time which was frustrating and he's even noticed he feels better. Good luck, well worth a try - Kate

[1198] Speech pathologist reports on diet (June 2013)

Two stories that readily come to mind about food and speech are:

First, a new client, 4 year old boy. When I was assessing his language comprehension, which involved him looking at 4 pictures on a page, and pointing to the picture I was speaking about, this young boy merely pointed to all 4 pictures on each page, counting "1, 2, 3, 4". I honestly thought he had huge cognitive issues.

His mother rang me the following day, asking for help, reporting that he had wandered off the previous night, and been picked up by the police on the highway. At our next appt., this amazing mother had made huge changes to this boy's diet!!! And when I asked her why she was being so proactive, she reported that she was a science teacher...and it all made sense!!!

Well, within 6 months, this young boy's standardized assessment subtest scores went from 1 and 2 to 11-13...(normal limits for standardized scores being 7-13. And I am not that good a Speechie!!!)

Second, another new 4 year old client's mother handed me the Paediatrician's report, which mentioned that he had severe eczema. He was also very active!! I immediately handed her your network brochure and latest Food Additives to Avoid card.

Again...this incredibly proactive mother set about making huge changes to her son's diet. Several weeks later, as he sat and attended well during our Speech Path session, his mother reported that, as I could see, he was now sitting and listening, and was also doing as he was asked at home.

She then went on to tell me that last winter, her son had been seeing a dermatologist in Melbourne, who had instructed her to not only put a particular cream onto the rashes on his arms and legs, but to then wrap his arms and legs in wet bandages.

She reported that when she refused to use wet bandages because it was winter, she was told she was non-compliant. This young boy's mother smiled with such delight, as she told me that since making your suggested changes to his diet, his eczema had completely gone.

I have to hold back tears when I hear such wonderful success stories...especially after explaining to the parents that I have no training in this area, but am just passing on your information to empower them to make a difference – Jane, Victoria

[1177] Asthma under control due to low salicylate diet (February 2013)

My son is 3 years old and we have his asthma under control due to the low salicylate diet he has been on since 18 months.

He still has a problem if he eats to many salicylates, an example is a few nights ago I let him have a very small amount of a pasta dish which had tomatoes and dried herbs, that was at around 6.30pm at around 4.00am the next morning he came into my bed and his breathing was terrible - fast and through his mouth, I had to give him his ventolin and it took him over an hour to go back to sleep in my bed he would not go back to his own. I had to take him to the GP on that same day at around 3.00pm to have his tonsils checked as the speech therapist thought they were large (the GP said they are a little bit but not enough to be causing him any problems), the GP also listened to his chest and said it was very good. I should have known better and will not do it again in a hurry. I am convinced the diet works and it has really helped William.

His dietician put him on gluten free as after about 3 months or so of the as he was not putting on weight has he should be. I thought you might like to hear that the A2 milk is helping William's speech, it has improved a lot. Also his appetite is much better and he is no longer constipated as has been since we started failsafe eating. – Louise, by email

[1174] Withdrawal symptoms occur in the first 2 weeks of the diet – 12 reports from failsafers (February 2013)

* At this stage we think that too many amines make our son nasty and too many salicylates make him hyper. Since we took him off the cows milk as well and got over the withdrawals he no longer needs speech therapy, has a great appetite and is putting on weight, is able to enjoy play dates, is calm, doesn't complain of tummy ache etc and our life is much easier. - from story [716]

[1166] 282: Defiant, hyperactive, impossible to reason with, plain silly, very loud, noisy, annoying to others, demanding, pushy and tantrums (December 2012)

My daughter, who is now 7 years old and who began the failsafe approach at age 3, reacts in the following ways whenever she has 282 in bread. She becomes defiant, hyperactive, impossible to reason with, plain silly, very loud, noisy, annoying to others, demanding, pushy, and if something doesn't go her way...watch out...fully blown tantrum including slamming doors, storming out the house, screaming, yelling, crying that goes on for a long time. Can't and won't follow simple instructions, becomes distracted easily, goes off track and off task, becomes destructive She also finds settling at night really difficult ... can't seem to switch off. The next day she realizes that it was the 282 that made her feel that way ... and she genuinely can't refrain from behaving in this way. We are pleased though that as she grows her reactions seem to be becoming slightly less severe. I think this has to do with more careful diet, increased body weight, and increased maturity on her part.

Prior to going failsafe, life was unbearable. She had night terrors every night for 4 years etc, etc, etc. We made many trips to specialists and psychologists and others, with no explanation as to why we had a totally uncontrollable child. We chose to try Failsafe before we filled the prescription for Ritalin that we had been given, and thankfully it worked!

Thanks to your book, Fed Up, we have seen incredible results and are now on track. - Debbie, Victoria

[1138] Brief reports on "loud voice" (September 2012)

Thoughts on "loud voice" - took away breads with 282 preservative and huge difference in volume and improvement in speech for my son. Also we avoid 160b, colours and additives generally....he has no idea he is talking loudly. – Jennifer from facebook group

My encopresis/megacolon/chronic constipation/overactive bladder 5 1/2 year old always talks super loud too, more and more great reasons to celebrate that we are finally trying a supervised elimination diet!! – Michelle from facebook group

Oh yes, when my son has had the "bad additives", LOUD voice is definitely one of this symptoms. Along with whiny higher pitched voice. That is a sure indicator to us that he has ingested something he should not have. – Sally from facebook group

I have a hearing impaired son, had hearing aids for several years. He has the loud voice thing. Thought it was all part of his disability, until failsafe! He now speaks normally, and the first sign of a reaction is the voice! He also is on soy, the only thing that I can't change, as he seems not to tolerate any other milk substitute... tried every one, and gets awful diarrhoea and leaking .. not fun when you are 8 and at school! I think the loud voice is very related, and I DO have a hearing impaired child ... also i am frustrated as all my soy kids have been long term bedwetters! and the non soy kids not so... we are currently RPAH elimination diet, and the compulsive speech also disappeared in this child, he hardly talks and is calm and listens better, and the youngest who is 2 has had a really odd reaction to removing all the additives...we were able to understand him finally!- (he was previously diagnosed with a speech delay) yet when he accidently had a flavoured drink from a guest... his speech reverted to gibberish again. It happened after a banana, given by a babysitter, and again when an additive was shared by a relative! three times in three weeks, we 'lost' his speech for about 5 hours.... ! (and got all the other behaviours).. so there is definitely issues with the speech centre of the brain, not just hearing issues why they speak louder... at least in my family! – Ries from facebook group

Sals and amines do it for us, as well as the additives. When we are very strict with only a few foods his voice is normal. – Susan from facebook group

My son has always had a very noticeably loud voice which has annoyed many of his teachers and i have had his hearing tested and had him tested for auditory processing all of which he has passed. Its not until we went failsafe that we noticed his voice is now always normal, the big improvement came from removing all artificial colours, preservatives and flavours but now if he has too many sals he gets quite loud again and then we know to cut him back, his concentration and energy levels seem to go hand in hand with it too.- Lee from facebook group

That is our son to a tee. If we stay low everything his voice is pretty normal. If we let a bit of mod sals creep in the voice is one of the first things we notice. If he has more then we notice the reaction and silly behavior as well as testy/ over emotional. Also energy and concentration.- Susan from facebook group

[1073] Some feedback from the Fedup Roadshow 2011 (September 2011)

‘My daughter reacted to annatto in fish fingers with head banging, rocking and making whoop whoop silly noises - this lasted for about three days, every time she tried to concentrate, the headbanging, rocking and noises would start up again' said the mother of a 6 year old

[1063] Another soy intolerance story: “Wow, wow, wow – a different boy” (July 2011)

My son is eight and daughter six years old respectively. We have been failsafe for approximately 7 years of that time. I thought I had it pretty much down what they could and couldn't have.

Last week however I stopped buying soy milk as my son was using so much of it, it wasn't funny. I have always tried to steer them to rice milk, which my daughter loves! thank goodness. The soy milk was for others in the home but our son loves it and stopped having the rice milk when soy was around.

I cut this out last week. I seem to have a different boy. We have always just thought that removing what we did know was causing problems was as good as it got. That he would always be a LOUD ACTIVE HYPER BOY. It was much worse if he ate things he shouldn't. He reacts quite badly to amines, salicylates, colours are atrocious for him etc.

Can it really be the soy? Can it really be this simple? My son is now receptive, loving, easy to talk to, to explain things to, has stopped whinging, being aggressive, doing annoying things to his sister and to us. Even stopped all the repetitive things as well.

As I write this he is sitting watching some tv, his room is clean, he is dressed for school, his jobs are done ie take the dog for a walk, feed the chickens etc. He is not 'in my face', he is not running around annoying his sister (she doesn't know what to do with this as she is so used to it, she is even trying to get his attention to be how he always is with her).

Wow, wow, wow. If it is not the soy milk then I am at a loss as to what it could have been. I now have a son that is sooooo easy to love and cuddle AND it has been a quiet house too, not just from him, but I don't feel the urge to yell to get my point across for the 15th time. The lesson here is - never give up trying to find what may be happening with your child. It probably is not normal, and you may be missing something. - Cathryn (see more about soy intolerance in [702], [605] and [314])

[1020] Effects of dairy foods (May 2011)

There is no doubt at all in my mind about the great effect that foods have on my children although it has taken me about 3 years to accept it. But I still cannot get my head around why dairy foods cause such a behavioural response with my daughter. When eating dairy foods, she gets dark rings around her eyes, and is not just bad, she is impossible to live with. I just can not understand how a food can affect her in this way. Her oppositional defiance is incredible. It is also as if she is completely deaf. Her voice becomes so loud it makes me cringe and it also becomes a lot higher in pitch. She is not affectionate at all and is very serious as well. It is as if she has complete focus, driven, locked in, intense, not able to snap out of her bad behaviour. It is only now (she is 5 1⁄2 years of age) that I am starting to bond with my daughter in a calm and loving way, before this it has been a desperate, lost love.

Since she has been dairy-free she listens, talks more quietly and without intensity, she lets me cuddle her, she does not get locked into bad behaviour and we can negotiate together. She has always been strong willed and very smart but now I can enjoy it. I am so happy now. I guess if there was a logical explanation for this huge behavioural response I would stop questioning my judgement so much. Because it is just behavioural, you can tell our peer group think it is our parenting and they also question the failsafe food idea as a bit odd. I guess what I am trying to ask is how can food affect the voice, make you deaf, fearless, and completely oppositional? - reader, Qld

[1004] Challenges: 3 week reaction to amines (March 2011)

My son’s reaction to amine foods is always the same: depression, crying for nothing, being angry, seeking conflicts, ODD like behaviour and many attacks of night terrors (like 5 times in a 2-week-period). He had very strong reactions to pork meat and to chocolate, and the effects to those foods lasted for almost 3 weeks even after stopping the challenge. His reaction to salicylates is the usual hyperactive, silly behaviour, talking too much/too loud and having more little accidents.- by email, Europe

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

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

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

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

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

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

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

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

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

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

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

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

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

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

[958] 282: Mumbles and nosebleeds (October 2010)

About 4 weeks ago i removed 282 from my sons diet and he improved greatly, he would only speak in a mumble, he suffered from many nose bleeds in the week, was very negative about everything, not affectionate, didn't interact at preschool, would not co-operate at speech therapy. The change has been great he is talking so much more, he has not had a nose bleed since stopping 282, he is loving to everyone, he was great at speech did everything he was asked and sat still, interacts with others and notices things around him so much more - Reader by email.

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

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

[951] Artificial colour challenge with Black & Gold ice cream cone (October 2010)

I did a colour challenge today with a Black & Gold Icecream cone (102, 110, 133, 155) on my 4 yr old son and within 20 minutes he was jumping around, making silly noises, laughing in a very silly fashion and unable to concentrate on a board game we usually play that he would normally focus on very well. My husband was there this time to witness it (I did it on purpose because the hubs is "cheating" a little with my son a bit too often now when it comes to "other foods"). I saw the look on my husband's face when the realisation hit. I got my point across without nagging. I even asked my son why he thought he was behaving the way he was because he does not usually act like that. I saw my son "try" to calm himself down and to his credit he was able to tone the behaviour down a little but it took over an hour and a half before he was able to settle back to what I would call normal behaviour. There was no anger or stern sounding instructions from me for his behaviour as I knew we had induced it. He was very clingy again too. He just wants a cuddle and tells me he loves me and once he is reassured he is off again bouncing around. Absolutely astonishing stuff. I only wish there had been more family and friends around to see it! – by email, WA

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

When I started to really read food labels, I was horrified by the fact that I was poisoning our whole family - especially with 635 and annatto. You asked me how we are affected by these additives.

635 - Myself (main symptom is migraines): dried, red lips. It looks like I have lipstick on. I feel dehydrated and get migraine style headaches. Photosensitivity in my sight. Lethargy. Unfulfilled feeling of thirst. Frequent urination that seems very diluted. Mmy 4 yo son (main symptom is defiance): dried, red lips also. Dehydration and thirst. Frequent urination. Sooky or whingy type of demeanor. My 2 yo daughter (main symptom is urticaria): After having a piece of bacon the size of a 10 cent piece, it sent her into

massive hives. It seemed like she had a headache or faceache and she screamed at a high pitch and then cried for about 20 mins. I nearly called an ambulance. Very out of character for her and she barely cries for more than a minute normally. Our 635 foods were French Onion Soup Powder – I would use in casseroles, potato bake, soups - Smiths brand Crisps, sausages from the butcher, tinned soup such as Spring Lamb with Vegetables, and takeaway BBQ Chicken and chips.

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

[903] 160b: Attraction to the colour yellow (June 2010)

My 6 and a half year old daughter has been diagnosed with PDD-NOS. Since about 6 months of age, we have given her those kids yoghurts that you buy in 6 packs with the kids themes like Nemo and Bob the builder. We thought that because she wouldn't drink milk we needed to give her a dairy substitute, and that they would suffice.

While being a generally placid child since birth, she displayed difficulty concentrating on tasks, a great attraction to the colour yellow, meltdowns at times such as leaving a friend's house or upon being denied a request, sneaky poos, bedwetting, and poor fine motor skills. She was assessed as having a severe speech delay when 3 and a half. Her drawing was at best scribbling in a general area, and she had great problems following dotted outlines of alphabet letters. She displayed very poor short term memory, and repetitive behaviours. She was also wanting food all the time, although she is not overweight. She only drinks water, has never eaten confectionery, has ice cream on the odd occasion, but otherwise generally eats rice bubbles, weetbix, watermelon, grapes, apples, pears, occasionally custard, and plain biscuits. Dinner is usually either rice, pasta or mashed potato with steamed veggies and fish, chicken or beef with no added sauces.

Recently we were made aware of your book and in particular, the adverse effects of the 160b colouring additive. Upon reading up about it in the book, we also looked at the fed up website where we noticed the link to PDD-NOS. After reading some of the testimonials and realising that many of the other parent's experiences were sounding familiar, we decided to eliminate 160b from her diet.

We initially stopped the kids' yoghurts, which she had been having up to 5 a day, on 22 February 2009. Within about 4 or 5 days her drawing had improved remarkably, she could follow dotted lines correctly, her concentration to tasks jumped, not one meltdown occurred, her sneaky poos stopped, bedwetting reduced, and her speech started to improve noticeably. After noticing these improvements, we then looked at the rest of her diet and switched to Brumbys bread, eliminated anything else that we thought had 160b such as custard, switched to A2 or Jersey mik, and stopped using fabric conditioner. We have noticed over the last month that she seems to have matured noticeably, is more compliant, and is more focussed on cognitive tasks. Her teachers and tutors have all noticed a dramatic improvement in her learning ability. She no longer seeks food constantly, has lost her attraction to the colour yellow, has mostly stopped her repetitive behaviour, and her short term memory is markedly better. In fairness, we also started a reward scheme to help stop the sneaky poos at about the same time. However, she is a bit unique in that except for the 160b element, she was virtually following a failsafe style diet already. So we have been quite surprised that it seems that removing 160b has had a dramatic effect for her. -Sharon, Qld

[893] Middle ear hearing loss and food intolerance (February 2010)

I'm wondering about the link between food intolerance and middle ear hearing loss in children. Our children have been on the diet for about 6 weeks (Friendly Food with modifications under allergist's advice), and there have been many positive improvements in their health. We were already largely artificial additives free.

My five year old had tested with mild hearing loss (middle ear) in both ears prior to starting the diet. We went to the ENT for the first time after 4 weeks on the diet, he cleaned her ears and re-tested her, and she showed up as having perfect hearing. There had been no other health issue at her previous two tests (eg. no cold or infection).

The ENT said all the improvement was due to the removal of wax. The audiometrist had previously said the wax was not a problem.

I'm willing to admit the cleaning of her ears had something to do with it, but the improvement in her behaviour and speech prior to this happening tells me there could be a diet effect as well. Whatever, we are thrilled that our little girl can hear properly now, although she did say that sounds are "too loud" now.

We are now fully convinced that the diet is the best way for us to eat, and our children love the changes to their health. But it does tend to become a major part of life!! Thanks for your great work and the site. – Melody, by email

[862] 129: Bedwetting and behaviour problems due to Ibilex (Keflex) with artificial colour Allura Red and flavour (November 2009)

Just writing to tell you about my son's reaction to an antibiotic called Ibilex (keflex) suspension, for a recent chest infection.

On the elimination diet we have discovered a new child. Finally able to sit still in class and concentrate, no shouting out or disruptive behaviour and dry at night!

While he was on the antibiotic, the teacher informed me that our son's behaviour had deteriorated. He was oppositional, loud, unable to sit still and disruptive. At home the bedwetting started again and his behaviour had also deteriorated but I had not made the connection, I put it down to him being unwell.

As I was giving him his dose one morning I was staring at the pink mixture and it finally dawned. I rang the GP immediately and sure enough it contained Allura Red. It took about a week to get him dry again and his behaviour to settle. – Helen, by email (Allura red is artifical colour 129; also contains bubblegum flavour. A compounding pharmacist can provide medication without nasties, see our Medication factsheet - S)

[850] Reaction to McDonalds soft serve (no cone) (August 2009)

We avoid McDonalds soft serve since our 5 yo son had a reaction in the evening after eating a soft serve with cone in the afternoon. It had been the only thing he had eaten that day that we could think had caused it. After reading Failsafe Newsletter #60, we tried the Maccas soft serve again without the cone (in a plastic cup - upside down sundae lid). The reaction was less severe but still there. He was affected about 4 hours after eating the ice-cream both times (with and without the cone). This, for him, is typical for colours. Our normally quiet son bounces, jumps, shouts, makes silly loud noises, blows raspberries, uses nonsense words, and generally just can't sit still. The acute reaction generally lasts about an hour. The icecream without cone caused a shorter period of the acute reaction, with less volume and intensity. Probably lasted about 35 minutes and was more bearable but still consistent with the typical reaction he gets from colours. Peters Original and other failsafe varieties (eg Sara Lee and the organic ones) have never caused the same reaction. – Susan, Qld

(Can you help: we would like to hear from any failsafer who has observed a reaction to McDonalds soft serve (no cone) – same day or next day? suedengate@ozemail.com.au)

[722]: “By god she is a ratty child!” (February 2009) [COURAGE AWARD]

My step-sister is 3 years old, and by god she is a ratty child! Her language skills are very under-developed for someone her age, and she very rarely does what she is told. She is extremely loud and boisterous, cannot sit still or quietly, is very destructive, swears, yells, screams, and cannot play nicely with other children as she is very rough. A clean room can quite easily become a disaster zone within minutes. We have given up cleaning her room, as she pulls clothes and toys out as soon as we have finished. She is also up to 10-11 o’clock at night.

She often dances and sings and often makes references to people's private parts as well as other embarrassing things, and we have cause to believe that these actions are done for attention (even though it is the wrong kind of attention).

I have cause to believe that food additives have a strong part to play in this due to her lax diet. She is spoilt and gets what she wants, from chips, lollies, chocolates, ice creams, and soft drinks. She has quite a lot of milos everyday, I once counted 4 in one morning! If she is not drinking milo, she is having soft drink, cordial or juice. She very rarely eats any un-processed foods or drinks any water.

Our dinner times are healthy, generally consisting of vegetables, a salad and some source of meat, or sometimes spaghetti bolognaise. She refuses to eat any of it, and shortly after dinner demands some kind of snack-type food.

My mother is finding her daughter’s behaviour extremely unbearable, even becoming embarrassed to take her out in public. My mum’s struggle to keep her sanity has increased since recently giving birth, making it extremely difficult to look after the baby and put up with my sister.

I need your advice to convince my parents that my sister’s diet is not ok, and drastic changes are needed.

– by email from a teenager who wins a copy of our DVD Fed Up with Children’s Behaviour. Here’s hoping it will help with the family situation.

[699] Developmental delay and dyspraxia: 'a big change in speech and development' due to diet (November 2008)

My daughter Bronte is 6½ years old and now in her first year at school. Aside from reflux until the age of 12 months, she was an absolutely delightful baby who was happy and content. She slept 12 hours through the night by 10 weeks old, hit all her milestones and was fairly average in our mothers group.

When Bronte was approximately 14 months old this deteriorated and we had a child who was frustrated, defiant, irritable and downright difficult. She was naughty on purpose and was impossible to discipline. She also developed eczema at this time but grew out of it after a couple of years. We felt that we were failing as parents. Our first son was born when Bronte was 17 months and he has been a delight. As our sons have grown up we realised that they were ‘normal’ kids and Bronte wasn’t.

When Bronte was three and her younger brother was speaking so much better than her, we had her hearing tested. She had the worst glue ear the ENT specialist had seen in years. She had grommets put in the next week and we were reassured that her behaviour and speech would return to normal reasonably quickly. We started speech therapy to help her catch up but things didn't improve. She didn't respond to the speech therapy as firstly she didn't have the concentration and secondly she simply seemed unable to attempt what was asked of her.

At three and a half she was assessed and we were told she had a global developmental delay of 19 months. That was almost half her life. At this point toilet training had become a huge issue. She was the first in mothers group to use the toilet but was always dribbling urine in her pants ven after recently going to the toilet. She resisted every trip to the toilet and it became a battle. She used to hide and poo in her undies every day and didn’t seem to care if we were out.

She was also very tactile and was into anything she could get her hands on that she could smear and finger paint in. This included dog poo. Many times she would emerge with her body covered on hers or the dogs poo. I hate to admit to how many times she ate dog poo and survived.

By the time she got to four she was still attending speech therapy and was about to commence early intervention. We were desperate patents and lucky to still be married at times due to the stress. We were ready to try anything. After many hours searching the internet, my next attempt to normalise our daughter was an elimination diet. A very daunting venture. With the support of my mother who stayed with us and a fairly skeptical husband we made it through the first three weeks. My husband then changed his tune quickly as a different child emerged into our lives. She virtually toilet trained overnight. The painting of poo ceased. Her language improved exceptionally. Everyone in her life commented about what a different kid she was. I will never forget bursting into tears at around the three week mark (in the diet) when she said ‘thank you mummy’ one day I was driving her to speech therapy. It was the first time she showed any emotion or acknowledgement of our feelings.

We continued the diet and commenced challenges. Two hours after eating chocolate and banana she went berserk. She stood on the carpet and wet her pants in front of us. She pooed her pants. She was defiant and oppositional again. And biggest of all, we couldn’t understand a word she said. We now know she is intolerant to amines in a huge way.

Bronte has since been diagnosed with dyspraxia, a language and motor disorder. She still requires speech therapy. Her private speech therapist has since done the diet with her child and encourages other parents to look into it also as she saw such a big change in Bronte's speech and development.

We took Bronte to a paediatrician six weeks into the elimination diet to discuss her developmental delay. He bluntly told us that some kids were unlucky enough to be developmentally delayed and we shouldn't expect too much from her. He said we would be lucky if she was able to catch a bus when she grew up. She would be able to do that now. When I told him that were currently on an elimination diet and had seen huge results he said he would never expect a parent to go to that much trouble and would therefore never suggest it. His last words were 'When you are ready to put her on Ritalin come back and see me'. I walked out of there disgusted and feeling very sorry for the parents who are told this when they are searching for help. I have to say that that elimination diet we did with our daughter Bronte, with help from you and our allergist, has absolutely changed my daughter's (and the rest of our family's) life. - Wendy, NSW

[620] Impaired speech and drool due to food intolerance (February 2008)

We are currently doing the elimination diet and challenges with our son. Interestingly enough, I have discovered that every time he has a food reaction I find it very hard to understand his talking and he also seems to drool more. Just thought these were interesting side effects... – by email

[576] Vocal tics related to non-failsafe 'treats' (September 2007)

My husband said he was supportive of our boys' [RPAH elimination] diet though I suspected secretly skeptical. Last weekend he indulged the boys in various 'treats' including non-failsafe lemonades, popcorn, etc. This morning I had the first meltdown in a couple of months from our son who has Asperger's. He was back to headbanging, crying, not wanting to eat, refusing to go to school, hand flapping, vocal tics, etc. It was full on. I talked to him about it (after he'd had a calcium tablet and calmed a little) and he said he would give up all those foods he loves if it meant he was able to be calm again. - by email, Sydney

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

When Chris was born he was a big, boofy boy. For the first six month of his life he was a placid, calm, happy child. At six months, he changed to being very, very active, fidgety and demanding. Looking back at that time, three things changed – he started long daycare, solids and formula. I also remember very clearly that his face changed as big dark circles and creases formed under his eyes. He was labelled 'naughty, disruptive, hyperactive and violent' by daycare when he was only 10 months old. He was walking at that stage and continued to escape from the childproof room, or to snatch toys from non-mobile babies.

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

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

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

We went home with a complex list of foods to avoid. Although his health improved, his behaviour seemed to become worse, as it always has in summer. Just before Christmas, I found the Royal Prince Alfred Hospital's elimination diet for food intolerance. This diet was stricter but far more logical than the one we were using. It worked by identifying the chemicals that people react to, then the foods that contain them. Interestingly, the research showed that most people with food

intolerance react to the salicylates in fruit. I had been loading Chris up with cherries and nectarines in term 4. No wonder his teacher was ready to send him to Alcatraz late last year.

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

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

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

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

[570] PDD-NOS and failsafe (August 2007)

Our daughter Beth is five and a half. At four she was diagnosed with Pervasive Development Disorder - Not Otherwise Specified, a bit of a mouthful but it sounds like Asperger's shadowing. She is not ASD but has a lot of symptoms in common: developmental delay in speech, fine motor and gross motor, attention deficit, poor eye contact, argumentative, very poor social skills, being in her own world.

… THEN we went failsafe and what a blessing it has been!!!! … Ten days after starting failsafe, Beth suddenly began running around with all the other kids talking and interacting with them!! Every week, I hear new things that she is doing at preschool. At home she is constantly surprising us with new things that she says and does. It's great!! It is as if a block has been removed in Beth's brain and suddenly she has the possibility of being a normal little girl. Going failsafe is not easy but I had to give her the chance. Even though it may not fix all of Beth's difficulties, it seems to have removed a lot of them, see the full story in PDD-NOS Factsheet.

[540] Heading towards a diagnosis of autism before - the difference in him is so dramatic the paediatrician was in shock (January 2007)

When I originally wrote to you, my three-year-old son had a severe speech delay, many behavioural problems, refused toilet training, was having upwards of 6 dirty nappies a day and the paediatrician was heading towards a diagnosis of autism.

The first two weeks on the elimination diet were "HELL". My son’s behaviour was so bad I was in tears when the day was over and he was in bed asleep. My husband and I were determined to give this a go and we stayed strong together to get him through the rough patch. Four weeks after starting, his behaviour improved each day, the tantrums decreased dramatically, he became calmer, his attention span increased, he was happy to try sitting on the toilet for me, the autistic traits stopped, he would sit and do activities with me and the most impressive of all in one week he said - "Dad", "Mum" and his own name "Sam". He has never called me mum & it brought tears to my eyes - he has since then said love you mum and tries hard to string words together.

The difference in him is so dramatic the paediatrician was in shock, he is a non-believer of diet having an effect on children, however, after seeing the difference in Sam he was blown away. He said he was pretty sure after the last visit he would end up making a diagnosis of autism for him, now after seeing him six months later he is thinking it is just speech delay and is not so worried about the minor autistic traits. We are focused on sticking to the diet especially with the progress Sam is now making. He does on occasions slip on behaviour - but he is only three. We feel we have our beautiful little man back. – by email, Qld

[399] Excerpt from Reflux medication causes ADHD symptoms and the Parkinsons shake (March 2006)

Having four children who have all been milk and soy intolerant from birth, intolerant to artificial additives and sensitive to levels of salicylates and amines I've seen possibly every symptom food intolerance can produce raise its ugly head at some time or another. …

I've also seen dairy cause speech problems (this happened to Zac when he was on the follow on formula), tantrums, dyslexia (they can't get their tongue around words, mirror write letters and misspell words), very pale skin complexion, behavioural problems, ADHD symptoms, along with the gutty symptoms, reflux, eczema, and postnasal drip and that's just in my children. If you're at your wits end, if your child displays any of these symptoms or has a learning difficulty especially if there's something happening with each of your kids, even if their symptoms are different, food intolerance is worth looking into. It runs in families. Dietary modification may be the answer you're looking for. My children are now medication free. If your GP doesn't want to go there, find a doctor that will. You need to be strong and assertive because you're going to encounter a lot of doctors and specialists who think it's all a crock, but you have to ask yourself why are there so many kids with ADHD, behavioural problems, learning difficulties .... unfortunately a lot of the food you buy from the supermarket has artificial additives, for the sals and amine intolerant remember that a lot of the fruits and veg that years ago were seasonal are now available all year round not to mention what they do to them to ripen them and keep them fresh, and for the dairy intolerant look to your genes for the answers, there are several races that are known can't tolerate dairy. It may just change your life. - Sandra, Heathcote NSW (Sandra now coaches children with dyslexia and learning difficulties and is happy to hear from others) See the full story on the Reader Stories pdf

[391] 282: Speech delay due to the bread preservative (calcium propionate 282) (March 2006) excerpt

My son had been assessed by a speech therapist at the preschool. She diagnosed, as best she could - we couldn't really keep Jack in the room much less anything like on-task - a severe expressive language delay and a moderate receptive language delay. Six weeks, later when off wheat products, he was reassessed by the same speech pathologist, using the part of the test that Jack had not done due to being non-cooperative. This time he seemed to have no significant receptive language delay and was only mildly delayed in his expressive language. She said she had never seen a child change so dramatically within such a short period of time. … It took this family another year to discover that their child's problem was not the wheat in bread, but the preservative calcium propionate.

[357] 282: A typical email about the effects of 282 (December 2004)

I have taken my 3yo son off all commercial bread products (it's become quite a crusade for me!) with marvelous results. He was going to be assessed for autistic disorders in a few weeks, but since taking him off 282 he has changed (he talks now! and his behaviour is so much better) and I know that his paediatrician will be amazed at his progress. At 18 months my son was only just babbling, and was considered to have the language skills of a 9 month old. After 6 months of speech therapy he was starting to mimic animal noises with prompting. By 27 months he had he had just two words - mummy and no. At 30 months I took him off commercial bread and at 34 months, he just started talking one day. At 36 months (last week) he now has the normal vocabulary of a 3 - 3.5 year old, and the understanding of language of a 4 year old. He is still having problems with actual speech, he only uses 2 word phrases most of the time and stutters occasionally, but the change in him in 4 months was amazing. He also has less tantrums, sleeps better and is generally easier to get along with. - by email

[356] One-liners (Nov 2004) excerpt

1) Thank you for coming to our town and pointing us in the right direction - we now have a dairy-free happy child who has not seen a doctor in about month except the paediatrician - it was the best he had ever seen her, even her speech has improved. – NSW
2) Our three and a half year old son is a lovely child with a few difficulties when on failsafe food but

> before diet, he had enough symptoms to class him as autistic: little or no eye contact, spent hours alone fixated with various objects ie string, sand, wouldn't accept hugs or show affection, constant tantrums, his development regressed a lot from about 18 months or 2 years with regard to loss of speech, and for quite a while he said only one word repetitively, as well as severe reflux, diarrhoea, eczema and sleep disturbance. - Qld

[352] 'So much calmer' (Nov 2004)

First of all let me tell you how wonderful it was to find your website and help our 4 1⁄2 year old son (and the rest of us) lead a much more 'normal' life. He's had horrible symptoms of terrible mood swings, off and on stuttering, biting, spitting, banging his head against the wall, excessive bedwetting, an extremely loud voice that he couldn't control, big 'saucer' eyes with clenched teeth while running at me to kick and bite me, would go into hysterics when I would ask him to do the simplest of tasks such as dressing himself, pulling his hair hard enough to yank it out of head (and his 14 month old sister's), screaming every name at me he knew, running behind me from across the room gaining momentum to head butt me as hard as he could in the back and spine and as we give him a much needed nap during the day he can't fall asleep until 11:00 pm or midnight!

I've ordered your book but until it arrives I've been making some really wonderful meals and snacks for my son just from the info on your website… Since introducing the new diet, he's been basically a new, happier little boy and the mood around the house is SO MUCH CALMER. - USA

[325] excerpt Autism - on or off-diet during assessment? (April 2004)

My autistic son has been on the diet strictly now for nearly 2 years. He looks terrific and is very healthy with only a very mild sniffle since going failsafe.

He starts pre-primary school this year. It is the school where he went to kindy last year so they are very aware of his requirements such as: no hairspray, aerosol deodorants, perfume etc and are using enjo gloves in the classroom to avoid any chemical being used during the day. Big relief.

We have a five-month wait for the formal disability services assessment to obtain aids for school. I don't know whether to take him off the diet for the period of the assessment. On the diet, although excellent, autistic signs are still evident, for example: no eye contact, no imaginary play, everything is black or white, no flexibility etc. If we take him off the diet we get a severe reduction in speech, tantrums, aggression, argumentative, rashes, red ears, hypersensitivity to noise, dislike of being touched and the list continues.

I am an avid failsafer and can't now imagine life without failsafe (my son has failed all challenges on a number of occasions and is also intolerant to airborne salicylates) - reader, WA.

[300] Dramatic improvement in speech delay (December 2003)

Our nearly two year old twin girls are awaiting a psychology assessment to determine whether they have autism. They both have a few symptoms especially lack of language - only use the words Mum, Dad, Nan, Bub, no and hello. Their understanding is slow although we feel this is improving. Although both show a few signs they also have signs that keep us hopeful that the girls do not have autism. They have fairly good eye contact and are very affectionate little girls. After researching for hours on the internet, I started the girls on a gluten free and dairy free diet last week. By the end of the day, one of the twins (who would normally use maybe one word a month) had not stopped using her basic words and was making new sounds. Within days they had both improved very noticeably. At first I thought it couldn't work that fast but whilst reading your books I have a different view and realise it might be lack of the bread preservative. - Reader, Tas

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

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

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

[211] No reason for ADD test (October 2002) excerpt

One thing that struck me from one of your books was where you mentioned families travelling to Europe often experience an improvement in their child. Last year (pre diet) we spent 5 weeks in France and Italy travelling in a camping car and couldn't believe the difference in our son. His speech improved considerably, he was much happier and had a lot more energy. At the time we put it down to the fun we were having as a family exploring a new country but now realise it was probably the lack of preservatives in the food. Even pre diet we noticed some of the food you have mentioned - Fanta being a paler colour, ice-creams tasting like they used to and in Italy the pizzas and real home-made chips. The food was much tastier and we noticed that the Europeans eat foods that are in season. . - by email

[178] Ratty behaviour (September 2002)

My son aged 10 is autistic. Our speech pathologist suggested that a big part of the ratty behaviour he often exhibits could be from additives in our everyday food and said what you are saying about our daily bread containing more additives. I have eliminated soft drinks from his daily intake and what a remarkable difference I can see already. - email, Melbourne

[086] "ear working now" (October 2000)

I was at my wits end and about to put my almost 6 year old developmentally delayed son on Ritalin. Fortunately I could not get an appointment until the end of October, so whilst looking up ADHD on the 'net, came across your book, bought it and read it the same day! We started the diet 2 days ago, he said "yes" for the first time in his life today (everything is usually "no"). I haven't seen any tantrums, he has lost his obsession with running water from my kitchen taps (he would spend all day at the sink before, if I let him) and he actually sits down and watches TV and plays with his brothers and sister now. More speech is coming out, his toilet training is going well as he is not urinating so frequently and for the first time in years I can say he's a delightful little boy … As for my other children, I'm half way through the first week of the school holidays, and my household is actually very calm. I'm just so impressed, I can't help telling everyone about the diet. My four year old son, who has had frequent ear infections, grommets, and a severe language delay, actually came up to me this morning and said that his "ear was working now". And we were just on the verge of having to put him through more traumatic surgery plus spend another $1300 to replace his grommets. My other sons were constantly at each other's throats previously, but now act like best buddies! …- reader, email

[043] son improved dramatically despite "known mistakes" (May 2000)

We have only been on the elimination diet for just over 1 week and already my son is very cooperative, less aggressive, trying very hard, more coordinated, happy on waking all the time, listening and responding, throwing fewer tantrums and his speech has improved dramatically. All this with known mistakes! One of his Kindy Gym instructors (who only sees him for 1 hr/week) asked me last week 'what I had done to him'. He was cooperative, obedient and trying to do things he had refused to try previously.- Reader, by email

[1067] 160b: Annatto tantrums due to soy yoghurt (July 2011)

We are currently doing the elimination diet and are about to reintroduce foods. My son is 2 and has been a handful being constantly irritable, huge tantrums that are inconsolable lasting 30 mins or more 4-5 times a day, speech delay, no concentration, runny poos. He has been an angel since starting the elimination diet however took a backwards step at about 2.5 weeks. We discovered we had been giving him soy yoghurt with 160b in it. We took him off it and his symptoms cleared again. It was mostly behavioural issues such as tantrums. His poos weren't noticeably worse. – by email

[958] 282: Mumbles and nosebleeds (October 2010)

About 4 weeks ago i removed 282 from my sons diet and he improved greatly, he would only speak in a mumble, he suffered from many nose bleeds in the week, was very negative about everything, not affectionate, didn't interact at preschool, would not co-operate at speech therapy. The change has been great he is talking so much more, he has not had a nose bleed since stopping 282, he is loving to everyone, he was great at speech did everything he was asked and sat still, interacts with others and notices things around him so much more - Reader by email.

[908] 160b: irritability, defiance, head and body banging (June 2010)

We adopted our son from Russia two years ago (he is now three). He is sensory seeking and delayed in speech. We have only recently uncovered a link between his food and behavior, particularly with Annatto. It makes him hyper, sleepless, defiant, irritable, and a body banger against furniture (not limited to head banging), starting within 1-2 hours and lasting up to 24 hours.

Our son had been seeing an occupational therapist 2x's per month for sensory seeking behaviors. The OT recommended looking into a link between nutrition and behavior. We met with an allergist first. Her tests proved negative for protein allergies. She suggested that we start saving food labels any time we suspected reactions and compare them for common ingredients. The first food we noticed was Pepperidge Farm Cheddar Goldfish Crackers. Our son was very stimulated and not able to nap. I saw Annatto listed and wondered what it was. I did an internet search and found your website and others. The next time I saw a reaction, Annatto was in the peach yogurt I had fed him. On this particular day at naptime, he sat backwards in his rocking chair and banged it continually into the wall.

We started the Feingold program here in the U.S. and, as you probably know, it does not address Annatto so we eliminated Annatto as well. Our son's issues decreased within the first week. He was less hyper, more compliant, and able to sleep better, except for one noticeable withdrawal episode - his first on-the-floor kicking temper tantrum. My favorite result to cite is when I asked him to put books away. He answered "Okay, Mama" and did it right away. This is the sweet little boy who was there all along. I hate the idea that the foods I thought were good for him were causing him to misbehave and causing me frustration. We are happy to be Annatto-free now.

We are finding it hard to identify products with Annatto since it is not always stated by name or number in the ingredients list. We are learning to stay away from products with "natural flavors & colors" even if Feingold approved. There are many products that we have since cut out of his diet after discovering the Annatto link.

Changing our son's food and skin care products was easier than I ever imagined. He hardly notices, except for the times I have to say no to certain foods that do not have good things in them for him. It does take extra effort but it is well worth it. Still, I look forward to the day when the food-behavior link is widely accepted, forcing companies to eliminate these harmful additives from our supermarket shelves.
– by email, USA

[903] 160b: Attraction to the colour yellow (June 2010)

My 6 and a half year old daughter has been diagnosed with PDD-NOS. Since about 6 months of age, we have given her those kids yoghurts that you buy in 6 packs with the kids themes like Nemo and Bob the builder. We thought that because she wouldn't drink milk we needed to give her a dairy substitute, and that they would suffice.

While being a generally placid child since birth, she displayed difficulty concentrating on tasks, a great attraction to the colour yellow, meltdowns at times such as leaving a friend's house or upon being denied a request, sneaky poos, bedwetting, and poor fine motor skills. She was assessed as having a severe speech delay when 3 and a half. Her drawing was at best scribbling in a general area, and she had great problems following dotted outlines of alphabet letters. She displayed very poor short term memory, and repetitive behaviours. She was also wanting food all the time, although she is not overweight. She only drinks water, has never eaten confectionery, has ice cream on the odd occasion, but otherwise generally eats rice bubbles, weetbix, watermelon, grapes, apples, pears, occasionally custard, and plain biscuits. Dinner is usually either rice, pasta or mashed potato with steamed veggies and fish, chicken or beef with no added sauces.

Recently we were made aware of your book and in particular, the adverse effects of the 160b colouring additive. Upon reading up about it in the book, we also looked at the fed up website where we noticed the link to PDD-NOS. After reading some of the testimonials and realising that many of the other parent's experiences were sounding familiar, we decided to eliminate 160b from her diet.

We initially stopped the kids' yoghurts, which she had been having up to 5 a day, on 22 February 2009. Within about 4 or 5 days her drawing had improved remarkably, she could follow dotted lines correctly, her concentration to tasks jumped, not one meltdown occurred, her sneaky poos stopped, bedwetting reduced, and her speech started to improve noticeably. After noticing these improvements, we then looked at the rest of her diet and switched to Brumbys bread, eliminated anything else that we thought had 160b such as custard, switched to A2 or Jersey mik, and stopped using fabric conditioner. We have noticed over the last month that she seems to have matured noticeably, is more compliant, and is more focussed on cognitive tasks. Her teachers and tutors have all noticed a dramatic improvement in her learning ability. She no longer seeks food constantly, has lost her attraction to the colour yellow, has mostly stopped her repetitive behaviour, and her short term memory is markedly better. In fairness, we also started a reward scheme to help stop the sneaky poos at about the same time. However, she is a bit unique in that except for the 160b element, she was virtually following a failsafe style diet already. So we have been quite surprised that it seems that removing 160b has had a dramatic effect for her. -Sharon, Qld

[893] Middle hear hearing loss and food intolerance (February 2010)

I'm wondering about the link between food intolerance and middle ear hearing loss in children. Our children have been on the diet for about 6 weeks (Friendly Food with modifications under allergist's advice), and there have been many positive improvements in their health. We were already largely artificial additives free.

My five year old had tested with mild hearing loss (middle ear) in both ears prior to starting the diet. We went to the ENT for the first time after 4 weeks on the diet, he cleaned her ears and re-tested her, and she showed up as having perfect hearing. There had been no other health issue at her previous two tests (eg. no cold or infection).

The ENT said all the improvement was due to the removal of wax. The audiometrist had previously said the wax was not a problem.

I'm willing to admit the cleaning of her ears had something to do with it, but the improvement in her behaviour and speech prior to this happening tells me there could be a diet effect as well. Whatever, we are thrilled that our little girl can hear properly now, although she did say that sounds are "too loud" now.

We are now fully convinced that the diet is the best way for us to eat, and our children love the changes to their health. But it does tend to become a major part of life!! Thanks for your great work and the site.
– Melody, by email

[880] 160b: Autistic symptoms due to yellow and annatto colorings in the US (November 2009)

We were told by pediatricians and individuals in the child development field that my son was autistic when he was 2 1⁄2 years old. He was extremely sensitive to certain fabrics and clothing against his skin. He could not speak so that we could understand him (he had his own language) and would display fits of anger when we could not understand him. He would close himself into his own little world at times and not want to socialize with our family or other children. He could not jump, he could not run or do simple movements that most children his age had already mastered.

We enrolled him in a special program for children who were developmentally delayed - he was in speech therapy, occupational therapy, and physical therapy 4 days a week.

He progressed well in the program but continued to have additional setbacks. He developed asthma and eczema and the fits continued. He started kindergarten with an IEP (Individual Education Plan) that continued to include the different therapy sessions and also added intervention for him with regard to the regular classroom activities.

I would find cheese wrappers behind our recliner, his favorite food was ANYTHING with cheese. We continued to work with different therapists and the school system up until he was in second grade.

By the grace of God, I was in my chiropractor's office waiting to be seen and I picked up a book in his waiting room that was about ADD, ADHD, ODD and Autism in children. I randomly opened it to a chapter that described my son in every sentence. Until I read that chapter I had never even paid attention to Annatto or Yellow food colorings. It was worth a shot.

It took me almost 6 weeks to clear my son from any artificial yellow food coloring. It was like living with a child drug addict. He craved anything yellow and would cry uncontrollably, throw temper tantrums, and sleep and sleep. A short while after we cleared his diet (I even packed his school lunches) his teacher asked me in for a conference. His reading score had gone from a kindergarten level to a second grade level in almost 9 weeks!!!!!

My son is now 12 years old and will be going into the seventh grade. He no longer has an IEP or any therapeutic intervention. He is an Honor Roll student, plays football and is active in the Boy Scouts. He no longer needs any medication for asthma and his eczema is gone. He knows that he has an addiction/allergy to annatto and yellow food coloring so he also is very aware to read every label and "just say no" when offered something that he can not have.

The yellow food colorings cause him to be hyperactive and then he crashes. The Annatto however, seems to be the additive that causes him to have the addictive symptoms. I read once that the annatto seed was once made into a paste and used as war paint in a particular tribe. Well, after watching my son once he has had the annatto I can see why warriors would be successful in battle under its influence.

In addition to affecting him through his food colors also affect him through medications and hygiene products. We noticed that once when he used shampoo with artificial yellow the skin on his neck broke out every time he showered. Also, chapstick or other products that go on skin make him itch.

This school year my son begged me to let him eat some things that our school cafeteria provides. I reluctantly agreed, after all he is going to have to make his own decisions about what he puts in his body as he gets older and is out without me more. It isn't that he was eating things that contained yellow or annatto but he was eating foods that are processed. He has had the stomach flu twice and has had headaches more frequently, plus his muscles have begun to cramp more and more. Last week we made the decision for me to resume packing his lunch and I think that we both already notice a difference.

There is no doubt in my mind that the rise in autism, ADHD, ADD, etc. is a direct consequence of our trend toward processed "quick" food. I feel so blessed to have read that chapter and found my son. Thank you for making a difference. – Rhonda, USA

[699] Developmental delay and dyspraxia: 'a big change in speech and development' due to diet (November 2008)

My daughter Bronte is 6½ years old and now in her first year at school. Aside from reflux until the age of 12 months, she was an absolutely delightful baby who was happy and content. She slept 12 hours through the night by 10 weeks old, hit all her milestones and was fairly average in our mothers group.

When Bronte was approximately 14 months old this deteriorated and we had a child who was frustrated, defiant, irritable and downright difficult. She was naughty on purpose and was impossible to discipline. She also developed eczema at this time but grew out of it after a couple of years. We felt that we were failing as parents. Our first son was born when Bronte was 17 months and he has been a delight. As our sons have grown up we realised that they were ‘normal’ kids and Bronte wasn’t.

When Bronte was three and her younger brother was speaking so much better than her, we had her hearing tested. She had the worst glue ear the ENT specialist had seen in years. She had grommets put in the next week and we were reassured that her behaviour and speech would return to normal reasonably quickly. We started speech therapy to help her catch up but things didn't improve. She didn't respond to the speech therapy as firstly she didn't have the concentration and secondly she simply seemed unable to attempt what was asked of her.

At three and a half she was assessed and we were told she had a global developmental delay of 19 months. That was almost half her life. At this point toilet training had become a huge issue. She was the first in mothers group to use the toilet but was always dribbling urine in her pants ven after recently going to the toilet. She resisted every trip to the toilet and it became a battle. She used to hide and poo in her undies every day and didn’t seem to care if we were out.

She was also very tactile and was into anything she could get her hands on that she could smear and finger paint in. This included dog poo. Many times she would emerge with her body covered on hers or the dogs poo. I hate to admit to how many times she ate dog poo and survived.

By the time she got to four she was still attending speech therapy and was about to commence early intervention. We were desperate patents and lucky to still be married at times due to the stress. We were ready to try anything. After many hours searching the internet, my next attempt to normalise our daughter was an elimination diet. A very daunting venture. With the support of my mother who stayed with us and a fairly skeptical husband we made it through the first three weeks. My husband then changed his tune quickly as a different child emerged into our lives. She virtually toilet trained overnight. The painting of poo ceased. Her language improved exceptionally. Everyone in her life commented about what a different kid she was. I will never forget bursting into tears at around the three week mark (in the diet) when she said ‘thank you mummy’ one day I was driving her to speech therapy. It was the first time she showed any emotion or acknowledgement of our feelings.

We continued the diet and commenced challenges. Two hours after eating chocolate and banana she went berserk. She stood on the carpet and wet her pants in front of us. She pooed her pants. She was defiant and oppositional again. And biggest of all, we couldn't understand a word she said. We now know she is intolerant to amines in a huge way.

Bronte has since been diagnosed with dyspraxia, a language and motor disorder. She still requires speech therapy. Her private speech therapist has since done the diet with her child and encourages other parents to look into it also as she saw such a big change in Bronte's speech and development.

We took Bronte to a paediatrician six weeks into the elimination diet to discuss her developmental delay. He bluntly told us that some kids were unlucky enough to be developmentally delayed and we shouldn't expect too much from her. He said we would be lucky if she was able to catch a bus when she grew up. She would be able to do that now. When I told him that were currently on an elimination diet and had seen huge results he said he would never expect a parent to go to that much trouble and would therefore never suggest it. His last words were 'When you are ready to put her on Ritalin come back and see me'. I walked out of there disgusted and feeling very sorry for the parents who are told this when they are searching for help. I have to say that that elimination diet we did with our daughter Bronte, with help from you and our allergist, has absolutely changed my daughter's (and the rest of our family's) life. - *Wendy, NSW*

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Relationships in our house were strained to say the least. There were times when Steve felt like leaving, and there were times when I felt the same way. Fortunately, we never both felt this way at the same time. I had many desperate teary phone calls to Sue during this time and several similar desperate calls to our paediatrician. I enquired about respite care because I felt I desperately needed a break. As a Defence Force family we were completely on our own with no extended family for support.

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

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

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

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

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

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

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

Nicholas in the preschool year was never disruptive or badly behaved in that environment. He did not join in very much with the other children, particularly in singing or dancing, or anything where he had to really let himself go and have fun. He was always very stiff and controlled. I remember seeing his teacher once grab both his hands and physically move his arms to do the actions for a song they were singing up on stage. He hated it. He showed very little in the way of emotions, he very rarely smiled, and was very rarely spontaneous with anything, both in conversation, and in the form of gestures. He had a marked delay in his speech and I was forever explaining to people that if he did not answer a question straight away, he was not being rude; it simply took a while for him to process his thoughts.

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

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

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

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

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

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

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

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

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

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

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

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

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

There are other instances where he has kicked and bruised my legs, and these have been recorded on my medical documents. These dramatic violent outbursts were always followed by periods of remorse where Nicholas would come to me crying and feeling bad about whatever it was that he had done. I always took full advantage of these times and we would sit down on the couch and have a cuddle and talk about it. These times actually reinforced to him, that we did still love him very much, and they reinforced to us that he truly didn't want to be the way he was. Nicholas behaviour continued its decline. Who would have thought that this was possible? He spent a lot of time in his room in time out. He would throw a tantrum for no apparent reason. He would kick, punch, and head butt. All it would take was for us to look at him in the wrong way, whatever the wrong way was, or to tell him "no". It got to the point where every time he was sent to time out, he had to be physically restrained otherwise there would be another hole kicked in the wall.

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

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

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

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

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

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

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

We had the assessment and the psychologist initially thought that he had Aspergers Syndrome. She did a questionnaire with us and decided that he did not meet the criteria. However she did recommend medication, even if only as a temporary basis, to help restore very fragile family relationships. An anti depressant was also recommended and because of Nicholas' delayed speech she asked that we see a speech pathologist. Our paediatrician decided against an anti depressant for Nicholas but agreed to try him on Dexamphetamine. Nicholas started taking Dexamphetamine in July 2001.

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

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

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

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

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

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

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

We saw this psychologist who also thought that Aspergers played a part in all of this. He did the Aspergers questionnaire with us and decided that Nicholas did not meet the Aspergers criteria. However, he phoned me a couple of hours later and said he'd had a rethink after reviewing the results. He now felt that Nicholas did have features of Aspergers Disorder. Nicholas has now been diagnosed as having a variety of developmental disorders. These include ADHD, high-level language impairment, and features of Aspergers' Disorder.

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

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

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

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

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

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

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

We occasionally have burritos for dinner, which is one of his favourite foods. On these rare occasions I let him off the diet. He always has at least three or four, plain, with no filling, exceptfor maybe a small amount of grated cheese. At bedtime when we are tucking him in and saying "goodnight" he often tells us that he "doesn’t feel well". In addition to this, and because of the additives and preservatives in the burritos, he becomes noticeably hyperactive.

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

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

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

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

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

We still have a long way to go in terms of monitoring Nicholas' education and assisting him with overcoming these learning difficulties. We are fully aware that there will be some rough patches as our son navigates his own path in life, but for now, the most important thing for us as a family, is to finally have our loving, gentle, caring, beautiful little boy back with us again. He is a pleasure to be with, and a son to be truly proud of. Relationships during these past four months have started to heal and we have finally found the light at the end of a very long tunnel, something that for many years we thought we were never going to find.

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

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

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

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

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

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

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

The Failsafe Discussion Group: This group of people primarily discuss the failsafe diet, but also discuss many other challenges faced by special needs families. Their wealth of information and support knows no bounds. I would not have survived these "challenging" years without these people. I have learned so much from this group and we are all still learning. Together, we can all make a difference, and we can all find that light at the end of the tunnel. *Susan, June 2002*

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

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

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

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

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

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

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

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

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

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

[067]"There are days when Ritalin is ineffective" (September 2000)

I attended your talk in Canberra in June and was considerably impressed. I then purchased "FED UP" and am now proceeding to read through it … I have a 5 year old girl with numerous problems both behavioural and learning without, as yet, having been given a diagnosis by her paediatrician. However, my reading has defined ADHD with learning disabilities. Her paediatrician tends to agree, though is unwilling to diagnose at such a young age. Like you, I've pursued behaviour training, as well as speech therapy, occupational therapy, attended early intervention preschools, obtained 2nd opinions from paediatricians, had blood tests and seen a geneticist. All with little luck. Her extreme hyperactivity saw me retreat from almost all social activities as she was unwelcome and I was always on edge with her unpredictable and extreme behaviour. She is now in kindergarten in a special learning support unit. Her Ritalin medication is reasonably effective, but there are days when it doesn't work. I'd like to explore fully the effect of additives in food and as such, am now intensely interested in what you have to say both in your books and via the internet/email. When I have completed your book I will try the elimination diet. I thank you … you have given me a new area to explore.

[036] 282: Jack's story: severe speech delay associated with bread preservative (April 2000)

I have been meaning to write to you for years to thank you for your books. We were on the right track with our then four year old son, Jack (now coming up to 10) when I read "Different Kids". I already suspected ADHD and knew very well that he reacted to food as do I. Jack had his first food reaction at 20 weeks gestation! I ate some of those awful red sugar-coated peanut things and he just went berserk, looping the loop and throwing himself all over the place for about an hour or so. So we were prepared.

I breastfed him for nearly three years - breastfeeding was only time I got to lie down and rest. He was a "windy" but fairly normal baby early on and I did avoid any foods in my diet that seemed to cause problems. He never liked to be left alone and would panic if put down while awake. From three months constant movement and novelty was required to keep him happy. When he was happy he was radiant and when he was not he was grizzly and constantly squirming with this giving way to frantic screaming if the boredom lasted for more than a few minutes. Out shopping, strangers loved him as he responded with such joy to any attention and he was a very attractive baby. I had to carry him on my back in a sling, the stroller was too boring, too far away from me and not social enough. I accepted all this as I had been told I was a very, very difficult baby - colic - and my expectations were therefore "realistic".

At four months I began to introduce solids - rice cereal with breast milk to mix. The novelty seemed to appeal to Jack! Then I began to mix a small amount of orange juice in with the cereal to boost iron absorption. From there I introduced apple, ripe banana, pureed vegies (broccoli, pumpkin, etc.). He wasn't so keen on this but I heard about adding cheese to make the vegies more appealing, so I did this, often using parmesan cheese as well as milder cheeses. Jack loved bolognaise sauce mixed in too. Another favourite was avocado. He loved apricot and yogurt. He had a small amount of mashed prune to counteract a tendency to constipation. I was so pleased that he ate well and proud he had such a good appetite and such an ideal diet. When others asked how he slept (pretty awfully) I could at least say, "But he eats really well".

Meanwhile our little boy was getting more and more grumpy and demanding and more and more miserable when he wasn't amused. I looked frantically for the "ideal toy" the thing that would hold his attention. Each new item was met with delight and then discarded within thirty seconds and the grizzling began again.

Jack woke at least twice a night. He was into everything and seemed to always want more - more - more. He wasn't babbling - ba ba ba & da da da at 10 months. (In retrospect, the first sign of his problems with auditory processing that later resulted in speech delay and difficulty in learning to read.) He never sat and played. He never sat! He went straight from crawling to being dissatisfied because he couldn't yet walk.

From the 4 months we put his "difficult" and unhappy behaviour down to "teething". The first tooth didn't appear until eleven months.

When Jack was four months old I ate a small amount of dark chocolate in an ice-cream and about one hour later breastfed Jack. Within half an hour he was screaming inconsolably and instead of being tense as crying babies are he just lay back in my arms in an almost relaxed way as he screamed (low muscle tone no doubt). I identified the chocolate as the most likely culprit - I'm now sure I was right. After Jack went to sleep I sat up and expressed my other breast out into a nappy!

He was still a delightful, smiling, social child as long as he had the undivided attention of someone and a constant stream of novelty.

I've gone into this first year in detail because it really shows most clearly what was going on even if it was not obvious at the time.

My second child, a daughter called Ellen, was born when Jack was nearly 3 and a half. Jack was delighted and adored his little sister. The pregnancy was complicated by my blood pressure going high from 23 weeks. My mother came to look after us all as I was meant to be resting as well as taking anti-hypertensive medication. My mother just couldn't take Jack's behaviour.

I had been avoiding wheat in Jack's diet as I believed I had a problem with it. (My problem was actually with calcium propionate (282), of course, but cutting out all wheat did solve my problems of fatigue and fuzziness and so for years I thought I needed to avoid wheat). For convenience we changed to normal white bread from the supermarket. Jack loved it after the drier rye bread I had used formerly. I had not a clue about the preservative in the bread. Jack's behaviour went from bad to atrocious.

Jack's behaviour was at its all-time worst between the ages of 3 and 4. It was during this time he was eating the preserved bread. He put his hand through a windowpane during a tantrum. He woke with nightmares and screamed madly about and it was impossible to get through to him.

He went to bed late, reappearing often saying he was hungry and wanting (surprise, surprise) another slice of bread. He would wake at 4.30 in the morning wanting to be entertained. The only toy he persistently liked was his ride-on car. His behaviour and manner were almost autistic but for his insatiable sociability. His speech was very delayed and I don't think he really understood a lot of what was said to him. He was however very imaginative and inventive and liked to play pretend games, but always with someone. He had no liking for being read to but preferred to have me act out stories with both of us taking roles.

Needless to say I was exhausted and miserable. We lived half an hour out of town. My husband, Nick, was at that time managing farms. It was a very similar situation to yours, I think.

Jack was going to preschool in town a few days per week. Although they did not complain about Jack's behaviour (he has never been physically aggressive towards other people, even at his very worst and he's never said "I hate you" either - he is a very gentle character) When pressed they would say he was a bit weird, hiding in the playhouse and refusing to come out when the others were sitting on the mat listening to stories and taking off outside at inside time, etc, but he was only three so a lot of immaturity was allowed for.

My mother and my husband, Nick and I discussed Jack and his behaviour and decided that his things had got much worse around the time of the change in bread type. I took Jack of all wheat. The change was astonishing. He could have his socks put on without going berserk. You could talk to him and he would act on what was said. He didn't scream through everyday tasks such as bathing, dressing etc. When he went to preschool that week I dropped him off and didn't say anything about the changes. When I picked him up the teacher approached me and said "What have you done - he's a different child - he's playing with the others and listening to us."

Just before Jack went off wheat he had been assessed by a speech therapist at the preschool. She diagnosed, as best she could -we couldn't really keep Jack in the room much less anything like on-task - a severe expressive language delay and a moderate receptive language delay. Six weeks, later when off the wheat products, was reassessed by the same speech pathologist, using the part of the test that Jack had not done due to being non-cooperative. This time he seemed to have no significant receptive language delay and was only mildly delayed in his expressive language. She said she had never seen a child change so dramatically within such a short period of time.

Of course avoiding wheat meant avoiding a lot of foods, such as sausages. So Jack's diet also became generally blander and so did Jack. He was still difficult but at least he was "on the planet" now. He was only four but used to ask me "Why am I so happy, Mum?"

After a couple of months I screwed up my courage to do a challenge for wheat. I cooked some pikelets so I knew just what had gone into them. No reaction other than a very happy child - yummy pikelets!

I challenged with bread, planning to do two-week-on -- two-week-off challenges to see if any difference was apparent. That challenge lasted for two slices of bread fed to Jack at 4.30 on a Friday afternoon (timed so as to coincide with the weekend when Nick would be about)!! Within forty-five minutes, Jack was off his brain. Screaming, upset by everything - he finally went to bed and woke at 4.30 and was off again. This reaction lasted as a major thing for three days and Jack was unsettled for at least a week afterwards. Nick strapped Jack into his car seat and spent a lot of time driving around checking the property that weekend! We have never rechallenged this one as Jack himself has no desire to repeat that particular experience and neither have we.!!

The clinic sister I went to for Ellen was very supportive of my efforts to unravel the cause of Jack's problems with diet. When I had identified bread as being a huge problem she pointed out that bread did contain a preservative. She did not know anything particular about this preservative and its effects and she only mentioned it because preservatives were believed to be a cause of behaviour problems in children. Unfortunately I didn't take this too seriously at that time - I still believed that they wouldn't put anything this harmful in our "daily bread" and therefore the preservative couldn't be that harmful.

I spent the next year or so thinking our problem was yeast. I also noticed that a lot of Italian food caused major problems and made Jack pale and blobby looking as well as affecting his behaviour.

It was around this time I found and read "Different Kids" and it all began to make sense. What I had been doing as a mixture of the observation that the blander the diet the blander the children, my little clinical-trials-with-one-(or two, three or four) participant(s) and intuition could now be done with structure. I think you saved us another three to four years of misery, money wasting and mucking about.

These days my husband says he feels better and doesn't get headaches any more. I've found I react to many things and I compete with Jack for the most sensitive-in-the-family status. Ellen reacts to salicylates by becoming easily enraged and blaming everyone for everything. She is, by the way, the most un-ADD person I've every met - highly organised, very logical, and a real old head on young shoulders - very knowing and mature and reasonable. She is also extremely bright and academically gifted especially with maths.

Jack becomes hyper and idiotic and unable to learn when he has more than moderate salicylates in his diet. His salicylate reaction is a rapid-onset-rapid- resolution-type reaction. Amines used to make him irritable and as close to aggressive as he got but these days the reaction takes the form of a migraine. Jack still has academic problems related to his ADD and particularly to his auditory processing disorder. He is on Ritalin for school. I liken it to wearing glasses and tell him his sister wears glasses at school to help her eyes focus and he needs Ritalin to help his mind focus. He takes a very small dose (1 tab then ½ tab three hours later) and he finds it very effective. He does not take it at weekends usually although he would have a dose if we were going to do something that required good behaviour despite being bored or to help with a task requiring concentration and organisation such as making a model etc. He also asks for a dose if he his anxious to be on his best behaviour.

We also need to apply behaviour modification techniques on a daily basis - I did a Triple P course and this has been immensely helpful in managing Jack.

To put it simply, our approach to Jack's behaviour and other problems three-tiered one: First comes diet and general good health including adequate sleep and food - this is essential as if his diet, in particular, is off then nothing else is really effective.

Second comes the behaviour modification. I believe a lot of poor behaviour in children is caused by not being able to understand their environment. It seems to me that all effective behaviour modification systems provide not only rewards and punishments but more importantly they organise and simplify the social environment for all players. This consistency enables children who have trouble reading those around them to understand what is happening and they are therefore able to comply.

And thirdly, medication is the icing on the cake. It does cause Jack persistent appetite suppression and sleep problems. (The appetite suppression can be a good thing for parties though as he will only pick at plain chips and have a bit of lemonade if on medication!) Once again thank you so much for your books - and for the great website, and please sign us up for your newsletters, discussion group and kids discussion group! - Alison, Queensland

[1073] Some feedback from the Fedup Roadshow 2011 (September 2011) excerpt

‘My daughter reacted to annatto in fish fingers with head banging, rocking and making whoop whoop silly noises - this lasted for about three days, every time she tried to concentrate, the headbanging, rocking and noises would start up again' said the mother of a 6 year old

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

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

[951] Artificial colour challenge with Black & Gold ice cream cone (October 2010)

I did a colour challenge today with a Black & Gold Icecream cone (102, 110, 133, 155) on my 4 yr old son and within 20 minutes he was jumping around, making silly noises, laughing in a very silly fashion and unable to concentrate on a board game we usually play that he would normally focus on very well. My husband was there this time to witness it (I did it on purpose because the hubs is "cheating" a little with my son a bit too often now when it comes to "other foods"). I saw the look on my husband's face when the realisation hit. I got my point across without nagging. I even asked my son why he thought he was behaving the way he was because he does not usually act like that. I saw my son "try" to calm himself down and to his credit he was able to tone the behaviour down a little but it took over an hour and a half before he was able to settle back to what I would call normal behaviour. There was no anger or stern sounding instructions from me for his behaviour as I knew we had induced it. He was very clingy again too. He just wants a cuddle and tells me he loves me and once he is reassured he is off again bouncing around. Absolutely astonishing stuff. I only wish there had been more family and friends around to see it! – by email, WA

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

When I started to really read food labels, I was horrified by the fact that I was poisoning our whole family - especially with 635 and annatto. You asked me how we are affected by these additives.

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

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

[936] Teeth grinding and little monster behaviour after artificial colours (September 2010)

Most of the time my 5 year old daughter is a nice sweet girl but then sometimes this monster will emerge. When she is in one of these moods she will start grinding her teeth and make monkey type noises and get frustrated very quickly especially with her little brother who has to put up with a lot of punching and intimidation. We get an amount of this behaviour usually everyday but sometimes she will be worse than usual and be completely irrational with inconsolable crying and screaming. When we get one of these more severe episodes we can usually trace it back to something with bright colours like doughnuts with sprinkles etc. After reading your website I have realised that a lot of her staple snack foods have the food colours that have recently been banned in the UK in particular Arnotts country cheese crackers and the Quelch 99% fruit juice Super Doopers which I stupidly thought were healthy choices! - Lyndal, by email

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

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

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

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

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

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

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

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

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

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

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

[867] Another behavioural reaction to McDonald's Soft Serve Cone (November 2009)

My 6 year old son has had the same reaction to McDonald's Soft Serve Cone as posted on your website. It started about 20 minutes after eating and lasted about an hour. It was not the thing to have before a swimming lesson. He was behaving as the mother noted on your website (Story [850] – "our normally quiet son bounces, jumps, shouts, makes silly loud noises, blows raspberries, uses nonsense words, and generally just can't sit still") and appeared to be on a planet of his own! – Trina, NSW

[850] Reaction to McDonalds soft serve (no cone) (August 2009)

We avoid McDonalds soft serve since our 5 yo son had a reaction in the evening after eating a soft serve with cone in the afternoon. It had been the only thing he had eaten that day that we could think had caused it. After reading Failsafe Newsletter #60, we tried the Maccas soft serve again without the cone (in a plastic cup - upside down sundae lid). The reaction was less severe but still there. He was affected about 4 hours after eating the ice-cream both times (with and without the cone). This, for him, is typical for colours. Our normally quiet son bounces, jumps, shouts, makes silly loud noises, blows raspberries, uses nonsense words, and generally just can't sit still. The acute reaction generally lasts about an hour. The icecream without cone caused a shorter period of the acute reaction, with less volume and intensity. Probably lasted about 35 minutes and was more bearable but still consistent with the typical reaction he gets from colours. Peters Original and other failsafe varieties (eg Sara Lee and the organic ones) have never caused the same reaction. – Susan, Qld

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

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

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

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

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

[608] The changes to our food in 17 years (February 2008)

I have four children: two adult children, and two under the age of 5 years. My adult children muddled along in the world, not knowing much about all the bad things in particular foods. However, looking back I can see they too would have benefited from this way of life.

My youngest two though, have multiple intolerances. It is just amazing to watch. Because I had a 17 years gap between my children, I have seen first hand the difference between the years. What I grew up with was home cooked things. My adult children had combination of home and 'very occasional' takeaways. However, my youngest children, both know all the main take out places ie Maccas, KFC, Hungry Jacks etc. It shows the difference in how we live now.

I have started on three separate occasions with the elimination diet with success each time. It has only been through inconvenience that each time I have gradually allowed the bad items to creep back in to their diet. Once it gets crazy around home again I realise I must stick to what I know they can and can't have!

This time around, both children and one granddaughter have been ‘detoxing’ for fours days, and the improvement is out of sight yet again. I actually had a peaceful drive for 15 minutes yesterday. Usually I am repeatedly telling them to stop the unruly behaviour, the silly noises, the repetitiveness, the fighting, the whining etc and the list goes on. Yesterday I had to look in the mirror to see if they were asleep! How nice.

I just want to thank you so much for showing an interest in not only what was happening in your own family, but to extend that and show all who want to listen that what is happening to our children (and us) is not normal. That we can help what is happening to our bodies. – Cathryn, Tas

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

When Chris was born he was a big, boofy boy. For the first six month of his life he was a placid, calm, happy child. At six months, he changed to being very, very active, fidgety and demanding. Looking back at that time, three things changed – he started long daycare, solids and formula. I also remember very clearly that his face changed as big dark circles and creases formed under his eyes. He was labelled ‘naughty, disruptive, hyperactive and violent’ by daycare when he was only 10 months old. He was walking at that stage and continued to escape from the childproof room, or to snatch toys from non-mobile babies.

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

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

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

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

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

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

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

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

[468] Lots of mistakes at first (November 2006)

My daughter Samantha is now eight and has been failsafe for about two years. To begin with we were making a number of errors with the diet and it wasn't until I started referring to your web pages that I was able to better refine the diet and start to work through some of the possible reasons why the diet didn't always seem to be working.

Samantha was always a fairly demanding baby but as she was our first we didn't really know any different. As a toddler she was not the sort of child that was easy to take out to a café for lunch - sitting still wasn't something that she could do, frustrating but I could cope with that and didn't really worry about it.

The first signs that started us thinking were a little eczema after eating dried fruit and complaining of her skin burning after urinating, which seemed to be much worse after eating oranges and tomatoes. At about the same time that we started taking note of these I met someone whose child was failsafe and I started reading about food intolerances. It all started to make sense. Pity that we didn't find your material straight away however we fiddled around eliminating some of the very high foods from her diet. Some improvement on the skin irritations but her behaviour although not extreme was becoming noticeable at times

When Samantha went to school she was displaying some behaviours that were inappropriate. We could never really put our finger on the type of behaviour that she was displaying it was just silly inappropriate behaviour, silly noises, crawling under the desks etc. As she is a bright child we were perplexed about why she couldn't seem to understand and learn how to behave at school. It was at about this time that we discovered your material although it was not a total success straight away. When Samantha eats food that is not failsafe it seems she displays symptoms of oppositional defiance. It took time to realise just how sensitive Samantha is and to sort out some of the common errors we were making.

We are extremely lucky as Samantha is absolutely wonderful about sticking to the diet. I grew up on a farm where my mother did all the cooking so I guess I have learnt pretty good cooking skills. As I now cook just about everything, it does seem to be a bit of a bonus. – by email, Tasmania

[441] Tim's world (shadowings of Asperger's) (August 2006)

When we had our son Tim assessed for Asperger's, we found that his way of viewing the world was different from ours. The tests highlighted his strengths such as maths, eg he scored 17 out of a possible 19 for this area, comprehension and reading skills. They also highlighted his weaknesses in motor coordination and his differing ability in various social situations.

Tim's world can be black and white. He doesn't cope well to change and is like a sponge soaking up written information. He was described as a little adult trapped inside a child's body. This can vary from day to day, depending whether Tim is in what I call 'child mode', happy to play with trucks and toys and his brother, or 'adult mode', needs specific jobs to do, be busy, needs to know and plan ahead.

Tim's overall score fell just a few points short of the criteria for diagnosis. When this happens, the person is described as having shadowings or ghostings of Asperger's, that is, enough of the traits to be a huge concern. This has helped us to find ideas and strategies to cope with his condition.

An occupational therapist with a special interest in sensory/tactile areas explained such things as why Tim likes to wear specific clothes, bounces up and down, spins (though this only happens every now and then) and why his hearing and sense of smell are so acute. These actions and sometime making noise help Tim balance himself. We were advised not to stop these actions, but find ways of directing them into a more socially acceptable form eg bouncing on a trampoline.

Overall, if we can improve his motor skills, his social skills and behaviour will improve.

Tim struggled socially at school last year, but this year things seem much better. We have had friends around to play, though I'm always on hand to help direct the play and social skills needed for a happy afternoon, and I can honestly say Tim is not the lonely little boy he was eight months ago.

My advice to other parents who feel there is something different about their beautiful child, but no one will seem to listen: don't give up. We were patted on the head by doctors for three and a half years ('he's just highly strung, he will grow into himself ' - what a great help that was!) and it was my own sister who suggested Asperger's due to an article she had read.

Having put a name to and found a reason for Tim's behaviour has empowered us to help our beautiful, bright and unique child to be happy. Tim seems sensitive to any artificial products, either additives or smells. We have seen him react to smells such as air fresheners and roadwork smells such as tar. We were also told to watch if his ears go red as this can often be a warning that something is not agreeing with him chemically and we have found this to be true. He can eat salicylates but is limited on amines. - Elaine

[357] 282: A typical email about the effects of 282 (December 2004)

I have taken my 3yo son off all commercial bread products (it's become quite a crusade for me!) with marvelous results. He was going to be assessed for autistic disorders in a few weeks, but since taking him off 282 he has changed (he talks now! and his behaviour is so much better) and I know that his paediatrician will be amazed at his progress. At 18 months my son was only just babbling, and was considered to have the language skills of a 9 month old. After 6 months of speech therapy he was starting to mimic animal noises with prompting. By 27 months he had he had just two words - mummy and no. At 30 months I took him off commercial bread and at 34 months, he just started talking one day. At 36 months (last week) he now has the normal vocabulary of a 3 - 3.5 year old, and the understanding of language of a 4 year old. He is still having problems with actual speech, he only uses 2 word phrases most of the time and stutters occasionally, but the change in him in 4 months was amazing. He also has less tantrums, sleeps better and is generally easier to get along with. - by email

[278] Gifted but atrocious behaviour (September 2003)

I read your book because it was recommended by my son's counsellor. Although Mitchell is a bright boy, often selected for gifted programs at school, his behaviour was atrocious (severe temper, disruptive, tearful, moody, silly noises etc).

Since starting failsafe two months ago, he has had a huge turnaround. He is very proud of his new self and is just starting to believe in his own potential - potential we, as his parents, always knew he had.

Last week, Mitchell played his first basketball game as his new self. Usually he would vague off in the middle of the game and would never listen to instructions from his coach. He always wanted to play, but had little attention span. Mitchell was amazed at his ability with his new self (as was Dad). At the end of his training session he came off the court and said 'Wow, Dad, that was FUN!'

Thank you for 'Fed Up' I wish I'd found it sooner! - Michelle, by email

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Alex started school at the same child-centred preschool/school last year - he had a reasonably good year but was chronically sick - temperatures, stomach aches, head aches. However as he is so hyperactive, he often didn't realise he was sick, and I had to fight to get doctors to look at him. For example, I took him to hospital with severe asthma/croup - however as he was running around casualty making chicken noises he was not seen to as a priority case - when they finally looked at him, his oxygen levels were dangerously low and he was gasping for breath.

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

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

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

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

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

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

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

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

And the rest of the family? None of us are totally failsafe yet, and are all cheating when we are out, but I believe we all have symptoms that warrant the diet. My 9 yr old daughter is incredibly artistic, but unable to read, and has temper tantrums, I suffer migraines, mood swings, arthritis and occasional depression. Interestingly, my daughter did some market research for a new hyper flavoured snack food a few weeks ago. She came home in an uncontrollable rage to the point that she was throwing herself around the house kicking furniture etc. I have never seen her like that before - and just think, those snacks are about to do that to all our kids - it's criminal. - reader, Sydney

[1081] Our toddler was a little tornado on salicylates (December 2011)

My husband was one of the first children to go on the Feingold diet in Australia in 1973. His parents still talk about the amazing improvements they saw although on that diet he was allowed pineapple, dates, cauliflower and mushrooms. I think some of the improvement was that they had a local butcher, they made their own bread, and they never ate out because there was no eating out then. They had a wonderful local chemist who made them toothpaste.

Because of that you would have thought we would twig much earlier to our son but we didn't. We avoided tomato and orange a lot because from when he first went on solids he broke out in a rash and did again a few times so we just didn't eat them. But he got worse over time. At 15 months he would run up our very steep street and then do 4 blocks of the neighbourhood, with us trying to keep up. I'm now pretty sure that was the kick he was getting from the salicylates. His absolute favourite was apricot teddies. We used to only let him have 1 or 2 every fortnight but that, along with all the other high foods kept him like a little tornado.

My husband's mum told us about salicylates when we went away on a holiday. His eczema got really bad and we thought it must be from the chlorine when we went swimming. She suggested fish oil tablets so we got some for kids but they also had high salicylates. He just went hyper in no time. He kept asking for more of them and that night he screamed and screamed all night and kept scratching worse than he ever had. He had welts all over him in the morning.

We tried cutting out just salicylates and saw some improvement but it just got bad again. Then I went hunting on the internet, found your book and we talked with our doctor about doing the RPA elimination diet. The change was noticeable, the biggest being less extreme mood swings and going to sleep at night. Bedtime used to be a 2 hour stint every night and then he would collapse in exhaustion.

We have seen head banging on two occasions, well after we started the diet. My sister gave him some yoghurt by mistake with Annatto 160b in it and he was a very loud very angry little boy. He didn't really have tantrums as such but did quite a bit of banging his head, wouldn't let us near him. He didn't want to be touched at all and kept threatening his little brother with all kinds of nasty things. A lot of yelling. He did not sleep at all well that night needless to say. It was the same the second time. – Susan, by email

[1063] Another soy intolerance story: “Wow, wow, wow – a different boy” (July 2011)

My son is eight and daughter six years old respectively. We have been failsafe for approximately 7 years of that time. I thought I had it pretty much down what they could and couldn't have.

Last week however I stopped buying soy milk as my son was using so much of it, it wasn't funny. I have always tried to steer them to rice milk, which my daughter loves! thank goodness. The soy milk was for others in the home but our son loves it and stopped having the rice milk when soy was around.

I cut this out last week. I seem to have a different boy. We have always just thought that removing what we did know was causing problems was as good as it got. That he would always be a LOUD ACTIVE HYPER BOY. It was much worse if he ate things he shouldn't. He reacts quite badly to amines, salicylates, colours are atrocious for him etc.

Can it really be the soy? Can it really be this simple? My son is now receptive, loving, easy to talk to, to explain things to, has stopped whinging, being aggressive, doing annoying things to his sister and to us. Even stopped all the repetitive things as well.

As I write this he is sitting watching some tv, his room is clean, he is dressed for school, his jobs are done ie take the dog for a walk, feed the chickens etc. He is not 'in my face', he is not running around annoying his sister (she doesn't know what to do with this as she is so used to it, she is even trying to get his attention to be how he always is with her).

Wow, wow, wow. If it is not the soy milk then I am at a loss as to what it could have been. I now have a son that is sooooo easy to love and cuddle AND it has been a quiet house too, not just from him, but I don't feel the urge to yell to get my point across for the 15th time. The lesson here is - never give up trying to find what may be happening with your child. It probably is not normal, and you may be missing something. - Cathryn (see more about soy intolerance in [702], [605] and [314])

[1020] Effects of dairy foods (May 2011)

There is no doubt at all in my mind about the great effect that foods have on my children although it has taken me about 3 years to accept it. But I still cannot get my head around why dairy foods cause such a behavioural response with my daughter. When eating dairy foods, she gets dark rings around her eyes, and is not just bad, she is impossible to live with. I just can not understand how a food can affect her in this way. Her oppositional defiance is incredible. It is also as if she is completely deaf. Her voice becomes so loud it makes me cringe and it also becomes a lot higher in pitch. She is not affectionate at all and is very serious as well. It is as if she has complete focus, driven, locked in, intense, not able to snap out of her bad behaviour. It is only now (she is 5 1/2 years of age) that I am starting to bond with my daughter in a calm and loving way, before this it has been a desperate, lost love.

Since she has been dairy-free she listens, talks more quietly and without intensity, she lets me cuddle her, she does not get locked into bad behaviour and we can negotiate together. She has always been strong willed and very smart but now I can enjoy it. I am so happy now. I guess if there was a logical explanation for this huge behavioural response I would stop questioning my judgement so much. Because it is just behavioural, you can tell our peer group think it is our parenting and they also question the failsafe food idea as a bit odd. I guess what I am trying to ask is how can food affect the voice, make you deaf, fearless, and completely oppositional? - reader, Qld

[1004] Challenges: 3 week reaction to amines (March 2011)

My son's reaction to amine foods is always the same: depression, crying for nothing, being angry, seeking conflicts, ODD like behaviour and many attacks of night terrors (like 5 times in a 2-week-period). He had very strong reactions to pork meat and to chocolate, and the effects to those foods lasted for almost 3 weeks even after stopping the challenge. His reaction to salicylates is the usual hyperactive, silly behaviour, talking too much/too loud and having more little accidents.- by email, Europe

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

My 4 year old son's behaviour has always been challenging, but has been particularly bad in recent weeks. After complaining of bloating, diarrhoea etc a breath test revealed that he was fructose intolerant (Note: about 50% of people have a positive breath test, so it is not very useful - Fructose malabsorption factsheet). So we started on the strict fructose elimination diet. My GP asked me a couple of weeks later how the diet was going. I responded that it was going well and that my son had not complained of bloating, stomach pains, etc since. However the thing I had noticed the most was his improved behaviour. I'm sure my GP thought I was a little odd, and commented that it wasn't something he'd heard of before but perhaps my son's behaviour is better because he doesn't have tummy pains. I wasn't convinced.

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

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

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

Day 2 bad morning, good afternoon.

Day 3 good behaviour a little less eggshells!

Day 4, 5, 6 great behaviour.

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

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

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

[990] Behaviour & diet: extraordinary tantrums gone (March 2011)

First of all thank you for being my saviour!! My 4 year old little boy had been getting increasingly worse in his behaviour and we had pretty much become isolated due to his extraordinary tantrums that lasted anything up to 2 hours 3 or 4 times a week. I never knew when they would happen and it was normally as soon as we met up with friends in a play centre he would become aggressive, loud, uncontrollable and impossible to calm. Many times I have left a shop or playcentre with him folded under my arm, kicking and screaming, biting anyone or anything that came in his way.

We had already been seeing a paediatrician as he was also under weight and under height for his age. They hadn't found anything wrong but his blood tests were not quite right either. I was getting desperate and he is starting school next Thursday and I couldn't imagine what they were going to say!!

Until 'Fed Up'...... We have been following the elimination diet (mostly) for the last 2 weeks with dramatic results. We have not had any tantrums for 10 days. He is a pleasure to be around and he is sleeping much better. We are not there yet, but so much better. I can't quite believe he's the same child!! - Fay, UK.

[961] Extraordinary tantrums (October 2010)

First of all thank you for being my saviour!! My 4 year old little boy had been getting increasingly worse in his behaviour and we had pretty much become isolated due to his extraordinary tantrums that lasted anything up to 2 hours 3 or 4 times a week. I never knew when they would happen and it was normally as soon as we met up with friends in a play centre he would become aggressive, loud, uncontrollable and impossible to calm. Many times I have left a shop or playcentre with him folded under my arm, kicking and screaming, biting anyone or anything that came in his way.

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(2 months later) He is now a couple of months in and we are so lucky to have such a gorgeous child now. We have had the occasional bad mood or minor tantrum if we have strayed a little or if we have made a mistake but no major full blown ones since we started the elimination diet - Fay, UK.

[862] 129: Bedwetting and behaviour problems due to Ibilex (Keflex) with artificial colour Allura Red and flavour (November 2009)

Just writing to tell you about my son's reaction to an antibiotic called Ibilex (keflex) suspension, for a recent chest infection.

On the elimination diet we have discovered a new child. Finally able to sit still in class and concentrate, no shouting out or disruptive behaviour and dry at night!

While he was on the antibiotic, the teacher informed me that our son’s behaviour had deteriorated. He was oppositional, loud, unable to sit still and disruptive. At home the bedwetting started again and his behaviour had also deteriorated but I had not made the connection, I put it down to him being unwell.

As I was giving him his dose one morning I was staring at the pink mixture and it finally dawned. I rang the GP immediately and sure enough it contained Allura Red. It took about a week to get him dry again and his behaviour to settle. – Helen, by email (Allura red is artifical colour 129; also contains bubblegum flavour. A compounding pharmacist can provide medication without nasties, see our Medication factsheet - S)

[722]: “By god she is a ratty child!” (February 2009) [COURAGE AWARD]

My step-sister is 3 years old, and by god she is a ratty child! Her language skills are very under-developed for someone her age, and she very rarely does what she is told. She is extremely loud and boisterous, cannot sit still or quietly, is very destructive, swears, yells, screams, and cannot play nicely with other children as she is very rough. A clean room can quite easily become a disaster zone within minutes. We have given up cleaning her room, as she pulls clothes and toys out as soon as we have finished. She is also up to 10-11 o’clock at night.

She often dances and sings and often makes references to people's private parts as well as other embarrassing things, and we have cause to believe that these actions are done for attention (even though it is the wrong kind of attention).

I have cause to believe that food additives have a strong part to play in this due to her lax diet. She is spoilt and gets what she wants, from chips, lollies, chocolates, ice creams, and soft drinks. She has quite a lot of milos everyday, I once counted 4 in one morning! If she is not drinking milo, she is having soft drink, cordial or juice. She very rarely eats any un-processed foods or drinks any water.

Our dinner times are healthy, generally consisting of vegetables, a salad and some source of meat, or sometimes spaghetti bolognaise. She refuses to eat any of it, and shortly after dinner demands some kind of snack-type food.

My mother is finding her daughter’s behaviour extremely unbearable, even becoming embarrassed to take her out in public. My mum’s struggle to keep her sanity has increased since recently giving birth, making it extremely difficult to look after the baby and put up with my sister.

I need your advice to convince my parents that my sister’s diet is not ok, and drastic changes are needed. – *by email from a teenager who wins a copy of our DVD Fed Up with Children’s Behaviour.* Here’s hoping it will help with the family situation.

[613] ‘Normal child’ with bruises, growing pains, headaches (February 2008)

Our older daughter was well within the scope of a 'normal' child before the elimination diet. The only reason she did it was because the whole family did it to support her sister. We would never have sorted out why she was always covered in bruises, got such growing pains and frequent headaches, why she was always restless and talked loud and why she was so skinny. All these disappeared on the diet. Thanks to our dietitian we found she is, among others, intolerant to gluten. – by email, Qld

[595] Filling our house with laughter (November 2007)

My husband and I watched a news program on the children at Nana Glen Primary School. We were so impressed we thought we d try it with our two boys, aged 10 and 6. Both boys suffer with asthma and croup and both are very loud and active. Our oldest has always found it very hard to go to sleep, most nights he was still up at 11.30pm. We’ve tried various relaxing techniques, CDs, quiet reading and after two weeks on the diet he is asleep in 15 minutes. Fantastic!!!!! He is happy to sit quietly with a book and wants to talk about stuff going on. The standard answer I used to get was ‘nothing’s wrong’. He was always so sad and serious about everything. The biggest change has been him giggling and throwing his arms around his dad and saying ‘I love you guys’.

Our 6-year-old has been a very emotional child. Always close to tears, unable to put into words what is making him frustrated, angry, and teary. Now he is talking about how he feels and reasoning with other children rather than coming to me crying. They are both filling our house with laughter once again.

We bought your failsafe book and the difference in our boys is amazing, to the point of other people are commenting. Thank you for simplifying all the numbers and facts and giving us back our two beautiful boys who for a long while had been lost.

My husband and I now sit on the couch and listen to the sounds of two boys playing well together and enjoying each others company, no more fighting to the death near enough. - by email from WA

[578] Tics related to salicylates in summer fruits (September 2007)

My son very suddenly developed mild facial (rapid blinking eye and lip biting) and vocal tics (sounds like a quiet grunt or throat clearing sound) at a time when I think his hyper/silly behaviour and other food intolerance symptoms escalated, probably in response to his increased consumption of summer fruits, salads and juices. Other symptoms included: loud voice, bed wetting, sinusitis, teeth grinding. All of his favourite foods were high in salicylates: strawberries, apricots, rockmelon, tomato, cucumber, capsicum, broccoli, vegemite, spag bol, apple juice etc. His diet contained few foods with colourings, flavourings and preservatives as I've always tried to encourage "healthy" foods which he has been very willing to eat.

We noticed some improvement (in behaviour, bed wetting, teeth grinding but not tics) over a week just by changing fruits to pears and bananas, stopping vegemite and tomatoes and switching to low sal veges and Bakers Delight bread. We visited a dietitian and Joe (not his real name) started on the elimination diet. He had a very obvious reaction to sals - hyper like I've never seen him within about 4 hours of starting the challenge. I wouldn't have believed it but my parents witnessed the reaction too! When they visited, he was his usual self, undertaking some quiet activities requiring concentration (jigsaw puzzles, colouring etc), chatting and on his (usual) best behaviour. Within about an hour and half of their arrival he changed into this wild, racing, hyper thing heart racing, unable to stand still, almost a "mad" look in his eyes, silly silly silly etc...the worst of it finished within about two hours and he basically collapsed exhausted and couldn't even stay up to wait for dinner guests that he had been looking forward to seeing. Very strange but so similar to the stories I've read on your web site.

We didn't manage any other challenges before Christmas - felt it too unfair to restrict his diet so severely during the holidays, although I did continue to restrict sals and he doesn't eat many processed, flavoured or coloured foods anyway. We continued along on this basis, watching his sals intake over a day and over a week, and the tic went completely. His behaviour was much more predictable and stable and very much like the boy I know. He is still bed wetting although I am convinced it is worse when he has had sals (e.g. salad) in his dinner and this seems to be improving, particularly since we have been focussing consistently on his sals intake. Teeth grinding and sinusitis very improved. So I am absolutely committed to continuing our new approach to Joe's diet as we really have seen some big improvements. - by emails over a period of 3 months

[463] “Tell Sue I’m not a cranky pants anymore” (November 2006)

I am a primary teacher and thought I had done everything 'right' to prepare my daughter for school. I was surprised and shocked when the teacher was less than enthusiastic about her first day. Despite her apparent high intelligence, Amelia has progressed slowly and her teacher describes her as inattentive and unaware of what is going on in the classroom.

After three terms of this I finally relented and took Amelia to see a paediatrician. She was diagnosed with ADHD (it is also suspected that my husband had ADHD as a child and has leant to channel his energy into work and sport). I was very reluctant to give Amelia the prescribed dose of Ritalin, particularly as her behaviour wasn't unmanageable at home. (After reading your book, perhaps I have been an 'immersion' mother and have fooled myself by thinking 'my child isn't a bad as that'.)

After much discussion my husband and I decided to trial Ritalin. I only lasted two days before maternal guilt, severe anxiety (particularly after looking at www.Ritalindeath.com) and Amelia's racing heartbeat helped us to make the decision to stop the medication. It was after my husband talked about our experiences at work, that one of his colleagues suggested we look at your website.

That was a significant day in our household. The next day, with the help of my children we emptied out the cupboards and started failsafe. The changes that your suggestions have made to my family are impressive. After 11 days on the diet, I received my first unsolicited positive comment from Amelia's teacher about her work and she also got two awards in the same week.

My 2 1⁄2 year old son has demonstrated even more dramatic improvement. Even though we didn't think there was a specific need for him to be on the diet, we are doing it as a family. Behaviours that I put down to being a boy – climbing on everything, running everywhere, talking loudly - have all stopped and he is now a gentle, quiet little boy. His day care teacher is amazed by the changes in him.

As for me, the headaches that I have experienced every few days have stopped and the psoriasis on my arms is starting to heal. I have read three of your books and it is if I have woken from a dream. Your description of your daughter in year 1 and husband could be about my family. When I read p38 "She'll grow out of it" Fed up with ADHD I was astounded - that is Amelia!!!! She is also very good at drawing and is a creative, lateral thinker (not that these qualities have been recognised at school).

Sue, I thank you for the years of trial and error that you have gone through to make this so much easier for all the families who are experiencing problems now. Amelia asked me to say thank you from her in this letter. 'Tell Sue I'm not a cranky pants anymore' she said. – email, NSW

[379] Behaviour due to hairspray, airfreshener (November 2005)

I stopped wearing hairspray about 6 months ago when we went totally failsafe and saw great results with our children's behaviour. Two weeks ago I was going out without the kids, so after putting them to bed I sprayed on some Sunsilk hairspray and liked the way it looked. So the next day I did it again and within a couple of hours my 3 year old son's behaviour changed. He was overactive, very fidgety, hitting and kicking, and headbutted his sister hard enough to give her a blood nose. As time went on he was crying a lot with loud silly behaviour and wanting demands met immediately. That night he could not get to sleep. I wore the hairspray for three days not putting two and two together then we realized it must be the hairspray as their diet is so failsafe it couldn't be the food he was eating. I stopped wearing hairspray and his behaviour returned to normal. I have also noticed that when I visit my mum who uses airfreshener - lots of air freshener - my son's behaviour deteriorates after a few hours. - Vic

[356] One-liners (Nov 2004) excerpt

My 18 month old son is generally a quiet little guy, until the last two afternoons when I gave him chicken in a biscuit – both days his behaviour changed after about half an hour, he was running around the house yelling loudly, his breathing was very intense and he was a totally different child - I am amazed that it is legal to use additives that can do this to children.- by email

[355] 282: Six slices of bread a day (Nov 2004)

I removed the bread preservative 282 from my 7 year old son's diet after coming across your website and recognising many of the behavioural problems we were experiencing with him. He was extremely defiant, flatly refusing to do the simplest thing asked of him - homework was torture for all involved. He was loud, argumentative, talked non-stop, very anxious, had frequent bad dreams and was prone to angry outbursts. Much of this we had grown to live with since he was identified as a preschooler as being highly gifted but I was increasingly concerned about our family dynamics as we spent most of our time yelling at him and wondering how much longer we could survive, and how he was going to cope as he grew older - and therefore stronger and possibly dangerously violent.

He has always loved bread and, being a vegetarian, eats a lot of it, averaging six slices a day. The difference once we started making our own bread was astounding. He immediately became so much calmer and quieter that my husband asked if he was still in the house while he was getting ready for school in the mornings. He became much less defiant and argumentative, was able to stay still while I put his school tie on, much more polite and affectionate.

It was a lovely change to have him come home from school and give me a spontaneous hug, which is a very rare event as he is so sensitive to touch. He also seems to be able to think more clearly. I removed 282 a few days before the end of term 3 so was able to monitor changes over the holidays, which were the most pleasant we've ever had. In the first week of the new term he came home with a merit award for “staying cool, calm and collected" when faced with a situation which usually would have had him in tears. That same week he gained a further stamp towards a different award, and the following week another one for his homework!

As a visual-spatial learner with a central auditory processing disorder and an IQ in the top 2% he was probably always going to have trouble fitting into a mainstream school, however the difference the removal of 282 has made is so marked we are all going to attempt the failsafe diet.- reader, NSW

[337] Jessie's tantrums (July 2004)

My daughter Jessie is three and a half now and from the moment she was born we have had nothing but problems.

In the first three months she was always crying, not able to sleep, she was given medicine for reflux and colic and her formula was changed on a weekly basis. At 6 months she threw her first tantrum, I remember it well as it was over a set of car keys. She was chewing on them and then decided to ram them into the back of her mouth, so I took the keys from her. She turned around and grabbed at my face, screaming and trying to bite. That was the start.

As she grew older she stopped her daytime sleeps well before she was one and moved into bed with me. I didn't mind because she slept so much better. She was never able to amuse herself and would rather sit and scream than do something for herself. She often had ear infections and colds. Before she was two her sister was born, much to her annoyance.

My second daughter was and still is breastfed so both girls were in my bed. Jessie's night terrors were getting worse, and even though she loved her sister she didn't like her one little bit. Once again, I believed the nurses and doctors putting it down to terrible two's and a new sister. Her behaviour got worse as she got older and it was nothing for her to headbutt the cement from one end of town to the other end till her head was blue, for no reason but a toy put in a plastic bag so that she could carry it. When she was three she hit the peak period.

A typical day would start off with her wanting the light on in the morning, so I would turn it on. "Get it off", she would say, so I would turn it off, trying so stop the tantrum. "No, turn it back on", so I would turn it on, and then she would start, "Get her away from me, I don't want her any more" (that's her sister), then the screaming would start and the kicking and the biting and this was from the moment she opened her eyes! She would scream and yell until she wet herself and then just lie in it and scream some more.

When she was finished in the bedroom she would go and destroy the next room. She was so loud that in the middle of summer with the aircon on and all the doors and windows shut the neighbours three doors up could still hear her. After an hour of morning tantrums then it was time for the next one usually over something stupid. The tantrums could last up two hours with her hitting, screaming and biting herself and me. When she was so angry there was nothing I could do to help her, timeout didn't work, smacking made it worse and holding her was pointless. She would be screaming out for me "mummy mummy I need you" but if I dared go near her "get away from me, I don't want you" and she would hurt me with what ever was closest. Not a day would go by that she was not like that all day, in fact out of a whole 12 hour day I would say that she would be calm for about 3 hours.

I turned to the doctors and nurses for help but all they could say was go to parenting classes. I knew that there was something else wrong. When a friend recommended Fed Up with ADHD, I almost cried.

We started the diet in a month ago and within 3 days her behaviour had changed, no more kicking, hitting and biting and the look of pure hatred that she would give you before she started the tantrum had gone. We removed colourings and preservatives first and then went on the elimination diet. She got better and better. Everyone noticed! When we made a mistake, like kindy giving her chocolate, she would wake the next morning complaining of sore eyes, and then the LOOK would start and I knew we were in trouble!

Suddenly I had my little girl back, the one that I spent three years looking for. She is nice to her sister and even nicer to me! I can not thank you enough. You helped when no one else could. -reader, Qld

[078] stopped the loud and endless chatter (September 2000)

After a lot of trying to find someone down here in Melbourne to help me through the diet, my son and I went to the RPA Allergy clinic in Sydney who were really wonderful. We have been on the diet now for 7 weeks and already have had great results. Some foods have been forever banned from this house. The change is remarkable both in behaviour but also how my son himself feels. He now sits quietly, will read for himself, and has stopped the loud and endless chatter. Given the choice now he will not eat or drink anything that is not on the lists and asks if it will make him feel "all upset". Indeed as the amount of planning involved is quite detailed. The whole house now eats from the FAILSAFE lists and all of us feel heaps better.

[061] "reported to child protection agency" (July 2000)

I am the mother of a four-year-old boy who we always suspected of being a little too lively. Lately his behaviour has worsened with very loud and frequent tantrum type behaviours, and despite all the tactics employed such as ignoring these outbursts we were having little success. Last week our local G.P who suggested that we should try a diet ... our son's behaviour has noticeably improved even with the few changes we have been able to implement so far and we are thus eager to continue on this successful road. Our son has not been diagnosed with Attention Deficit Disorder as most of the time he is just wonderful with no problems with attention or concentration etc. Yet these outbursts are very acute and sudden in onset and we are obviously concerned to go out too often as when this occurs as other people disapprove of our management as parents. On one occasion when our son threatened to run out onto a busy road in front of ongoing traffic I yelled out to him to get away from the road as I was not close enough to physically remove him. His tantrum continued and the next day we discovered some person had reported us to the child protection agency as being unfit. As you can imagine this has been the most upsetting part of trying to control his behaviour ... as often people ignore our explanations of his outbursts and refuse to believe a child can act this way. I believe we are excellent parents. My partner is a teacher and I am a nurse yet neither of us are feeling very successful in these roles at present in relation to our own child. Educationally he is doing wonderfully ... it's just this aspect of his behaviour we are concerned about. - reader, email

[898] Wow!!!! sums up effects of diet on tics (February 2010)
(At the start) We have an appointment with your recommended dietitian in 2 weeks, which can't come quick enough. Our 9-year-old son has had (with hindsight) intermittent tics for the last couple of years. Last weekend he was so agitated and had particularly bad tics which seemed to follow him having an ice cone with some terrible colouring/flavouring over it which someone bought him with the best intentions! Traditionally, we have always had plenty of fruit and veg and I think has contributed also. A trip to the GP resulted in being told they were habits which we should ignore and if they hadn't gone in 2 months to go back.

So, we started failsafe last weekend and are now on day 7 having had him off school with a cough, cold and generally irritable. Things improved loads today until a friend of his gave him a starburst earlier this evening at the village movies and within an hour at the most he was incredibly twitchy...is it possible for him to have such an immediate reaction to something?..then improve within a couple of hours?

We have gone through thoughts of Tourette's syndrome, some of the symptoms he seems to have - sniffing, twitching, vocal tics, though the GP said this was unlikely ... he was definitely agitated tonight though we don't know if it was due to the noise / busyness of the place or could have been the starburst. His favourite foods are orange juice, olives, mushrooms, salami all of which have been eliminated, and we are thinking salicylates maybe the culprit ...

(12 days later) Just a quick update on things, it's been an interesting week! Our son's tics had been improving, but he had a terrible cough and kept spiking temps so he is now on antibiotics for a chest infection, and is improving cough/temp wise but his tics seem to have really worsened again. Looking at the ingredients on his meds, it's reassuring to think we are on the right track. We have managed to stick to the elimination diet and he has been really good at chomping his sprouts etc ... not enthusiastically ... but eating them!

(After 5 weeks) Thought it time I put an email together to update you on our son's progress !... wow!!!! sums it up nicely! We have been to see the dietitian twice now and are fine tuning our failsafe eating. I would say he is 80% improved, hardly any physical tics, occasional vocals and bed wetting is still a problem but we are hoping with the fine tuning we may be able to help that. He is more focused on homework, even doing extra to catch up!! It has been a revelation and continues to be so, my husband has lost weight (it needed to go!)and his BP has dropped to normal limits so everyone is better all round.

(After 6 months) Another update! Things all went a bit off track a few months ago and I think the pressure of everything all got a bit too much, especially for our son. However, with the relapse in diet the tics returned and so we have gone failsafe again but without the pressure and fuss this time. Meals out and parties are relaxed and he can have whatever is on offer! Most of the time we are failsafe at home without anyone really realising it ... it has become a way of life! Plus the tics have disappeared which is reassuring to know that we are doing the right thing. Another trigger we are almost 100% sure of is scented candles, we had one of these in the lounge around the time of the return of the tics!

I cannot thank you enough for all the info you and Sue have put together, your books and Friendly Food have to be the most well thumbed books in our house! – Amanda, by email.

[576] Vocal tics related to non-failsafe 'treats' (September 2007)

My husband said he was supportive of our boys' [RPAH elimination] diet though I suspected secretly skeptical. Last weekend he indulged the boys in various 'treats' including non-failsafe lemonades, popcorn, etc. This morning I had the first meltdown in a couple of months from our son who has Asperger's. He was back to headbanging, crying, not wanting to eat, refusing to go to school, hand flapping, vocal tics, etc. It was full on. I talked to him about it (after he'd had a calcium tablet and calmed a little) and he said he would give up all those foods he loves if it meant he was able to be calm again. - by email, Sydney

[150] Insomnia a major issue (April 2002)

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

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

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

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

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

I have only read probably one quarter of your book. But the next day I eliminated wheat, dairy and all preservatives/additives. Within two days, the son that I only had glimpses of suddenly emerged for a period of five consecutive days ... and I suddenly found myself able to fall asleep in ten minutes. My son would still wake up, and I would still respond in the same manner, but again, I would be able to fall asleep without any problems. Day six was the day that I cried. I have spent the better part of my adult life wanting to sleep and feeling tired. I have wasted years of my youth thinking about sleep. I am at times angry and at times relieved to just get out of the woods. I just can not believe that I no longer have to describe myself as an insomniac. My son now sleeps much better, but I have realized only today that I think he is also salicylate sensitive and probably so am I. Both of us, I realize now, demonstrate aggression for unknown reasons. I can control that side of me because I am an adult, but my son is more honest with himself and his world.

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

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

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