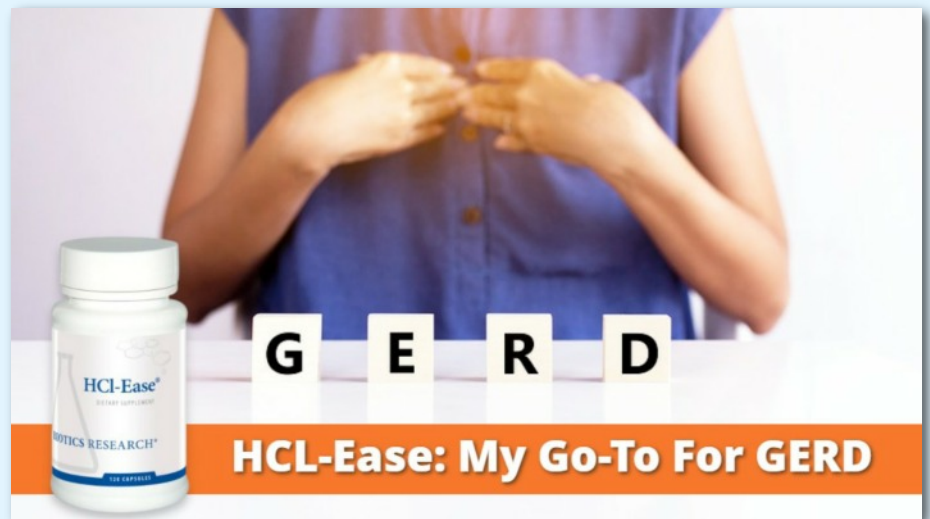


Healing the Stomach with HCL-Ease

“Dr. Lasneski developed a product called HCL Ease that can be taken while someone is on acid blockers to put out the fires of inflammation and heal the stomach.”

I've had great success with GERD and learned quite a few things from my failures that I would like to share. But before I get into specifics, I want to set the stage. Did you know that the parietal cells which make hydrochloric acid have more mitochondria than any other cell in the body? Parietal cells contain more mitochondria than heart cells, more than brain cells. Mitochondria make up 45% of parietal cell volume. Any cell that has that much potential to create energy is important. As you know the end product of parietal cellular function is HCL. Normal stomach pH is 1.5-3.5.

And yet major classes of drugs are created to suppress this essential function. Acid blockers whether script or OTC are designed to be used for weeks, not years. Yet I have seen patients who have been on them for 25 years. What happens when you suppress HCL? Low stomach acid or hypochlorhydria causes poor mineral absorption, especially magnesium, zinc, and iron. Low HCL increases risk of bone fractures, bacterial overgrowth, increases in SIBO, impaired absorption of B12, incomplete protein digestion,



and chronic indigestion to name a few.

PPIs also lower the microbial diversity, which as you know sets the stage for all kinds of chronic diseases. Digestion starts with chewing food, hopefully in a relaxed parasympathetic state. The mouth is alkaline. Food and saliva travel down the esophagus and pass through a one-way valve called the lower esophageal reflex. Esophagus cells are geared to tolerate an alkaline pH. Once food enters the stomach, parietal cells release HCL, pepsin is secreted, and the process of digesting protein begins. Once the pH reaches a certain point, the pyloric valve opens and

contents are emptied into the small intestine, where the chyme becomes slightly alkaline. As a side note, if the pH of the stomach is 4 or greater, the pancreas and gall bladder will not release their enzymes, and the pH stays mildly acidic. This is one of the major causes of SIBO.

Let's come back to GERD. If food is not digested in the stomach, it sits in the stomach, fermentation begins, weak acids are created from the fermentation process causing gas and bloating. The gas will often force the lower esophageal reflex to open the wrong way. Now mildly acidic chyme will often splash up and burn alkaline-loving esophageal

tissue. Also, the stomach tissue, which is geared to tolerate highly acidic liquids, is irritated, upsetting bacterial balance and mucus production. So, the goal in treating GERD is to assure complete digestion and to protect tissues that are sensitive to pH changes.

Patients complain that their stomach is burning. One reason for the burning is the lack of healthy mucus cells that protect one's stomach from the acid. Knowing that when you try to take patients off PPIs, they often feel worse, Dr. Lasneski developed a product called HCL Ease that can be taken while someone is on acid blockers to put out the fires of inflammation and heal the stomach.

HCL-Ease was designed to:

1. Support stomach acid.
2. Aid in digestion.
3. Protect gastroesophageal lining.
4. Provide pain relief.
5. Supply anti-inflammatory benefits.
6. Stimulate healing.
7. Increase the release of Nrf2, which will increase anti-oxidants as well.

Let's look at the 6 ingredients in HCL-Ease and the rationale for use. Meadowsweet, which is high in flavonoids, phenoglycosides, and essential oils. It has astringent properties that have been used for gastritis.

Eyebright also used to reduce inflammation contains aucubin. Eyebright supports mucous membrane integrity, as well as exhibits antimicrobial activity. Although we think of Eyebright for vision, aucubin has been shown to promote neural stem cells and regeneration in sciatic nerves. Aucubin shows gastroprotective effects against proinflammatory cytokines in damaged gastric tissue. Not only was aucubin found to inhibit proinflammatory cytokines, but it has been shown to increase levels of SOD and glutathione. Aucubin helps maintain levels of epithelial growth factors (EGF), vascular epithelial growth factors (VGEF), and COX-1 levels. COX-1 can maintain the stability of gastric epithelial cells and promote healing.

Marshmallow root contains mucilage polysaccharides that have been shown to support healing, particularly irritation of oral and pharyngeal mucosa and inflammation of the gastric mucosa.

Asian Plantain is noted for its antiseptic, anti-inflammatory and antibacterial uses. Asian Plantain shows immunomodulatory action by stimulating activity of dendritic cells. It also contains aucubin and supports oral and pharyngeal mucosal health.

Okra supplies abundant pectin and mucilage. Mucilage acts as a lubricant for the intestinal tract and is protective against gastric irritation and inflammation. Okra also inhibits bacterial adhesion, especially H. pylori to gastric epithelial cells.

Pepsin degrades proteins into peptides. The amount of pepsin in HCL-Ease is sufficient to digest 50 grams of protein.

The therapeutic dose for HCL-Ease is 3 capsules, twice a day between meals. If nighttime reflux is an issue, take 3 capsules, one hour before bed. If reflux happens mid-afternoon, take 3 capsules, 1 hour after lunch. You can click below to see an excellent article by Dr. Rachel Olivier which gives a more detailed discussion of the herbs. It can take time for healing to occur especially for chronic Gerd and long-term PPI use. As an adjunct, while healing occurs, consider using GI Resolve, 2 tsp in 4 ounces of water and sip slowly over a 20-minute period.

I put together a handout for your patients on lifestyle modifications, because the only cases I've really had trouble with refused to modify their lifestyle. Earlier in our discussion we mentioned that the source of the problem is too little HCL, not too much. So, we want to optimize stomach acid, but not until the stomach is healed. See the Tuesday Minute on the importance of HCL to the right. I know this is a lot of information. Thanks for hanging in there with me. I look forward to being with you again next Tuesday.