

Troubleshooting Q and A

Step 1: Slashing Inflammation

1. My client/patient is struggling with giving up coffee while on the program. What do you suggest?

Eliminating coffee will give your client/patient the best possible chance for success on the program. We would like to see the friendly bacteria be able to reseed in a non-acidic environment. Also, coffee forces a secretion of cortisol which can thin the lining of the gut.

If your clients/patients are struggling with eliminating coffee, start by having them gradually cut their intake down in increments during Phase 1 of the program, until they completely stop all intake. Substituting coffee with green tea or Yerba Mate (with or without almond or coconut milk) can help with cravings. Drinking **green juice** first thing in the morning can also be helpful. We like to swap it for Dandy Blend as well which supports the liver and does not contain caffeine, yet it has a bold, rich flavor like coffee. Also, give your client or patient our **handout on Caffeine** (found in the bonus section) so that they can educate themselves from a place of inspiration.

If your client/patient simply refuses to eliminate coffee, there are a couple of things that you can suggest to **make it more healthy**. First, be sure that they always drink organic coffee without mold. We like **Purity Coffee**. Second, they should have it with food containing a protein, fat, and carb. Third, limit consumption to between the hours of 10:00 AM and 1:00 PM. Any metabolic stimulator must be matched with the support that comes in the form of regulated blood sugar from food.

Fourth, have your client/patient add **Lion's Mane** to the coffee to create a nerve tonic. This will help mitigate some of the negative effects of caffeine on the adrenals, thyroid, and nervous system.



2. My client/patient was doing intermittent fasting prior to the program and would like to continue intermittent fasting during the program.

We do not recommend that your client/patient continue **intermittent fasting** while on the program. While some people can experience benefits from intermittent fasting (e.g., toxin release, increased insulin sensitivity, and reduced inflammation) it places considerable strain on individuals with low adrenal, thyroid, and detoxification pathway function. Your client/patient can drive themselves deeper into this dysfunction with intermittent fasting and you must be sure that they heal these components before trying intermittent fasting for the maximum holistic benefit.

We recommend that your clients/patients eat at least three meals per day so that they can properly follow the supplement protocols. Keep in mind that you are guiding them through a comprehensive gut cleanse, and they need to keep their energy up as much as possible.

Note to read this blog and **[watch this show on Intermittent Fasting](#)** and to gradually help them release this way of eating so as not to cause chaos on their system. For example, if they were only eating one meal per day, you will only add one additional meal for 3 weeks and then another. Otherwise, they will gain weight rapidly and their sleep and energy will be thrown off.

3. My client/patient feels hungry and is losing too much weight.

Excessive weight loss should not occur if your client/patient is properly implementing the program's dietary strategy. It is designed to support the body's innate, inflammation-reducing cellular activities. Safe weight loss is 6-8 pounds per month, sometimes up to 10-12 pounds if the individual has initial water-weight to release as the cells naturally address the inflammation processes.

Be sure to review the dietary guidelines, meal plans, and recipes with your client/patient to make sure they are consuming enough calories. This information is meant to be a guide, and you can guide your clients/patients to increase their food frequency or portion size, as appropriate to meet their specific caloric needs.

To help your client/patient stabilize any weight loss, we recommend that they consume specific carbohydrates, such as butternut squash, acorn squash, green bananas, cassava root, unmodified potato starch, and sweet potatoes. Specifically consuming these carbohydrates at night along with a small amount of fat (i.e., 1 teaspoon of **[ghee](#)**, grass-fed butter, almond butter, or **[flax oil](#)**) plus a pinch of **[sea salt](#)** will help them maintain or gain a bit of weight as well as support their hormones and sleep during the night. Your client may also add in up to 1 cup of certain seeds, such as quinoa and wild black rice, for extra calories during the day. They will need to be soaked before being cooked for better assimilation of nutrients. Additionally, have



your client/patient eat within 30 minutes within waking and every 3 hours thereafter to help regulate blood glucose and rebuild their strength.

4. My client/patient “cheated” and stopped following the dietary guidelines. How do I help them get back on track?

It is inevitable that at some point, you will have a client/patient who goes on a vacation, attends a party, or just “falls off the wagon” and overindulges in foods that are not allowed while on the program. We always like to say, “correct and continue.” Please do not chastise the person. Instead, reassure your client/patient that they have not ruined their chances of successfully completing the program and encourage them to get back on the dietary protocol and follow it as best they can. Remember, it’s your job to meet your client where they are and to gauge their emotional capacity for change so if you need to give them a legal “cheat or two” during the week like 1 glass of tequila, or a coffee every other day, or a gluten free, naturally sweetened dessert once a week to help them expand their emotional capacity for change, do it and monitor their progress. Teach them how to “dip without diving” which will serve them well in their eating and living life long after you stop working together. This is an opportunity to mention the **80:20 Rule**, that the GT5 program is not a forever abstinence of a beloved food/beverage item, but is teaching a common sense upgrade for diet and lifestyle practices that improve overall health and longevity.

For additional supplement support during instances of overindulgence, we recommend that your client/patient take 1 capsule of Food **Sensitivity Support** and 1 capsule of **Digestive Enzymes** with each meal as a protective measure. This will help digest any gluten or excess sugar they were exposed to. Additionally, your client may find **L-glutamine** to be supportive in addressing sugar cravings. Many of you know that it is an amino acid that supports the integrity of our stomach lining, but it also can cut sugar cravings almost immediately. **Collagen** is high in L-glutamine and there are many other things you can do to cut sugar cravings outlined in the program. For example, **chromium picolinate** at 200 mcg twice daily with food and/or taking the herb **Gymnema Sylvestre** are exceptional at holistically reducing sugar cravings by sensitizing the cells to insulin and stabilizing blood sugar.

5. My client/patient started taking the Step 1 Plan S supplements and then experienced diarrhea, increased bloating, and/or nausea (in any combination). Prior to taking the supplements, she had 1 normal bowel movement daily. What adjustments should I make to her protocol, if any? Can she skip meals due to the nausea?

It is possible that your client/patient is experiencing some die-off symptoms (commonly referred to as a Herxheimer reaction, or a temporary “dysregulation” (a beneficial surprise)) due to a long-overdue change in enzyme and nutrient availability. We would recommend that



your client stop taking the Proteolytic Enzymes and Triphala until her stools return to normal. At that time, have your client/patient add them back in one at a time, and with reduced doses, in order to determine whether they are well tolerated. Sometimes you may want to recommend less than one capsule as a dosage and will have the person empty the capsule to your desired amount, then gradually increase the dose to help the sensitive person acclimatize to the program's benefits. Also, have your client/patient add in 2 capsules of GI Support and Soothe with each meal now.

If these symptoms began after taking the Gut Thrive supplements and your client/patient did not have these symptoms before starting the program, then we recommend that you hold off on starting your client's/patient's Phase 2 supplements (Pathogen Purge) until her stools return to normal.

You may want to add in Phase I and Phase II liver detoxification support as well including a glutathione IV or liposomal glutathione. Perhaps even a colonic can also help the liver release more and be better prepared for the journey ahead. Note: It may be judicious to add Artichoke Leaf (500 mg, bid) to support the liver and gallbladder to employ a better bile-flow into the small intestines; and a glycerin extract of Dandelion Root (alcohol-free) employing 40 drops, tid, (with or without food.)

Once your client/patient starts Phase 2, have her begin the supplements at reduced doses so that you can determine whether she tolerates them. If she does, then you can adjust the doses up accordingly.

We anticipate that your client/patient will begin to feel better using this revised protocol and that her appetite will return. We do not recommend that your client/patient skip meals, if possible. Provide her with the 4-Day Fast handout (Phase 2) and see if the option that includes food is something that she can tolerate in the meantime.

6. My client/patient is on Plan P and experiencing a burning sensation in the stomach along with belching and a rash after starting the Phase 1 supplements. What adjustments should I make to his protocol, if any?

It is possible that the burning sensation is caused by the Proteolytic Enzymes your client/patient is taking along with the VRM1 and VRM3. We recommend that you have your client/patient reduce his dose of each supplement down to 1 capsule per day and gradually build up his dose. If the symptoms continue, eliminate one supplement at a time to see if you can determine which one is contributing to your client's/patient's symptoms. Begin with the proteolytic enzymes, as this is the supplement that some people may struggle with.



Some participants find that they need to start taking GI Support and Soothe for a few weeks at the start of the program, before they can tolerate the proteolytic enzymes. There is nothing wrong with starting this now and continuing it for the remainder of the program. Your client will need two bottles.

For rashes, we recommend applying external **aloe vera and calendula cream**. If your client/patient is not having 2 bowel movements per day, consider having her/him do a colonic to mobilize toxins to help with the rash as well as castor oil packs. You may also recommend that she/he increase the **Triphala** dosage to up to 4 capsules per day to assist with elimination. After this, if your client/patient is tolerating the Proteolytic Enzymes, **VRM1**, and **VRM3** and it is time to begin Step 2 (Pathogen Purge), she/he can continue to take them along with his Phase 2 supplements.

7. My client/patient started the program with chronic gastritis (previously diagnosed by a physician) and experiences gastric pain when eating. Should he or she extend Phase 1?

Because your client/patient has a high inflammation set point, we would recommend that she/he repeat Step 1 and add in GI Support and Soothe (1 per meal) before moving to Step 2 (Pathogen Purge). This means that you will have your client/patient continue the Step 1 supplements for an additional two weeks. This will serve to prep her/his body even more for the pathogen purge. At that point, your client/patient should continue on the protocol as directed. We also recommend that your client add in 1 ounce of **inner leaf aloe** vera each day into their smoothies, which will have a calming effect on the stomach.

As a general practice, it is important to conduct a thorough intake of each client/patient before beginning the program and assess whether they would benefit from taking Phase 1 at a slower pace. Each person is unique, and we encourage you to adjust the protocol to accommodate the individual you are working with.

8. My client/patient is on Plan S and gets shaky when she does not eat often. Can she eat wild rice at the beginning of the program? Can she combine non-potato flours with fruit?

We recommend that any participant who has blood sugar problems or adrenal dysregulation to increase their whole food carbohydrates by about 15% during the program. We also recommend that these participants eat within 30 minutes of waking and every 3 hours after to help stabilize their blood sugar.

If your client/patient tolerates wild rice and it doesn't cause bloating, gas, or other digestive discomfort, it is ok for her to eat it at the beginning of the program. Your client/patient can



combine fruit with cassava flour, green banana flour, or unmodified raw potato flour or sweet potatoes, yams, and butternut squash. If your client uses regular potato flour, then do not combine it with fruit.

For additional adrenal support, we recommend adding in 1 capsule of chromium picolinate with food twice a day and 1 capsule of Rhodiola, twice daily away from food - mid-morning and mid-afternoon.

9. My client/patient has undigested greens in her stools. What should I recommend?

If your client/patient has undigested food in the stool, it is likely that she/he is not digesting food well due to low hydrochloric acid (HCl) levels in the stomach, which in turn, causes an insufficiency of pancreatic enzymes needed to control bacterial overgrowth and complete the digestive processes. To help increase HCl levels naturally, we recommend that she/he drink 12-16 oz of straight, organic celery juice first thing each morning and wait 20 minutes before eating breakfast. It is too early in the program for your client to add in direct supplementation for HCl support or to add in apple cider vinegar. However, she/he can chew ginger root prior to meals.

Additionally, it's valuable to recommend that your client/patient eat in a way to support digestion, including keeping servings of harder to digest foods, such as animal proteins, legumes, nuts, and seeds low and to filling her plate with more cooked vegetables.

10. I think my client/patient would benefit from some additional liver support. What do you recommend?

To help support the liver, we recommend that your client/patient keep fat to 20-25% and consider adding in Pure Encapsulations Liver-G.I. Detox (2 capsules per day) for 60 days. Also, try having your client/patient add in 3 cups of raw shredded beets weekly and eat dandelion greens 2-3 times per week (or drink dandelion tea). These will both be supportive for the liver.

For clients/patients who have fatty liver, liver or gallbladder pain, or other liver issues, we would recommend that you have them do a liver flush before or during the Step 2 pathogen purge.

For a gentle liver flush, have your client/patient take Ultra Phos drops (10 drops in water away from food 3x/day) and then on the 4th day, drink 3 tablespoons of olive oil mixed with 3 tablespoons of lemon and do a coffee enema in the morning. Do the same thing the next day and your client/patient should get a good liver/gallbladder release. Your client/patient may also stay on the Ultra Phos drops for continued liver support for a full 30 days.



Here is an example of an additional liver-supportive protocol:

2 **Liver-G.I. Detox** capsules with 2 meals/day. Add shredded, organic, raw red beet (3 oz) to the 2 meals/day.

Note: organic beets are essential as non-organic beets are a GMO product and often contain the highly undesirable herbicide, glyphosate (Round Up™), shown to disrupt the "shikimate" pathway required by the gut microbiota to properly provide minerals and amino acids for overall body health.