



GLUTEN INTOLERANCE GROUP
of East Central Wisconsin

GLUTEN-FREE NEWSLETTER

http://bit.ly/GIGECW_Newsletters

Educate / Motivate / Advocate

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Meetings

When: Third Saturday of odd numbered months (Jan, Mar., May, July, Sept., Nov.)

9:30 am to 11:30 am

Where: Ripon Public Library in the Silver Creek or Nash Rooms.

Spouses and loved ones are also encouraged to attend.

Alan Klapperich - Branch Manager

Phone: 920-748-4877

GIG.EastCentralWisconsin@gluten.org

www.gigofecw.org

www.facebook.com/GIGofECW

It was September 20th, 2008. A group of eight courageous souls gathered in the basement of Ripon Medical Center for the inaugural meeting of our support group - then called East Central Wisconsin Gluten-Free Group.



We started by sharing our stories of how and why we came to attend this meeting. This simple but powerful act builds resilience for the storyteller and their audience. For the storyteller, sharing allows them to validate their experience and sense of self plus pass on some hard-won wisdom. For the listener, it enhances the appreciation of perseverance in the face of adversity. We find out we are not alone and others have experienced the same struggles. This important exercise strengthens social bonds and reinforces the sense of being heard and understood by others. *"The Sharing of Stories"* is a tradition we still observe each time a new member attends a meeting.

Becoming a Gluten Intolerance Group branch was a desire of mine from the beginning; this came to fruition in May 2011. GIG allows our little group to reach beyond the four walls of our meeting room, beyond Ripon, beyond Wisconsin. This association enables us to do things nationally and globally - something that would be hard to do on our own.

Jump to today September 15th, 2018; we're now ten years down the road. The group is still going and growing - how exciting! Members continue to take time out of their busy schedules to attend meetings. Some members choose to travel over two-hours round-trip even though they could participate in a much closer group. I think this speaks volumes about the quality and value of our members and the importance of face-to-face support groups.

Thank you, members of GIG of ECW for making this a successful group, everyone at GIG National, and to those individuals who encourage and support me. I wouldn't have been able to start and maintain this group without all of your help! A special heartfelt thank you to my wife Peggy - my gluten-free champion. Without her love and support, none of this would be possible.

Peace and blessings,

Alan Klapperich
GIG of ECW Branch Manager

Change Resources

James O. Prochaska, PHD

<http://bit.ly/2BYGRuE>

"James O. Prochaska is Director of Cancer Prevention Research Center and Professor of Clinical and Health Psychology at the University of Rhode Island. He is the author of over 400 publications, including three books, *Changing for Good*, *Systems of Psychotherapy* and *The Transtheoretical Approach*. He is internationally recognized for his work as a developer of the stage model of behavior change."

Detailed Overview of the Transtheoretical Model - (Stages of Change)

<http://bit.ly/2MCHnTR>

PsychCentral.com

**"Stages of Change"
By Mark S. Gold, MD**

<http://bit.ly/2LF8zwc>

AConsciousRethink.com

**"The 5 Stages Of Change Required To Make New Behaviors Stick For Good"
By Katie Uniacke**

<http://bit.ly/2NtydW8>

The Stages of Change: Gluten-Free Edition

Alan Klapperich
GIG of ECW Branch Manager

"The only real mistake you can make in changing is to give up on your ability to change."

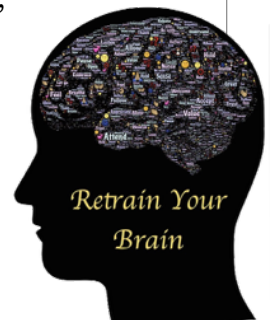
~ James O. Prochaska, PHD
Director of Cancer Prevention Resource Center and
Professor of Clinical and Health Psychology, Author

Head spinning - heart pounding - thoughts racing - brain melting. While these may be symptoms of gluten intolerance, I was describing what many feel when faced with change. Changes in lifestyle can be some of the biggest modifications we experience particularly if we have a gluten-related disorder. Transitioning to a gluten-free lifestyle turn our lives upside down. Stay calm and let's get prepared. We're going to delve into the gluten-full to gluten-free metamorphosis. I want to give you a basic understanding of change and the knowledge to make it a successful transition.

Humans have been changing since our existence; however, that doesn't mean we always like it or find it easy to do. Why? Our brains try very hard to maintain stability. Our brains are all about survival; they want to minimize threat and maximize reward. They want to predict what will happen to steer clear of danger.

BRAIN: *"What's that noise? Why are those bushes rustling? Is it a wild animal getting ready to attack us? DANGER!"*

When confronted with change, our brain can't predict the outcome, so it triggers the "flight or fight" response. Faced with uncertainty, we find ourselves distracted, anxious, and fearful. This heightened state decreases decision-making abilities, reduces memory, and elevates anger; not always conducive for clear, thoughtful consideration.



Change Resources

PsychologyToday.com

"5 Steps To Changing Any Behavior"

By Alex Lickerman M.D.

<http://bit.ly/2LAPWZZ>

PsychologyToday.com

"Change Is Hard, Here's Why You Should Keep Trying"

By Sherrie Bourg Carter Psy.D.

<http://bit.ly/2N0pMou>

ExperienceLife.com

"The Stages of Change"

By Jessie Sholl

<http://bit.ly/2okF5dE>

Four Constructs of Transtheoretical Model

The Stages of Change
When Change Occurs

Decisional Balance
Why Change Occurs

Self-efficacy
Confidence to Change

The Processes of Change
How Change Occurs

Stages of Change - Continued

The human brain is an astounding organ. Not only does it need to maintain order, but it also manages adaptation. We may not notice it, but our brains are continually changing in response to our ever-changing environment; the scientific name for this process is neuroplasticity. This adaptability enables our species to thrive and survive all kinds of adversities. The trick is to use our innate adaptability to our advantage. However, this metamorphosis requires a lot of effort.

When transitioning into the gluten-free lifestyle, there are a lot of changes, unknowns, and unpredictable outcomes. Yes, our brains are going to freak-out. We are replacing old comfortable habits and behaviors with new, unfamiliar ones. Those old behaviors have become almost automatic; requiring little to no thinking. We have had a lifetime to build those neural pathways in our brains.

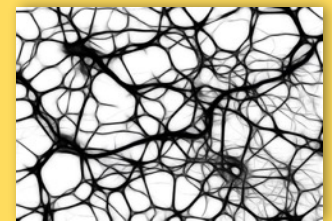
Over the years, scientists and mental health care professionals have developed many thoughts and theories about the brain, the process of change, and human behavior. Of the many behavioral change models that exist, the most prevalent are Learning Theories, Social Cognitive Theory, Theories of Reasoned Action and Planned Behavior, Transtheoretical Model of Behavior Change, The Health Action Process Approach and the BJ Fogg Model of Behavior Change. Each model has its own set of

Neural pathwhats?

The pathways along which information travels through the nerve cells of the brain. When we say or do things repeatedly, that information in our brain travels the same path.

Think about a hiking trail in the woods - as the path receives more traffic, it becomes better defined, well worn and effort-less to travel - the same thing happens in our brains.

When we start our gluten-free lives, we are blazing new pathways. This requires us to be conscious, and purposeful in our efforts.

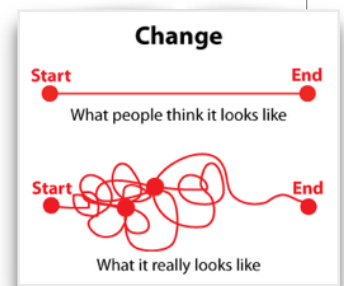


Stages of Change - Continued

strengths and weaknesses. That's not something we'll be discussing here.

We will be exploring the Transtheoretical Model of Behavior Change - or simply The Stages of Change. I chose this method because it made sense to me, it seemed logical and fit my personality and way of thinking. Will it be a fit for you? I don't know the answer, but keep reading you might be surprised.

James O. Prochaska of the University of Rhode Island and Carlo Di Clemente developed the Stages of Change Model in the late seventies and early eighties. Their model evolved through studies comparing the struggles of smokers who quit on their own with those requiring additional treatment. Prochaska and Di Clemente wanted to understand why some people were able to stop on their own. They determined those who were able to quit were ready to do so. Their model focuses on the decision-making of the individual and assumes that people do not change behaviors quickly and decisively. Long lasting change rarely happens as the result of a single, continuous decision to act. Instead, Prochaska discovered that behavioral change, occurs continuously through a cyclical process of thinking, hesitating, re-thinking, progressing forward, falling backward, starting over, or perhaps aborting the attempt to retry at a later date. *[Yep, sounds like me!]*



According to Prochaska's collaborator and wife, Janice M. Prochaska, Ph.D., who serves as CEO of Pro-Change Behavior Systems. *"This model works with the whole at-risk population, not just those who are ready for change right then."* She also estimates that only about 20 percent of people needing a health-based behavior change are prepared and ready to make the change.

While this model was initially applied to smokers, its versatility permits it to be implemented in a variety of situations. We'll be exploring how it might work for transitioning to a gluten-free lifestyle.

The Stages of Change model suggests that we move through six stages of change: pre-contemplation, contemplation, preparation, action, maintenance, and termination/adoption. Movement between stages is not always a straight line. It's normal to cycle and recycle through them, but we can never be in two stages at once. If we get lost along the way, we figure out what stage we're in and go from there.

While not part of the original stages, we'll also examine the Relapse stage.

Pre-contemplation

In this stage we do not know we have to change, or we do know, but simply do not want to.

When it comes to the effects of gluten, there's a wide spectrum. In most cases, people with gluten-related disorders have experienced some ill-health - be it long-term or short-term. We know *something* is wrong, but haven't been diagnosed or have been misdiagnosed. Maybe we

Stages of Change - Continued

think our state of being is perfectly normal because we've always been that way - our entire family is that way. If we have silent celiac disease [have no symptoms], a diagnosis will catch us completely by surprise. We may have a diagnosed family member urging us to get tested, but we brush them off like a pesky mosquito.

In this stage, we don't want to hear that gluten could be a problem for us.

"Give up my bread/pizza/beer? No way, I'd die without it."

"Just because you have problems with gluten, doesn't mean that I do."

"Bah, my sensitive stomach has nothing to do with gluten."

If that sounds like denial, yes, it probably is.

To move past this stage, we must somehow become aware that a problem exists **and** accept that we must address it. We may come to this realization on our own after we've been given testing results from our healthcare professional, or we finally listen to our family and friends. The mere fact that we are "thinking about it" is forward progress!

Contemplation

This stage finds us realizing the value in making the change; the mental gears have been turning, and we are getting ready. We have thoughts of *"Yeah, I get that gluten-free is important"* but the key is to personalize them by thinking *"I need to be gluten-free."* Here we start to acknowledge the problem and take ownership. Our minds are now open to new ideas and information. We may begin asking questions of friends and family who have already gone gluten-free. The trick is discovering the trigger - the event, the person, the emotion, the reason we flip the switch.

We begin to explore the possibilities about what we need to do and if it will be worth the effort. These thoughts can be fleeting or last a lifetime. The bottleneck in contemplation is getting stuck in a loop of weighing the benefits against the costs of making the change. We never feel ready to commit. Deep down we know change is needed, but we can't make it happen. To help organize and visualize our thoughts, sit down with a pencil and paper - list all the pros on one side and the cons on the other. When we encounter obstacles, identify ways to overcome them.



Stages of Change - Continued

Pros	Cons
<p>Not sick all the time.</p> <p>Leave the house without needing a bathroom nearby.</p> <p>Be fully present and available to my family.</p> <p>Lower risk of additional autoimmune diseases and certain cancers. Get to try new foods.</p>	<p>Missing old favorite foods.</p> <p>Reading every ingredient label.</p> <p>Being concerned about everything I eat.</p> <p>Reduced convenience and spontaneity.</p> <p>Social events and family gatherings won't be the same.</p>
Obstacles	
<p>Family gatherings = bringing my own food.</p> <p>Dining out = calling ahead to speak with chef/manager about gluten-free options.</p> <p>Work functions = talk to the organizer about gluten-free options.</p> <p>Church Communion = talk to Pastor about gluten-free host.</p>	

With everything that's going on, our emotions may inspire us to act immediately. Sometimes this causes us to jump right into the Action stage - bypassing one of the most important stages - Preparation. Action without preparation can lead to disaster.

Preparation

We've made the decision to change, now we must figure out *how* to do it.

SELF: *"What do I need to do to prepare myself to make this transformation happen?"*

Any successful outcome begins with forethought and planning. We are creating a plan of action; a road-map if you will. Put it in writing, draw pictures with circles and arrows, create a wall-sized vision board, save the plan as your device's wallpaper or desktop picture as a constant reminder - do whatever generates the greatest impact. Begin gathering the tools and resources to help us navigate our gluten-free journey. One of the most effective resources is a local support group; seek out your nearest group - inquire about their meetings (when, where, how often, etc.) - better yet, join and attend a meeting. Start building a library of trusted books and websites. This stage is about building our knowledge and confidence, preparing us for gluten-free success.

Stages of Change - Continued

Think about all the possible ways we cross paths with gluten. Cupboards, pantries, refrigerators, freezers, silverware drawers, cutting boards, toasters, kitchen utensils, counters, medication, hair and personal care products, family gatherings, parties, social functions, restaurants, medical and dental procedures - the list is staggering. All of these things and more need our attention. It's better to have a plan of action so we can be **PRO**active instead of **RE**active.

Some of our very first actions begin appearing.

The key to mastering this stage is a commitment to all the effort, planning, and researching. We must be ready to go all-in. Being “*sort of*” gluten-free is like being “*a little*” pregnant.

Action

It's game day! We move from thinking and planning to doing. We've done the risk/benefit analysis and committed to making the leap - we've made a plan, and now it's time to act! It's here where real change starts happening.

We go on a gluten-round up at home - seeking out and removing all sources of gluten. If we can't do a 100% GF house, we gather and store all the gluten in designated areas.

Empty and clean out every cabinet and drawer [see all the crumbs in the silverware drawer? YIKES!]

Clean the fridge and stove, get a new toaster, cutting boards, and colanders.

Join and actively participate in the local support group [if you haven't done so already]; we truly need that face-to-face support.

Read the mountain of gluten-free books sitting on the coffee table.

By following our initial action plan, we'll be making significant modifications to our routines, environments, our relationships, and of course ourselves. That's the whole idea, right?

As expected, this stage will require every ounce of commitment we can muster. We may find ourselves being pushed and pulled to the very limits. Sadly, some of this stress may come from those closest to us. We need to hold fast to the course we've plotted out; for our own health and wellbeing. If we find ourselves drifting or blown off-course refer back to the plan of action we created. Keep finding acceptable alternatives and focusing on our "cans" instead of "can not's"

More Information

GIG of ECW's
Gluten-Free Diet Boot Camp
is an excellent resource for
starting the GF lifestyle.

bit.ly/GIGECW_GFBootCamp

Stages of Change - Continued

It's necessary to acknowledge and celebrate the progress and victories along the way - no matter how seemingly insignificant we think they are. Anything that moves us forward toward our goal is a success! We also need to recognize the failures, not to chastise ourselves, but to learn from them. If we know why something happened, we can prevent it from happening in the future.

Maintenance

The maintenance stage is about sustaining the momentum we started in the beginning. At first glance, we think the hardest part of the change process is the initial startup. True it's tough, but maintaining the change long-term is the most challenging part of the process; it's also the most important.

At this point, our new lifestyle is on its way to being established, things are starting to become routine. Confidence is increasing. Certain memories of our past lives are starting to fade. Complacency is our enemy because of the possibility of slipping into our old lifestyle may be lurking in the background. Dramatic life events such as a job change, breakdown of a relationship, a death make us vulnerable. These events can beckon us back into our old habits.

While our original plan serves us well, we keep optimizing it to address past mistakes and handle any situations we didn't expect at the start. View these challenges as an opportunity to advance your skills, knowledge, and confidence. Perhaps more work on label reading is needed because small amounts of gluten are slipping below our radar despite our diligence. We didn't think about our church's communion hosts containing gluten. Our high school class reunion is coming up, maybe we could volunteer to be on the planning committee to have a voice in food options. This continued growth pushes us ever closer to the next stage.

Because of our new gluten-free lifestyle, our bodies are adjusting, adapting, and healing - mentally and physically. After gluten reactions subside, we may discover other problematic foods. Of course, this will require additional tweaks to our plan. The diets to obtain optimal health are as unique as our fingerprints. It can take some time resolve additional food sensitivities.

As we settle into maintaining our new life, we may struggle with keeping the fire lit; we run the risk of losing the intensity. If we haven't participated in a local support group already, make it a priority. Surrounding ourselves with like-minded individuals can help keep us motivated. Fellow members walk our walk, talk our talk, share the same struggles and joys.

Pro Tip

Get involved in planning activities. This gives us an opportunity educate and make positive changes from the "inside".

*Stages of Change - Continued***Termination/Adoption**

We started out telling ourselves "*I can't*", then "*I might*", followed by "*I will*", "*I am*", "*I am still*", and now finally "*I have*". It's been a long road on our way to change. After spending at least two years in the Maintenance stage, we find ourselves sliding into the Termination/Adoption stage. At this point, we don't have to think so hard about what to do; we know what to do. Our daily activities come to us naturally; they become second nature, almost as automatic as breathing. We have confidence in our knowledge and abilities. Sure, we may miss certain aspects of our former life, but the desire to return to that unhealthy and sickly life has dissipated. Our transformation from gluten-full to gluten-free has come to fruition. Our new life has become our "new normal." We started out as a caterpillar and came out the other side as a beautiful butterfly. Well done. A proud moment for sure.



This does not mean we stop our personal evolution process! No, we keep moving forward. We look for new and more adventurous goals. Now is the time to dream and plan for things we never thought possible in our former life. Perhaps we have a strong desire to share what we've learned to help others. Starting our own support group or volunteering at our current group is an excellent choice. Maybe we participate more in online discussion boards or Facebook groups. Possibly start our own blog or website. There are many ways to boost our gluten-free advocacy to the next level. Maybe our new goals have nothing to do with gluten. Perhaps we want to train for that 5K, 10K, or Half Marathon we've always wanted to do? What about music or voice lessons? Now would be a great time to start that writing project. The possibilities are only limited by our imagination.

Prochaska estimates only about 15 to 20 percent of the people make it to this stage. If you find yourself falling back into previous stages, don't panic. Be gentle with yourself. Figure what stage you're in - go back to your game plan, see if it needs a bit of tweaking and renew your commitment to moving forward. Ask for help. Never give up.

Relapse/Lapse

Not an official stage of Prochaska and Di Clemente's model but some valuable insights can be learned here.

Note: Repeated gluten exposure is a serious health risk for those with a gluten-related disorder.

Stages of Change - Continued

There is an important difference between relapse and lapse (also known as a slip). A lapse or slip is a rare, quick and temporary return to the behavior/lifestyle we've been trying to leave behind.

Example: while attending a birthday party, we have a piece of gluten birthday cake.

A relapse is a complete and total return.

Example: we tell ourselves the gluten-free lifestyle is too hard and go back to eating gluten.

Gluten is so pervasive in our society, no matter how hard we try, we will likely be faced with a gluten exposure at some point. We must be prepared and know how to deal with the inevitable. For this article, I am defining a relapse/lapse as any gluten exposure - be it blatant cheating or inadvertent/accidental.

Over the years, I've crossed paths with far too many people with celiac disease and non-celiac gluten/wheat sensitivity who willingly and knowingly cheat. Of course, they have their "justifications," but in the long-run, they are cheating themselves, and their loved ones. If you're new to the gluten-free lifestyle, I'll be crystal clear - **cheating is not an option for those with a gluten-related disorder**. Accidental/incidental exposure is different from blatant cheating. Regardless of how or why we consume gluten - the damage is the same; the difference here is the intent. We must be mindful of these mishaps, so we do not continually repeat them. If we peel back the layers, there's probably a fine line between repeated accidental/incidental exposures and cheating. To be caught by surprise the first time is understandable, but if the same situation happens repeatedly - it shouldn't be - we need to take a closer look at what's going on.

While we may not like visiting this stage, it can be beneficial to our overall success. It's important to view relapses/lapses not as failures, but rather another stage on our way to success. If we believe this set back is a failure, we're at risk of creating a self-fulfilling prophecy - undermining our efforts and making it easier to regress to our glutenous ways.

Lapses reinforce our need to be completely gluten-free. Once we start feeling better, we might doubt gluten's role in our poor health. While having that piece of pizza when hanging out with friends seemed like a good idea at the time, we are sorely and swiftly reminded why we began this transformation. We learn about resilience and persistence. When we are knocked down, we get back up and keep moving forward. Why? Because we deserve a better life and won't stop until we attain it. Because our friends and family deserve a better "us." Never give up.

More Information

GIG of ECW's **The Risks of Cheating** looks at the complications from repeated gluten exposures.

bit.ly/GIGECW_Cheating

Stages of Change - Continued

"Courage does not always roar. Sometimes courage is the quiet voice at the end of the day saying, 'I will try again tomorrow.'"

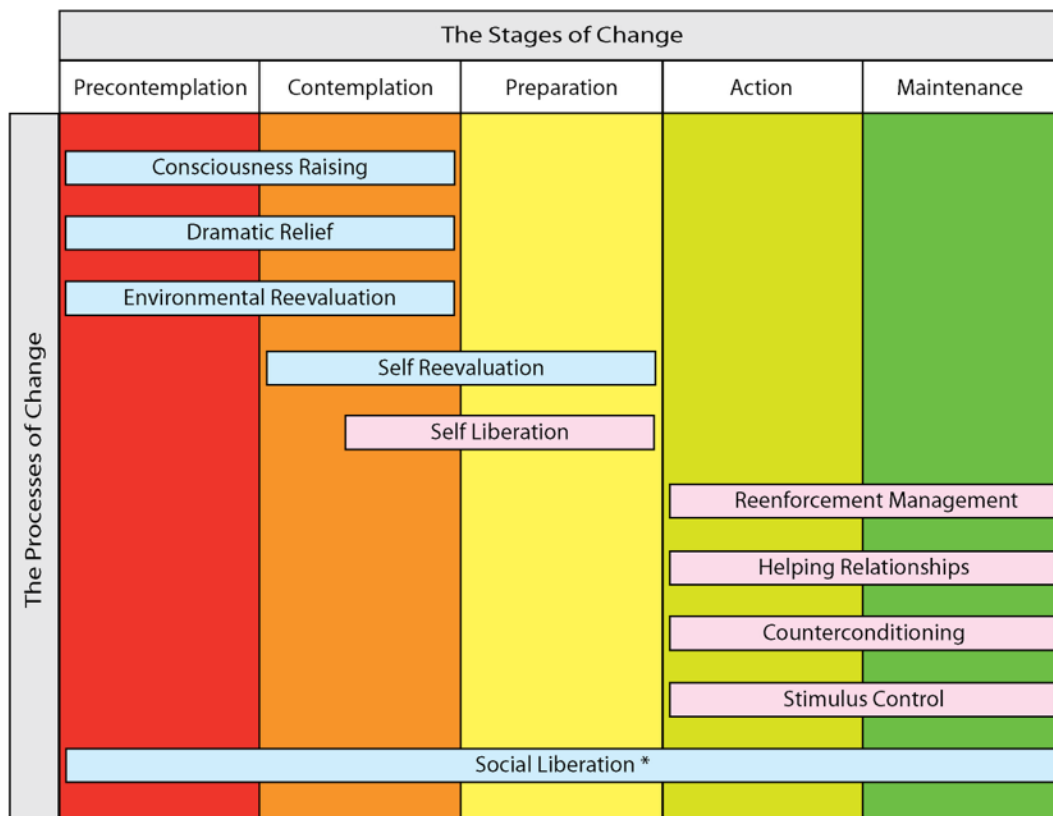
— Mary Anne Radmacher

Ten Processes of Change

The stages of change tell us *what* happens when we experience changes in thinking, emotion, and behavior, but the processes of change show us *how* the changes come to be. The implementation of these cognitive and behavioral activities are used to advance through the stages successfully.

The processes are divided into two categories - Experiential and Behavioral. The experiential processes use increases over time and peaks in the contemplation or preparation stage and decrease in the action and maintenance stages. The behavioral processes are used most in the action and maintenance stages. This makes a lot of sense - first, we change our thinking, then we change our behavior.

Processes and Stages of Change Integration



*The Social Liberation process is not stage dependent but found to be helpful across all stages.

Experiential Processes Behavioral Processes

*Stages of Change - Continued***1. Consciousness Raising [Increasing awareness] - Experiential**

Family members, medical professionals are telling us about our gluten intolerance and our need to be gluten-free. We start gathering information to get a better understanding of the new behavior required to remove gluten.

"I recall information people have given me about gluten and gluten-related disorders."

2. Dramatic Relief [Emotional arousal] - Experiential

The information we are receiving is concerning to us. We start to feel uncomfortable or possibly frightened. Maybe there's really something to this?

"I react emotionally to warnings about gluten and gluten-related disorders. Grandma died from a stomach-related illness, no one really knew what it was. Could it have been celiac disease and she didn't know it? If I don't go gluten-free will the same thing happen to me?"

3. Environmental Reevaluation [Social reappraisal] - Experiential

We're realizing our behavior is affecting those around us. The effect may be positive or negative depending on our choice.

"I realize that if I continue to eat gluten and remain sick, I won't be able to care for my children. By being gluten-free, I am able to fully participate in life instead of watching it from the sidelines."

4. Self Reevaluation [Self-reappraisal] - Experiential

We begin to look inward and assess how our gluten-free lifestyle is affecting us. We take note of how we are feeling physically and emotionally

"I feel so much better when I'm gluten-free both physically and emotionally. I know I must remain so for life. When I cheat, I am disappointed in myself for putting my health and my family at risk."

5. Social Liberation [Environmental opportunities] - Experiential

As we delve deeper into the gluten-free lifestyle, we find more people are aware of gluten-related disorders than we first expected. Grocery stores have dedicated aisles for gluten-free products. Select restaurants, bakeries, hotels, resorts, etc. have gluten-free offerings or specifically cater to

Stages of Change - Continued

the gluten-free community. [Note: Awareness of gluten and gluten-related disorders is growing. It's better than it used to be, but still has a long way to go.]

"I find mainstream awareness is making it easier to be gluten-free. Family members who have been gluten-free for years tell me it's much easier to be gluten-free today than it was five or ten years ago."

6. Stimulus Control [Re-engineering] - Behavioral

By removing gluten from our homes [or at least moving and re-arranging it], we begin the mental re-wiring process. If gluten isn't there, we won't be tempted to eat it. Instead, we replace it with healthy, gluten-free alternatives

"Whew! I feel more comfortable in my home now that gluten has been removed or sequestered. I'm also learning how to cope with gluten in situations where I don't have complete control [workplace, public venues, etc.]."

7. Helping Relationship [Supporting] - Behavioral

Having support is crucial to a successful transition. We need trusted individuals who are caring, compassionate, and willing just simply to listen.

"I have a spouse/friend/family member who is tremendously supportive. Always willing to listen and be my gluten-free champion."

"My spouse/family members are horrible. They are unsupportive and at times overtly try to derail my efforts. Thank goodness for friends and my local support group members. They understand - they 'get it' - they keep me sane."

8. Counterconditioning [Substituting] - Behavioral

Grabbing a snack or something to eat can be one of those "autopilot" type actions. It's easy to snag a bag of chips, a cookie, or candy as we walk past it.

Instead of stocking our kitchens with glutenous foods we supply it with healthy, gluten-free alternatives. We must be mindful, in today's gluten-free environment it's easy to swap out processed crappy glutenous foods with processed crappy gluten-free foods. Now is the time to make better choices - fresh fruits, veggies & gluten-free hummus, walnuts, almonds, cashews, hard-boiled eggs, high-quality gluten-free dark chocolate (Endangered Species Chocolate Bars).

Stages of Change - Continued

"I wasn't sure about it at first, but I find myself genuinely liking veggies and hummus as a snack."

9. Reinforcement Management [Rewarding] - Behavioral

Reinforcement Management renders consequences based on decisions and actions. While reinforcement can include the use of penalties, rewards tend to yield better results over punishments. A combination of cognitive and behavioral reinforcements, positive self-statements, and external recognition reinforce positive behavior and increase the likelihood of repeated positive behavior.

While gluten-free treat food may seem like a reasonable reward option, it's not recommended to use any food as a reward (or punishment). Suggestions: Guilt-free "You Time," massage - mani/pedicure, a movie, museum trip, shopping trip, ballgame.

"I really rocked it this week. My skills, knowledge, and confidence are growing. I am amazing! I found a gluten-free labeled food containing barley due to my label reading skills. I alerted the appropriate parties to the labeling error. My family and friends are impressed with my progress and praise me - this inspires and motivates me. I think I'll purchase that Wusthof Chef's knife, I've been eyeing up."

10. Self Liberation [Committing] - Behavioral

We believe change is needed and commit to making that change.

"I can no longer ignore the facts. I have come to realize that I can and must be gluten-free. I know that it will not be easy, but I am ready to make the change for myself and loved ones."



***November's newsletter will feature a companion article
"Gluten-Free Success"***

Medication Resources



"Better Living Through GF Chemistry"

A collection of resources to help navigate the pharmaceutical world.

http://bit.ly/GIGECW_GFChemistry



"Medications and the Gluten-Free Diet"

"Staying gluten-free involves more than just dietary changes. Medications must also be evaluated for their gluten content."

<http://bit.ly/2LPpDj8>

Gluten in Medications

We had an impromptu discussion at our 9th annual gluten-free cookout this year about gluten in medications.

Yes, medications (prescription or over-the-counter) must be checked for gluten too. Verify every RX re-fill as pharmacies can change the manufacturer of your medication without notice.



It started due to conversation about [an FDA mandated recall of a thyroid medication](#) by Westminster Pharmaceuticals. Active ingredient supplier Sichuan Friendly Pharmaceutical Co based in the Sichuan Province of China failed a recent US Food and Drug Administration inspection for not meeting Good Manufacturing Process standards. No adverse effects from these medications have been reported as of August 9th, 2018

Note: if you take this medication, call your pharmacy.

As luck would have it, July's issue of Gluten Intolerance Group's Celebrate-Gluten Free e-zine contains an excellent article on gluten in medications. I wanted to share it with you, so I received permission to include Ms. O'Rourke's article in our newsletter. Thank you GIG!

How do you get your own copy of "Celebrate Gluten-Free" e-zine? Become a Gluten Intolerance Group member [free to join]. You will receive an issue every six weeks - delivered right to your email's InBox. No need to go out in to rain, sleet, snow, or dark of night to buy it.

In addition to the magazine, your GIG membership will provide you access to the latest food industry information, exclusive contents & benefits, and coupons & discount codes to some of your favorite gluten-free brands.



[Click here to become a GIG Member now!](#)

<http://bit.ly/GIG-Membership>

Gluten in Medications - Continued***Gluten in Medications***

*By Lola O'Rourke MS RD
Gluten Intolerance Group
Education Supervisor, Development & Outreach*

The majority of drug manufacturers do not clearly label their products or packaging with information regarding the gluten content of their drug, and labeling on medications can be difficult to understand. Wondering why medications can't simply be tested and labeled regarding gluten-free status? The answer is that to date, none of the gluten testing methods regularly used for food have been validated for use in medications. While certain types of foods can be grouped into categories, such as "baked goods," with the assumption that a test that works in cookies will also work in brownies, medications present a much higher hurdle for test kit manufacturers. Kits would need to be validated for use on each individual medication, since each would have different active ingredients that might affect how the test would work.

In addition, some medications may have necessary characteristics, such as pH extremes or enzymatic activity, that would make them unsuitable for testing using current methodology.

Many pharmaceuticals contain non-active components called "excipients" which serve various functions, including provision of a particular dosage, and contributing to stability or delivery mechanism of the active medication. These excipients are often made from corn, potato, or tapioca. However, less commonly, some may be derived from wheat or, rarely, barley. In addition, consumers may be concerned about cross-contamination with gluten during manufacturing. The FDA has taken steps to address the difficulties gluten-free consumers face in identifying safe medications. In late 2017 the agency issued a draft document on labeling recommendations for medications; as of June, 2018 the guidelines were not yet finalized. If and when such guidelines are finalized, consumers may have easier access to information about the gluten content of medications. To link to FDA document go to www.fda.gov and search for "*Gluten in Drug Products and Associated Labeling Recommendations.*"

More Information

FDA's - Draft Guidance

*Gluten in Drug Products and
Associated Labeling
Recommendations Guidance
for Industry.*

<http://bit.ly/2D8uOHX>

Gluten in Medications - Continued

In the meantime, following are relevant considerations and facts:

If you have doubts about the gluten-free status of a medication, consult with your pharmacist and/or check with the manufacturer of the product.

The following excipients could be derived from wheat or barley:

Starch	Dextrates
Pre-gelatinized starch	Cyclodextrins
Dextrimaltose	Maltodextrin
Dextrin	Sodium starch glycolate

According to the draft guidance issued by the FDA:

On ingredients derived from gluten-containing grains

“...most oral drug products are not expected to contain ingredients derived from wheat, barley, or rye.”

“The likelihood of them including more than one such ingredient is even less. If a drug included an ingredient derived from wheat, barley, or rye, the ingredient would most likely be wheat-derived.”

“...even if a drug contains a wheat-derived ingredient, the amount of gluten potentially contributed to a unit dose of an oral drug product (unless that ingredient is wheat gluten itself or wheat flour) is expected to be less than 0.5 mg, as a high estimate.” (Note from GIG: 0.5 mg is considered to be a safe quantity.)

“Thus, it is expected that the amount of gluten potentially present in a unit dose of an oral drug product is less than the amount of gluten that could potentially be found in a single serving of a cookie (30 grams) labeled gluten-free...”

“...the amount of gluten estimated to be potentially present in a unit dose of an oral drug product... is significantly less than the range at which gluten is estimated to be present in a gluten-free diet.”

This leads FDA to conclude that individuals who respond well to a gluten-free diet are at low risk of experiencing problems as a result of the possible presence of gluten in a drug product.” (Emphasis added by GIG.)

On cross-contamination

“...good manufacturing practice” (CGMP) regulations for drug products reflect an obligation to prevent contamination of a drug being processed.” The FDA also states that it is likely that any gluten present due to contamination would be present only in very small amounts, likely well below the limits of detection in current analytical test methods.

Gluten in Medications - Continued

Consider the case of Advil®, a product often questioned by gluten-free consumers. The Advil® website states the following regarding gluten-free status of the product (www.advil.com/i-am-allergic-gluten-it-all-right-me-take-advil-products-o):

“Gluten is not added to any Advil® product during the manufacturing process. However, we cannot guarantee that minute amounts of gluten or gluten derivatives are not contained in raw materials obtained from various suppliers for our manufacturing process since the end product is not tested for gluten. You should check with your doctor if you have any concerns about taking any Advil® product.”

Clearly this type of information raises questions in the minds of gluten-free consumers. GIG’s view on this matter is as follows: when a manufacturer states that their product contains no intentionally-added gluten containing ingredients, and taking into consideration the fact that the ingredients in question are highly processed, and in addition are present only in very small amounts, a product is likely safe for the vast majority of gluten-free consumers. However, until such time as manufacturers provide clear information on gluten content of their products, consumers must make their own individual decisions regarding acceptability of specific medications.

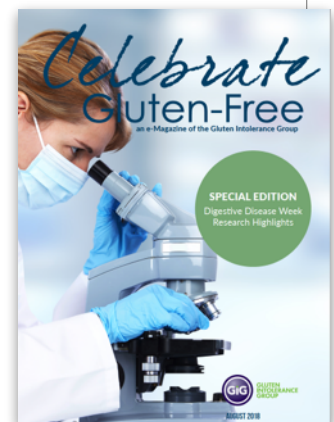


***Celebrate Gluten-Free
Special Edition:
Digestive Disease Week
Research Highlights***

Digestive Disease Week is the world’s leading educational forum for healthcare professionals working in gastroenterology and related fields. Check out GIG’s excellent summary!

“This year at the annual Digestive Disease Week (DDW) conference in June, there was an astounding amount of new and cutting edge research presented pertaining to the study of celiac disease, non-celiac gluten sensitivity, non-celiac wheat sensitivity, irritable bowel diseases, new approaches to potential treatments for celiac disease, the gluten-free diet, and many more relevant topics. We’ve compiled summaries of some of the influential presented abstracts and research highlights from the conference.”

[Celebrate Gluten-Free - DDW Highlights](http://bit.ly/GIG-CGF-DDW2018)
<http://bit.ly/GIG-CGF-DDW2018>

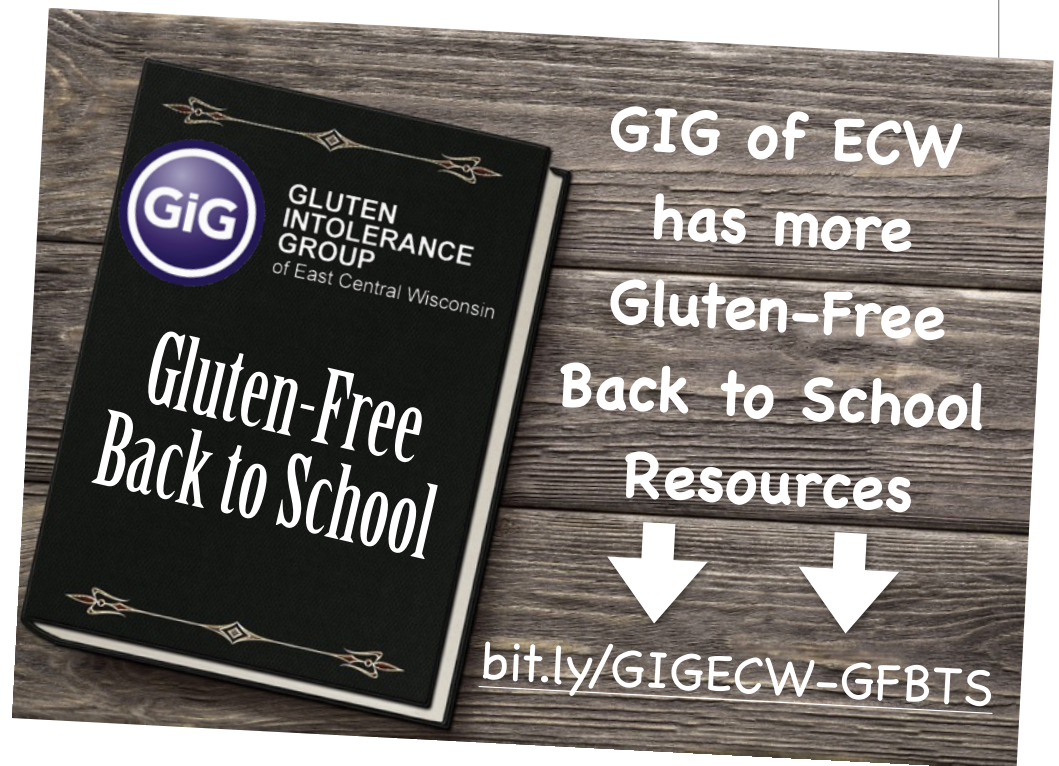




If you have a gluten-free child



this information will help you navigate the school year





RASPBERRY JAM BARS

Ingredients

3/4 cup of softened butter
 1 1/2 cups light brown sugar
 2 large eggs
 2 tsp pure vanilla extract (Penzey's)
 2 cups GF all-purpose flour
 3/4 tsp GF baking soda
 1/2 tsp salt
 3 cups Gluten-Free Oats (GF Harvest Organic Rolled Oats - certified GF and purity protocol)

Filling:

1 3/4 cups raspberry jam or preserves (Homemade).

Recipe: Peggy Klapperich

If you are making this recipe for a gluten-free guest, please read our Guide to Gluten Cross Contamination

http://bit.ly/GIGECW_GlutenContamination

Most medical professionals say gluten-free oats can be tolerated in limited amounts [up to 1/2 cup per day for adults]. They also suggest restricting oats for one year for those newly diagnosed.

Some celiacs will react to the protein [avenin] found in oats, just as they react to the proteins in wheat, barley, rye.

If you choose to add oats to your diet, please make sure they are gluten-free purity protocol oats.

To learn more, please read our oats article:

<http://bit.ly/GIGECW-PureOats>

Directions:

Cream together butter and sugar. Beat in eggs & vanilla extract until fluffy. Mix in flour, salt & baking soda - mix well.

Add in 2 cups of oats.

Press 2/3 of oatmeal mixture into a greased 9x13 pan. Spread with jam.

Add remaining cup of oatmeal to remaining batter. Crumble this mixture over the jam layer.

Bake at 350 for 25-35 minutes.

Cool & cut into squares.





SPAGHETTI SAUCE

Ingredients

2 - 28oz cans Dei Fratelli Chopped Italian Tomatoes

1 - 28oz can Dei Fratelli Diced Tomatoes

2 - 15oz cans Dei Fratelli Tomato Sauce

1 - 12oz can Everyday Essentials Tomato Paste

1 - Medium Sized fresh tomato (optional - had one on hand)

2 cups Cherry Tomatoes - halved (optional - had some on hand)

1 - Large (or 2 Medium) White Onion - diced

1 - 8oz package of Mushrooms - diced

2 to 3 - Medium sized Zucchini

2 to 3 - Medium sized Yellow Squash

2 - Medium sized carrots - peeled and fine grated.

Minced garlic (you decide how much)

Penzey's Dried Oregano

Fresh Thyme (stripped from stem)

Fresh Basil (several leaves fine chopped)

Salt & Pepper

Extra Virgin Olive Oil

2 - lbs Ground Chuck.

The ingredients used above will fill a 7QT pot. Scale your batch accordingly.

We freeze measured amounts of sauce in a container - enough for 3-4 servings.

Recipe: Al Klapperich

If you are making this recipe for a gluten-free guest, please read our Guide to Gluten Cross Contamination

http://bit.ly/GIGECW_GlutenContamination

FYI - If you make this recipe to save money and/or time - it will do neither. It will give you the satisfaction of making a great homemade product. Truly a labor of love.

Directions:

Place a 7QT pot on medium heat. Add 2 tablespoons of olive oil to pot. Add carrot, 1/2 of diced onion, zucchini, squash, 1/3 of diced mushrooms, and garlic. Season with salt, pepper, & oregano. Stir.

Sauté' until veggies are tender (about 5 - 10 minutes). You might have to add more EVOO during sauté time. Onions will start caramelize. Season with salt & pepper to taste.

Add about a teaspoon of fresh thyme and tablespoon of fresh basil.

Add all tomato products and 1/3 of diced mushrooms to pot. Using an immersion blender, blend the sauce to a texture of your liking. Reduce heat to a simmer and cover with a screen and stir often. The goal is to reduce the water content and concentrate the tomato mixture. This process will take 2 to 3 (or more) hours. Place a teaspoon of the sauce on a plate to see how much liquid spreads out from the edges. I don't like much water in my sauce, so there's very little. Season to taste with salt and pepper after it's done reducing. Salting too much before reduction will also concentrate the salt. Add a sprinkle of dried oregano and more fresh thyme if you like. Stir

While tomato/veggie mixture is reducing, brown the ground chuck.

In another pan sauté the remaining diced onions, remaining diced mushrooms, and some garlic until soft. Salt & Pepper to taste.

Add ground chuck. Salt and pepper to taste. Sprinkle of dried oregano. Break up and stir. Drain excess grease. If you are freezing the entire batch - allow to cool before adding to sauce. If you plan to use the sauce right away - add meat to sauce if it's reduced to your liking.

Cool before freezer packaging. Fill sink with enough cold water ice to reach 1/2 up the sauce pot when placed into sink. Stir every few minutes.

