

Autointoxication

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The symptoms associated with altered bowel function have far-reaching effects throughout the body in tissues and organs other than the bowel itself. Frequently, dysfunctions here are involved in many chronic degenerative disorders.

Infrequent bowel movements indicate slow movement of fecal material through the intestine, allowing more time for the bacterial decomposition and absorption of water from the bowel. As a result, the fecal material becomes very dry and hard. This slow movement allows for autointoxication as the waste products of bacterial and fungi/yeast must be absorbed into the blood, detoxified in the liver, and sent to the kidney for elimination.

While this process may sound efficient, it is actually a burdensome compensation by the body in an attempt to maintain health. The waste products formed in the bowel by bacterial or fungal action on inadequately digested food (i.e., food that could not be absorbed into the body and used for nourishment) cause an inflammatory reaction in the mucosal lining of the bowel. This triggers an immune response that is associated with the so-called "leaky gut syndrome" and fibromyalgia. These conditions have deservedly received a great deal of attention in the past few years, but not enough has been paid to their association with poor digestion. If you suffer from any inflammatory disorder, it is likely that your immune problems are associated with autointoxication and inadequate digestion. It is becoming increasingly apparent that chronic degenerative diseases (chronic inflammatory states) are evidence of food enzyme deficiency. The 1988 Surgeon General's Report on Health and Nutrition stated unequivocally that chronic degenerative diseases are dietary related.

The body uses enzymes as its main line of defense against any bacterial, viral, chemical irritant, or inflammation from a mechanical source. People with symptoms of fever, redness, swelling, pain, or soreness demonstrate signs of food enzyme deficiency. This deficiency may not be the cause of the disease process, but a deficiency is certainly present.

The inability to adequately digest food, either because of enzyme deficiency or overloading the digestive system with excessive amounts of food, challenges the body. Food particles not digested well enough to be absorbed across the gut wall pass down the alimentary canal where they putrefy, forming chemicals that irritate the mucosal lining of the G.I. tract. Inflammation of the mucous membranes increases permeability of the gut wall to larger molecules. This allows partially digested food particles to enter the blood, where they cannot be utilized by the body as food, but must be attacked as a foreign invader. Dietary modification and inclusion of food enzyme supplements to enhance digestion and assimilation must be considered as part of any program to restore normal function and relieve symptoms of chronic inflammatory disorders.