The Dark Side of Wheat

A Critical Appraisal of the Role of Wheat In Human Disease

by Sayer Ji

Foreword by Dr. Ron Hoggan, author of "Dangerous Grains"

⁴⁴ Here is my promise to you, dear reader: There is a whole new world revealed through Sayer Ji's work. ... by the end of your reading, you will wonder how your prior view could have been so simplistic and, perhaps, misguided. ~ Dr. Ron Hoggan ³⁷



Part I: New Perspectives on Celiac Disease & Wheat Intolerance Part II: The Critical Role of Wheat Lectin in Human Disease Part III: 90-Page Quick Reference to the Research on the National Library of Medicine Linking Wheat to 120+ Diseases

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~ A Critical Appraisal of the Role of Wheat in Human Disease ~

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Having studied gluten grains and their impact on human health for almost 20 years now, the surprises caused by new insights are more and more rare. Nonetheless, when I read about Sayer Ji's startling perception of wheat germ agglutinin (WGA), and the several pathways by which it can impact our mental and physical health, partly due to its ability to cross protective barriers of the gut and the brain, I was, at first, very skeptical. Further investigation revealed that he really was onto something new. And the implications of this new understanding are, to say the least, dramatic. His work raises legitimate questions about one facet of gluten grains that has largely been ignored by the gastrointestinal research community. It opens windows of understanding. And it provides a different vantage point on these perplexing problems. Here is my promise to you, dear reader: There is a whole new world revealed through Sayer Ji's work. Read on. Enjoy. Puzzle it out. And by the end of your reading, you will wonder how your prior view could have been so simplistic and, perhaps, misguided.

Sir Isaac Newton's famous metaphor (perhaps quoting others) said something to the effect that we see further, not because of any special endowment of our own, but because we are standing on the shoulders of giants. After reading Sayer's work on WGA, I felt as if I had just been boosted to a higher plane from which I could see and understand much, much more. Sayer's insights continue to shape and inform much of my effort to understand the various impacts of grains on human health.

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Part I: New Perspectives On Celiac Disease & Wheat Intolerance

By Sayer Ji

The globe-spanning presence of wheat and its exalted status among secular and sacred institutions alike differentiates this food from all others presently enjoyed by humans. Yet the unparalleled rise of wheat as the very catalyst for the emergence of ancient civilization has not occurred without a great price. While wheat was the engine of civilization's expansion and was glorified as a "necessary food," both in the physical (staff of life) and spiritual sense (the body of Christ), those suffering from celiac disease are living testimony to the lesser known dark side of wheat. A study of celiac disease and may help unlock the mystery of why modern man, who dines daily at the table of wheat, is the sickest animal yet to have arisen on this strange planet of ours.

THE CELIAC ICEBERG

Celiac disease (CD) was once considered an extremely rare affliction, limited to individuals of European origin. Today, however, a growing number of studies indicate that celiac disease is found throughout the US at a rate of up to 1 in every 133 persons, which is several orders of magnitude higher than previously estimated.¹

These findings have led researchers to visualize CD as an iceberg. The tip of the iceberg represents the relatively small number of the world's population whose gross presentation of clinical symptoms often leads to the diagnosis of celiac disease.² This is the classical case of CD characterized by gastrointestinal symptoms, malabsorption and malnourishment. It is confirmed with the "gold standard" of an intestinal biopsy. The submerged middle portion of the iceberg is largely invisible to classical clinical diagnosis, but not to modern serological screening methods in the form of antibody testing.³ This middle portion is composed of asymptomatic and latent celiac disease as well as "out of the intestine" varieties of wheat intolerance. Finally, at the base of this massive iceberg sits approximately 20-30% of the world's population – those who have been found to carry the HLA-DQ locus of genetic susceptibility to celiac disease on chromosome 6.⁴

The "Celiac Iceberg" may not simply illustrate the problems and issues associated with diagnosis and disease prevalence, but may represent the need for a paradigm shift in how we view both CD and wheat consumption among non-CD populations.

First let us address the traditional view of CD as a rare, but clinically distinct species of genetically-determined disease, which I believe is now running itself aground upon the emerging, post-Genomic perspective, whose implications for understanding and treating disease are Titanic in proportion.

IT IS NOT THE GENES, BUT WHAT WE EXPOSE THEM TO

Despite common misconceptions, monogenic diseases, or diseases that result from errors in the nucleotide sequence of a single gene are exceedingly rare. Perhaps only 1% of all diseases fall within this category, and Celiac disease is not one of them. In fact, following the completion of the Human Genome Project (HGP) in 2003 it is no longer accurate to say that our genes "cause" disease, any more than it is accurate to say that DNA is sufficient to account for all the proteins in our body. Despite initial expectations, the HGP revealed that there are only 30,000-35,000 genes in human DNA (genome), rather than the 100,000 + believed necessary to encode the 100,000 + proteins found in the human body (proteome).

The "blueprint" model of genetics: one gene \rightarrow one protein \rightarrow one cellular behavior, which was once the holy grail of biology, has now been supplanted by a model of the cell where *epigenetic* factors (literally: "beyond the control of the gene") are primary in determining how DNA will be interpreted, translated and expressed. A single gene can be used by the cell to express a multitude of proteins and it is not the DNA itself that determines how or what genes will be expressed. Rather, we must look to the epigenetic factors to understand what makes a liver cell different from a skin cell or brain cell. All of these cells share the exact same 3 billion base pairs that make up our DNA code, but it is the epigenetic factors, e.g. regulatory proteins and posttranslational modifications, that make the determination as to which genes to turn on and which to silence, resulting in each cell's unique phenotype. Moreover, epigenetic factors are directly and indirectly influenced by the presence or absence of key nutrients in the diet, as well as exposures to chemicals, pathogens and other environmental influences.

In a nutshell, what we eat and what we are exposed to in our environment directly affects our DNA and its expression.

Within the scope of this new perspective even classical monogenic diseases like Cystic Fibrosis (CF) can be viewed in a new, more promising light. In CF many of the adverse changes that result from the defective expression of the Cystic Fibrosis Transmembrane Conductance Regulator (CFTR) gene may be preventable or reversible, owing to the fact that the misfolding of the CFTR gene product has been shown to undergo partial or full correction (in the rodent model) when exposed to phytochemicals found in turmeric, cayenne, and soybean.⁵ Moreover, nutritional deficiencies of seleniun, zinc, riboflavin, vitamin e, etc. in the womb or early in life, may "trigger" the faulty expression or folding patterns of the CFTR gene in Cystic Fibrosis which might otherwise have avoided epigenetic activation.⁶ This would explain why it is possible to live into one's late seventies with this condition, as was the case for Katherine Shores (1925-2004). The implications of these findings are rather extraordinary: epigenetic and not genetic factors are primary in determining disease outcome. Even if we exclude the possibility of reversing certain monogenic diseases, the basic lesson from the post-Genomic era is that we can't blame our DNA for causing disease. Rather, it may have more to do with what we choose to expose our DNA to....

Part II: The Critical Role of Wheat Lectin In Human Disease

By Sayer Ji

Now that celiac disease has been allowed official entry into the pantheon of established medical conditions, and gluten intolerance is no longer entirely a fringe medical concept, the time has come to draw attention to the powerful little chemical in wheat known as 'wheat germ agglutinin' (WGA) which is largely responsible for many of <u>wheat's pervasive</u>, and <u>difficult to diagnose</u>, ill <u>effects</u>. Not only does WGA throw a monkey wrench into our assumptions about the primary causes of wheat intolerance, but due to the fact that WGA is found in highest concentrations in "whole wheat," including its supposedly superior sprouted form, it also pulls the rug out from under one of the health food industry's favorite poster children.

Below the radar of conventional serological testing for antibodies against the various gluten proteins and genetic testing for disease susceptibility, the WGA "lectin problem" remains almost entirely obscured. Lectins, though found in all grains, seeds, legumes, dairy and our beloved nightshades: the tomato and potato, are rarely discussed in connection with health or illness, even when their presence in our diet may greatly reduce both the quality and length of our lives.

Although significant progress has been made in exposing the dark side of wheat over the past decade, gluten receives a disproportionate share of the attention. Given that modern bread wheat (Triticum Aestivum) is a hexaploid species containing six distinct sets of chromosomes capable of producing well over 23,000 unique proteins, it is not surprising that we are only now beginning to unravel the complexities of this plant's many secrets. [1] What is unique about the WGA glycoprotein is that it can do *direct* damage to the majority of tissues in the human body without requiring a specific set of genetic susceptibilities and/or immune-mediated articulations. This may explain why chronic inflammatory and degenerative conditions are endemic to wheat-consuming populations even when overt allergies or intolerances to wheat gluten appear exceedingly rare. The future fate of wheat consumption, and by implication our health, may depend largely on whether or not the toxic qualities of WGA come to light in the general population.

Nature engineers, within all species, a set of defenses against predation, though not all are as obvious as the thorns on a rose or the horns on a rhinoceros. Plants do not have the cell-mediated immunity of higher life forms, like ants, nor do they have the antibody driven...

Topic: Wheat

