



# Guess What Came to Dinner?: Parasites and Your Health

By Ann Louise Gittleman

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In this completely revised and updated edition of the most authoritative book on the subject for consumers, renowned nutritionist Ann Louise Gittleman gives the information you need to know to ward off unwelcome organisms. *Guess What Came to Dinner?* explains what parasites are, why they are harmful, and how they are spread. Most importantly, she offers tips on creating a parasite-proof diet and lifestyle. *What Came to Dinner?* is the indispensable guide to protecting yourself and your loved ones from this hidden epidemic.

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## **Editorial Review**

From Publishers Weekly

A nutrition director for the American Academy of Nutrition and the author of the bestseller *Beyond Pritikin*, Gittleman has exhaustively studied the parasite world, particularly its relation to human health and nutrition. Although she tackles the subject of parasitic illnesses and their diagnosis, treatment and prevention with knowledge and a credible background, her book offers in ten chapters what could have been done in a single long but concise one. In a hit-and-run style, the author touches on a specific subject, be it day care centers, household pets, or travel, only to drop it and repeat the information in another section of the book. This repetition, combined with constant footnotes, disrupts and clutters a reading of the book. Readers without some background in clinical parasitology may also have a hard time staying with Gittleman through the technical section that serves as a reference guide to the individual parasites. The chapter on prevention provides the most accessible information. There, the author gives clear and usable instructions on avoiding parasite-induced illnesses via good personal hygiene, proper infant and child care, sensible sexual practices, sanitary animal care, careful travel practices and safe water usage and food handling. The book wraps up with an easy-to-understand glossary, although it lacks necessary pronunciation symbols, and a thorough, but meant-for-health-professionals, appendix on drug treatment of parasitic infections.

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### About the Author

Ann Louise Gittleman is the award-winning author of more than 30 twenty-five books on health and healing, including the *New York Times* bestsellers *Before the Change* and *The Fat Flush Plan*. Acknowledged as a health visionary, she has been seen on **Dr. Phil**, **The View**, **Extra**, **Good Morning America**, PBS, and CNN. Gittleman holds a Ph.D. in holistic nutrition and a master's degree in nutrition education, and is a certified nutrition specialist.

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### **introduction**

Do you feel tired most of the time? Are you experiencing digestive problems—gas, bloating, constipation or diarrhea—that come and go but never really clear up? Do you suffer from food sensitivities and environmental intolerances? Have you developed allergic-like reactions and can't understand why? Are you depressed? Do you have difficulty gaining or losing weight no matter what you do? Have you even tried a yeast control program that helped to some degree but know you can't stay away from bread, alcohol, fruit, and fruit juices all your life? Do you sense something is not quite right with you but just can't figure out the cause—and, for that matter, neither can your doctor?

If these symptoms and feelings sound familiar, then you may be an unsuspecting victim of the parasite epidemic that is affecting millions of Americans. It is an epidemic that knows no territorial, economic, or sexual boundaries. It is a silent epidemic of which most doctors in this country are not even aware. Yet, according to parasite expert and medical researcher Louis Parrish, M.D., at least eight out of ten of his patients have some kind of parasite infection.

Here is the untold story that finally solves the mystery of many chronic health disorders. It is a story that began for me back in 1974 when I stumbled upon the connection between parasites and disease. In that year,

at a special class for the study of “scientific nutrition” in Albuquerque, New Mexico, instructor Hazel Parcells, D.C., N.D., Ph.D., introduced the topic of worms in a most visual manner. She showed the class various preserved specimens of internal visitors that had been passed by patients undergoing treatment for a wide array of unresolved health problems. I have never forgotten the sight of those little bottles and what was in them. For the next two years, I refused to eat in any restaurants—for reasons you will read about later in this book. But most important, what I learned from Dr. Parcells was that worms, from the microscopic amoeba to the feet-long tapeworm, are a fundamental root cause of disease and are associated with health problems that go far beyond gastrointestinal-tract disturbances.

Since then, in my own nutritional practice, I have observed that many unexplained health conditions often disappeared when parasites were eliminated from the body. These conditions included environmental illness, skin problems, digestive problems, excessive fatigue, hypoglycemia, arthritic-like aches and pains, long-standing obesity, and even depression. Painstaking examination of my clients’ food habits, favorite ethnic restaurants, lifestyle, and travel records often revealed the source of infection. I was amazed to find that a patient’s travel history was often the missing key to unlocking the underlying cause of persistent flu-like symptoms, allergy, fatigue, gas, and intermittent constipation and diarrhea. Frequently, symptoms started shortly after a vacation to tropical islands, Asia, or South America or a camping trip in Colorado.

A central problem in solving the parasite puzzle is that many parasite-based illnesses can mimic diseases more familiar to the doctor. Roundworm infection, for example, has been misdiagnosed as peptic ulcer, and amoebic colitis is often mislabeled as ulcerative colitis. Chronic fatigue syndrome and yeast infection may really be a case of chronic giardiasis, while diabetes and hypoglycemia can be caused by tapeworm infection. The majority of doctors in the United States do not recognize parasites and therefore do not diagnose them. This may be due to the fact that parasitology courses in medical schools are usually offered by a tropical diseases department, giving rise to the notion that parasites are primarily a foreign concern. Furthermore, the inability of technicians to accurately diagnose the problem compounds the issue. The parasites’ own reproductive cycle, in which eggs or cysts are passed at irregular intervals, also makes accurate diagnosis tricky.

Today, parasites and the diseases they cause are no longer found just in faraway places like the tropics—places that conjure up images of poverty and poor hygiene. Some parasites, like giardia and pinworms, are, in fact, found predominantly in temperate climates. These organisms as well as others have become more prevalent in America because of a number of modern-day factors discussed throughout this book.

The idea of harboring a living organism inside our bodies is repulsive and unpleasant to dwell upon, but learning all we can about our unwelcome boarders is the only way we can discover enough to evict them and rid ourselves once and for all of their presence. This is one situation in which ignorance is definitely not bliss.

### **knowledge is the key**

In this book I will tell you:

- which twentieth-century factors have increased the parasite risk in the United States.
- what parasites look like and what symptoms to look for.
- how parasites are transmitted through food, water, animals, sexual practices, and day-care centers.
- how parasitic infections should be diagnosed.

In the following chapters, you will find answers to such questions as:

- What are the most effective natural and medical treatments for parasitic infection?
- How can my family and I prevent infection and reinfection?
- What lifestyle and travel precautions should I take?

The answers to these questions and many more may surprise and even shock you. But this book was written to do just that—awaken you, your family, and your doctor to the fact that parasites are alive and well and thriving in America today. I wrote this book because as a health-care professional I am worried...worried that so many individuals are not well, even though they are following a balanced diet and a good exercise program, and are unable to find the reason. I am convinced, after dealing with patients for more than eighteen years, that one of the major reasons for the chronic ill health we are seeing today is none other than parasites.

After you read this book, I urge you to share it with as many people as you can. Pass it on to your neighborhood health clinic, the hospital emergency room, your personal physician, and to veterinarians, day-care centers, outdoor clubs, restaurant owners, and travel agents. Education is the most potent weapon against the parasite epidemic. It is my hope that *Guess What Came to Dinner?* will become a wake-up call for every individual living in America today.

## 1

### **what you don't know can hurt you**

**April 1999:** A tiny parasitic worm that bores into tadpoles and disturbs cells may be the cause of a large numbers of mysterious frog-leg deformities.

**September 1998:** The parasite *Cryptosporidium* causes widespread water contamination in Sidney, Australia.

**May 1997:** Business executives in Houston, Texas, fall prey to the parasite *cyclospora* after eating infected produce.

**April 1997:** Centers for Disease Control estimates between 100,000 and 1,000,000 cases of *Giardia lamblia* occur each year.

**October 1994:** NBC television program *Dateline* reports that unnecessary deaths and illnesses throughout New York City are the fault of *cryptosporidium*-contaminated water.

**November 1993:** According to a National Institute of Allergy and Infectious Disease (NIAID) press release, parasites in the U.S. affect millions.

**Spring 1993:** As reported by the NIAID, 100 deaths and more than 400,000 residents become seriously ill in Milwaukee, Wisconsin, after the parasite *cryptosporidium* contaminated the water supply.

**January 1993:** Several deaths and hundreds of others fall ill to an *E. coli* outbreak in Washington due to fast-food hamburgers.

**September 1992:** Pork tapeworm cysts show up on the brains of four orthodox Jews: A feature story by the Associated Press zeroes in on the mystery.

**Spring 1991:** U.S. suspects Gulf War GIs are carrying the parasitic disease *leishmaniasis* and stops them from donating blood!

Believe it or not, Americans today are host to more than 130 different kinds of parasites, ranging from microscopic organisms to foot-long tapeworms. Practically every imaginable kind of exotic parasitic disease has been found on our shores: African sleeping sickness, toxoplasmosis, schistosomiasis, giardiasis, amebiasis, filariasis—unpronounceable to most of us, but potentially deadly nevertheless. Even malaria is making a comeback, with cases of this mosquito-borne tropical disease being reported as close to home as New Jersey, Virginia, Texas, and California.<sup>1</sup>

Parasites are an insidious public health threat in the United States today. Insidious because so very few people are talking about parasites, and even fewer people are listening. Insidious because of the common misconception, among physicians and the general public alike, that parasites occur only in tropical Third World countries, areas traditionally associated with malnutrition and poor hygienic practices. Insidious because physicians do not suspect, and therefore do not recognize, classic symptoms. And insidious because even if physicians are aware of the threat, most use outdated and inadequate testing procedures, which result in underdiagnosis.

Lack of education is to blame. In the United States, physicians are simply not educated in parasitology and are, therefore, inexperienced in recognizing common clinical symptoms. A doctor's introduction to parasitology may come from a chapter here and there in a microbiology course in medical school. If parasitology itself is taught at all, it is as a specialty in the department of tropical medicine at some universities. Courses in these departments are not often elected by medical students who believe they will not be seeing "tropical medicine" problems in their general practices in the United States.

Yet, times have changed and parasites are much more widespread than previously believed. An article appearing in the June 27, 1978, Miami Herald states that a nationwide survey conducted by the Centers for Disease Control (CDC) in 1976 revealed that one in every six people selected at random had one or more parasites. The survey also pinpointed a parasite known as *Giardia lamblia* as the number-one culprit in water-borne disease. Louis Parrish, M.D., a New York City physician who specializes in parasites, wrote in 1991, "Based upon my experience, I estimate in the New York metropolitan area that 25 percent of the population is infected...."<sup>2</sup> Projections for the year 2025 suggest that more than half of the 8.3 billion people on Earth will then be infected with parasitic diseases.<sup>3</sup>

Often regarded as opportunistic invaders, parasites have no respect for class boundaries. The publicized illnesses of celebrities like actor Yul Brynner, who became seriously ill from trichinosis after eating in a well-known New York restaurant, and tennis pro Martina Navratilova, who was affected by cat-transmitted toxoplasmosis, illustrate that we are all susceptible. Contaminated well water at some of this nation's most prestigious ski resorts has led to outbreaks of giardiasis, which goes to show that parasites can occur even in the seats of the mighty.

### **how did it happen?**

A number of seemingly unrelated factors unique to the late twentieth century have contributed to the unrestrained parasite epidemic and added to the increased risk of parasitic infection. Some of these factors include:

- the rise in international travel.
- the contamination of municipal and rural water supplies.
- the increasing use of day-care centers.
- the influx of refugee and immigrant populations from endemic areas.
- the return of armed forces from overseas.
- the continued popularity of household pets.

- the increasing popularity of exotic regional foods.
- the use of antibiotics and immunosuppressive drugs.
- the sexual revolution.
- the spread of AIDS.

Let's examine each of these factors in detail.

## **INTERNATIONAL TRAVEL**

Today more than ever before, American tourists are traveling to remote areas of the world. An affluent society is a mobile one. In 1990 alone, more than 390 million people worldwide made international trips for pleasure and/or business. Over 15 million of them were Americans, and half of these Americans traveled to Third World countries. More adventurous trips to exotic destinations like the Caribbean Islands and remote areas of Mexico, South America, Asia, Africa, China, and Israel have replaced the old-fashioned grand tour. We know that smallpox, cholera, and the plague have been eradicated, so we're safe.

Not so.

Unfortunately, travel can be fatal. As mentioned earlier, malaria, the most virulent of the parasitic diseases, is on the rise both here and abroad. Malaria is a ruthless killer, responsible for up to 2 million deaths per year in over 100 countries. The rise of this disease is partly due to the fact that mosquitoes have become resistant to DDT and other insecticides. And drug-resistant parasites have been found throughout South America, East Africa, and Southeast Asia. In parts of Thailand, the organism is resistant to every known drug, and the problem now presents a medical crisis.<sup>4</sup> There are many documented clinical cases of travelers, including businessmen and foreign exchange students, who had been infected in other countries but did not manifest symptoms until after their return home. In some of these cases, the disease was properly identified but by that time had progressed beyond the point of medical intervention, and the patients died.<sup>5</sup>

For the majority of us, less threatening conditions such as bouts of diarrhea are expected souvenirs of world travel. We pack out Pepto-Bismol right along with our passports and think nothing of it. Unless we go to St. Petersburg, Russia. Formerly known as Leningrad, this is "Giardia City" to visitors who go home with severe diarrhea, fevers, chills, muscle pain, and intestinal bloating. The cause: The city's tap water is infected with *Giardia lamblia*, a microscopic parasite. Visitors to Nepal are routinely stricken with severe cases of giardia, unaffectionately referred to as "Delhi-Belly." Giardiasis, however, can do more than ruin your vacation. Symptoms of this illness can persist long after the vacation has ended. And it has been known to set the stage for unexplained conditions such as irritable bowel syndrome and chronic fatigue.<sup>6, 7</sup>

Besides returning with photographs of the Great Wall of China, travelers there return with internal hitchhikers in the form of roundworms caused by widespread agricultural use of night soil (human waste). Eggs are not found in stool samples until sixty to seventy-five days after initial infection. By this time, they have gone through their pulmonary phase, creating such symptoms as cough, wheezing, bronchial spasms, and increased mucus. Symptoms of the intestinal phase may mimic those of peptic ulcer but require an entirely different treatment regimen.

The International Travelers Hotline of the Atlanta-based CDC warns those traveling to Africa of the danger of bathing, wading, or swimming in fresh water that may be infested with blood flukes, which cause a disease called schistosomiasis. This infection not only produces fever and chills, it elevates the number of specialized white blood cells known as eosinophils and causes abdominal pain with enlargement of the liver and spleen. Often, these symptoms do not show up until four to eight weeks after exposure, at which time the symptoms may be attributed to more familiar diseases with similar symptoms.

## **WATER CONTAMINATION**

One of the greatest parasitic hazards is contaminated water—not only abroad, but right here in this country. A highly infectious parasite, *Cryptosporidium parvum*, is increasingly being recognized as the number one cause “in waterborne outbreaks in the U.S.A. and in children in tropical, developing areas...and [that] resists chlorine treatment and is easily spread in hospitals, daycare centers, and in impoverished households,” according to a 1995 article in *Parasitology Today*.<sup>8</sup>

In 1993, malfunctions in the water systems of Milwaukee, among several other cities across the U.S., led to water-boiling advisories or shutdowns.<sup>9</sup> Apparently the invisible water-borne parasite *cryptosporidium* invaded the city’s water supply, resulting in the illness of 400,000 people and the deaths of more than 100. According to a report that same year, one in four drinking water supplies tested in fourteen states was found to be contaminated with *cryptosporidium*.

The second most prevalent water-borne parasitic infection in the U.S. today is the *Giardia lamblia* parasite. David Addiss, M.D., a medical epidemiologist at the CDC, noted that giardiasis was mostly seen fifteen to twenty years ago in international travelers who drank from contaminated water supplies or in campers and backpackers who sipped from “pristine mountain streams” contaminated by infected forest animals or raw sewage. But that’s all changed. *Giardia*—that traveling companion from Nepal and St. Petersburg—first surfaced here in the West and then spread to the Northeast, Southeast, Rocky Mountains, and California Sierras. Steven Rochlitz, Ph.D., states in his book *Allergies and Candida* that “Giardiasis may be a rampant problem in the U.S. today since 50% of our water supply is contaminated with it and, unlike bacteria, it is not killed by chlorination.”

We must also factor in that hundreds of small water systems throughout the country do not have adequate purification systems. And in urban as well as rural areas, streams and watersheds can become contaminated through infected human sewage. Understandably, people are opting for bottled water and water filters to avoid parasitic infection.

However, the fact remains that parasitic infection via contaminated water may be much more prevalent than we think. A release from the National Institute of Health says “many parasitic diseases such as giardiasis and cryptosporidiosis are not always reported to health authorities, so that we suspect the extent and impact of parasitic diseases in the United States is underestimated.”<sup>10</sup>

## **DAY-CARE CENTERS**

Rampant parasitic infections exist in day-care centers nationwide. A 1997 *Wall Street Journal* article quoted one New York City pediatrician who was experiencing a definite increase in giardia outbreaks and “attributing the cases to exotic vacations and the growth of daycare for diaper-aged children.”<sup>11</sup> When a child becomes infected in any of the ways discussed in this book, he can easily infect others in day-care centers. The Centers for Disease Control has estimated (estimated because exact figures are not known) that every year, day-care centers are the source of nearly 20,000 cases of giardiasis. A recent CDC survey found that in Fulton County, Georgia, approximately 25 percent of all children in day care were infected with giardia; in New Haven, Connecticut, the rate was twice as high at 50 percent; and in Anaheim, California, the rate of giardia in one day-care center increased from 3 percent to 43 percent from 1981 to 1991.<sup>12</sup>

Since the disease can be spread through direct contact with infected feces, day-care centers provide a ready environment for transmission and have been referred to as “the open sewers of the 20th Century.”<sup>13</sup> Because giardia cysts lodge under the fingernails, the infection can be inadvertently spread from one infant to another during diaper changes. It is also spread by inquisitive toddlers touching dirty diapers and then contaminating

toys, drinking faucets, and themselves with their frequent hand-to-mouth contact. According to Dennis Juranek, D.V.M., chief of Epidemiology and of The Parasitic Disease Branch at the CDC, roughly 20 percent of parents become infected themselves while caring for their sick children.

## **IMMIGRANTS**

Parasitic infection is more predominant in the tropics and the subtropical areas of the world because of climate and unsanitary conditions. Parasites are much more prevalent in immigrants from areas like the South Pacific, Mexico, South America, Asia, and Haiti. Not counting illegal aliens, over 16 million foreign students, diplomats, travelers, and immigrants entered the United States in 1989. During the 1970s, at the end of the Vietnam War, this country was inundated with a massive influx of immigrants from Southeast Asia. Many of these refugees and immigrants came from parasite-infested areas. While they may not be exhibiting symptoms of the diseases, they may still be carriers, just as infectious as those with full-blown symptoms.

Recent immigrants to this country, who often are unskilled and unable to speak English but willing to work for minimum wages or less, very often seek jobs in kitchens where today there are no obstacles to their employment. I have observed that the majority of restaurant workers no longer wear hair nets or gloves when handling food, and often the same person who serves your food takes your “dirty” money. With this lack of basic sanitation in the restaurants of America, the exposure rate to infectious diseases is mushrooming.

Immigrants also find work as babysitters or housekeepers. An Associated Press article that ran on September 3, 1992, carries the headline “Worldly Worms! Traveling Parasites Leave Latin America to Afflict Big Apple.” The article goes on to describe how four orthodox Jews in New York City were mysteriously stricken with seizures. CT scans showed pork tapeworm cysts in the brain, a most startling revelation considering these individuals never ate pork due to their religious dietary laws. A Centers for Disease Control formal investigation discovered the single common denominator in every case history—a housekeeper originally from Central America, where pork tapeworm infection is relatively common. The investigators theorized that the housekeepers unknowingly carried the tapeworm eggs and infected the Jewish families by contaminating their food.

## **ARMED FORCES**

Soldiers stationed overseas can harbor a variety of parasites. More than the troops come home. Headlines such as “Disease Is Cited in Veterans Suit”<sup>14</sup> and “Gulf War Parasite Halts Troop Blood Drive”<sup>15</sup> graphically bring the awareness of parasitic diseases from foreign shores to America. From 1963 to 1975, thousands of troops returning from Southeast Asia were carrying parasite-induced diseases that affected their intestines, lungs, liver, and central nervous systems.<sup>16</sup> In 1985, five Vietnam War veterans filed a class-action medical malpractice suit against the Veterans Administration for failing to properly test, diagnose, and treat them for parasitic filariasis. Filariasis, a disease endemic to southeast Asia, is caused by worms carried by infected mosquitoes and can lead to swelling of the lymph glands and a condition known as elephantiasis. Lawyers and doctors for the five veterans contend that hundreds to tens of thousands of Vietnam veterans may be suffering from this disease. More recently, 540,000 American troops returning from Desert Storm were told not to donate blood because of the incidence of the parasitic disease leishmaniasis, spread by desert sand flies. Diarrhea, abdominal pain, and fever are symptoms of this infectious disease. Unexplained illness with fever may be a sign of a new species of leishmaniasis found in the Gulf vets.

## **PETS**

Pets are hosts to numerous parasites and are unexpected spreaders of disease. There are 240 infectious diseases transmitted by animals to humans. Of these, 65 are transmitted by dogs and 39 by cats. There are

110 million dogs and cats living in America's households, making exposure to some of these diseases significant. Dogs, for instance, are known carriers of *Giardia lamblia*, which is easily picked up through ground water or from contact with animal waste. A regularly dewormed cat or dog can still pose a threat since the infections may recur. One pet-food manufacturer says that 89 percent of all house cats in America sleep with their owners. Dog and cat roundworm, hookworm, and cat-transmitted toxoplasmosis can become severe in pregnant women and children and even life threatening in immunocompromised individuals. Phillip Goscienski, M.D., head of the Infectious Disease Branch of Pediatrics at the Naval Regional Medical Center, finds it remarkable that these diseases are almost always unsuspected and unrecognized.<sup>17</sup>

## **Users Review**

### **From reader reviews:**

#### **Anthony Robin:**

Why don't make it to be your habit? Right now, try to prepare your time to do the important take action, like looking for your favorite guide and reading a reserve. Beside you can solve your trouble; you can add your knowledge by the reserve entitled *Guess What Came to Dinner?: Parasites and Your Health*. Try to stumble through book *Guess What Came to Dinner?: Parasites and Your Health* as your pal. It means that it can to be your friend when you experience alone and beside associated with course make you smarter than ever before. Yeah, it is very fortunated for yourself. The book makes you considerably more confidence because you can know every thing by the book. So , we should make new experience in addition to knowledge with this book.

#### **Joan Jackson:**

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#### **Isaias McGee:**

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**Olivia Dickert:**

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