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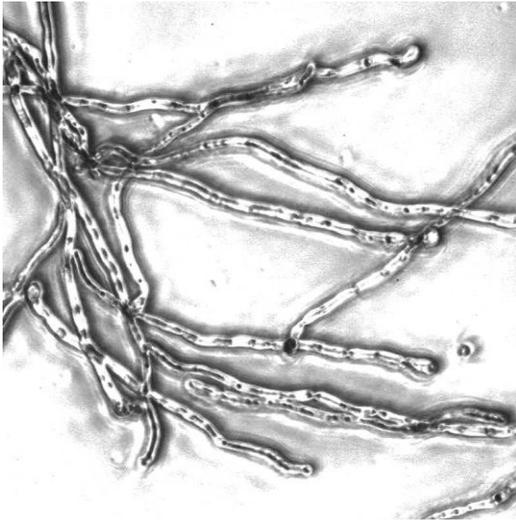
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1. What is Candida albicans?

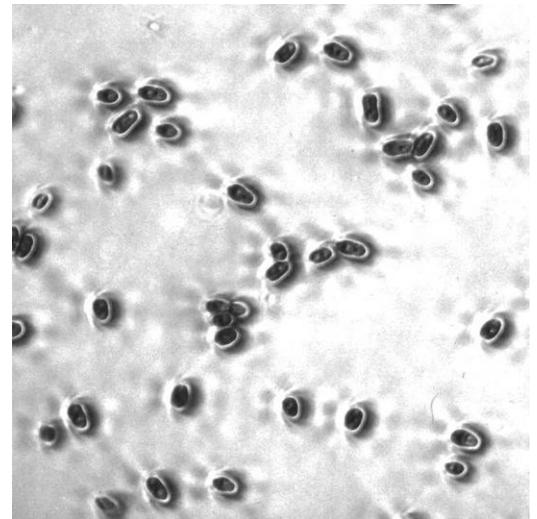
Candida is like a seven-headed dragon - nearly impossible to kill. The most important factor in getting rid of Candida is your own immune system! Candida albicans should be taken very seriously. This yeast can easily become a fungus, and in that form it is dangerous and near-incurable.



However even the worst manifestation of Candida can be suppressed. With chronic Candidiasis nothing seems to really work, long-term. I'm not talking about fighting Candida thrush, rashes and yeast - that's perfectly possible - I'm talking about getting rid of the chronic form of the disease, semi-systemic Candididasis that has thoroughly entrenched itself, a fungus that is not a yeast anymore, but a mycelial Candida with roots, a chronic fungus. This form of Candidiasis is resistant to treatment because it has grown roots into your tissue. **In the image above, these rhizoids or fungal roots are clearly visible. The image on the left shows Candida yeast - the common, easier-to-treat form.**

You'll probably have noticed that your Candida symptoms are worst when your natural immunity is down. Candida flares are perfect indicators of the state of your immune system. A bout of stress or lack of sleep can set off an attack, as well as other factors that can depress the immune system, like chronic illness - especially Diabetes - or sometimes pregnancy.

A Candida cure takes the whole person into account: Stress avoidance, sufficient sleep, immune system boosting and low-GI diet in addition to effective antifungal treatment.



Natural immunity against Candida albicans is boosted by sleeping well, avoiding stress and a diet that starves the Candida and feeds the probiotics, the good bacteria that eat Candida. A good Candida management diet also contains enough nutrients like vitamins and minerals to keep the immune system able to fight this insidious infection.

2. Photographs



Oral Candida



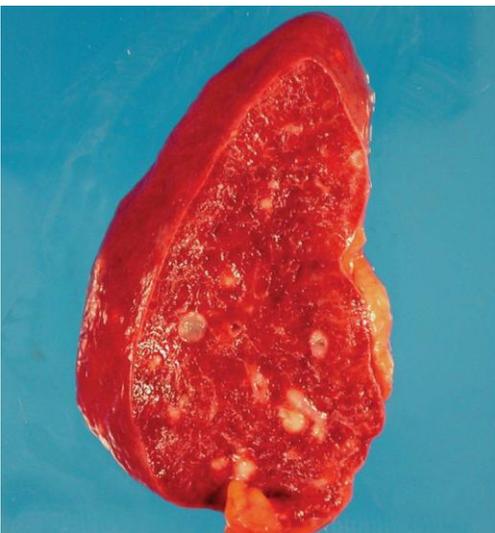
Candida Intertrigo



Candida Balanitis



Candida Vulvovaginitis



Candida microabscess (spleen)



Candida diaper rash

3. Candida Causes

The main cause of Candida Albicans infection is antibiotics. The longer you take them, and the higher dose you take, the greater the risk of an opportunistic Candida infection - especially when you recently took an antibiotic of a different type. The reason for this is that Candida is always present on the skin and mucous membranes, but it is kept in check by bacteria that also live there.

The runner-up **risk factor for Candida is chronic stress with lack of sleep.** Stress and lack of sleep depress the immune system in many ways, and Candida strikes.

Corticosteroids are another Candida risk - also because they depress the immune system.

Hormonal medications can invite Candida thrush, such as the birth control pill and Hormone Replacement Therapy.

Lack of important nutrients make you susceptible to Candida, e.g. bad diet habits or eating disorders.

Alcohol, caffeine, nicotine and prohibited drugs can exacerbate or cause Candida overgrowth and rashes.

Illnesses such as **Diabetes, Lupus or Thyroid problems** can result in Candidiasis.

Pregnancy is often related to the onset of Candida albicans.

It is important to **breastfeed your baby** for at least three months, because they get some protection - useful later in life - against Candida from factors in breast milk.

Older people need to pay special attention to a healthy diet, because they're especially susceptible to slow deterioration of gut flora and gut lining.

How to get Candida albicans

Candida isn't all bad - this yeast fulfills an important role: It literally eats the bad bacteria in the colon such as e. Coli. In a healthy gut, the good bacteria, bad bacteria and Candida yeast are all in balance. There are few bad bacteria, many good bacteria, and quite a lot of Candida - but only in the *yeast* form - not in the harmful fungal form.

When this **delicate balance is disturbed by antibiotics** for example, the good bacteria in the colon (lactobacillus acidophillus and bifidobacteria) die as well as the bad bacteria, but the Candida, being a yeast, unaffected by antibiotics, spreads like a wildfire. When that happens, the Candida can sprout roots like whiskers, hyphae that anchor themselves firmly in the gut lining. We call this form mycelial Candida. This mycelium is the same as the white root system in the soil of mushrooms in the forest.

This fungal form of Candida is the "rogue" form, the form that is nearly impossible to get rid of. The lining of the gut is only 2 cells thick - you can imagine how easy it is to develop Leaky Gut Syndrome when Candida overgrows the bacteria in the colon!



How to avoid Candida infection

Sleep at least 7 hours a night, preferably more. Do not work in shifts or at night - lead a regular life with good, long, uninterrupted sleep, always at the same hours. Avoid chronic stress at all cost. Brush your teeth at least once a day and avoid food with a high glycemic index (GI). If you have no other choice but to take a course of antibiotics, take antifungals with them. In countries like Russia and China, where antifungals were state-produced and cheap, this has always been the norm. Don't "douche" the intimate organs, and use a pH-neutral soap. Candida doesn't like an acid environment.

4. Candida FAQ

Q: Can I use yoghurt or kefir instead of capsules with probiotics?

A: Yes, but you have to make sure that the yoghurt or kefir is at most slightly sweetened (the bacteria need sugar to survive) and contains live acidophillus **and** bifido-bacteria, and that the yoghurt or kefir is **very** fresh. You can "potentiate" the yoghurt by mixing it into salad, thus spreading the bacteria out over a very large surface area. For best results, mix probiotic bacteria-powder into yoghurt or kefir. Even better is to culture your own yoghurt with optimal probiotic bacteria.

Q: Are there any "miracle cures" for Candida?

A: Yes and no. To my knowledge, there is not a single "cure" advertized on the Internet that works. However, after having studied medical research and medical patents, I came across something that actually does work with any kind of chronic Candida infection, as long as you're not on intravenous antifungals in a IC ward. This method is not "natural", it involves an over-the-counter veterinarian substance that has nothing to do with Candida. It's 100% safe. We sell it [here](#).

5. Candida Symptoms

Candida can manifest itself in many ways and symptoms can be from mild to very uncomfortable to deadly within hours. (The latter can happen as "Candida septicemia" - Candida in the bloodstream - often in people with AIDS or in case of hospital-acquired infections in patients on immunosuppressant drugs for example)

If you're looking for specific Candida symptoms, look on the left-hand menu on this site for Candida rashes, yeast thrush, Candida allergies and Candida-related loss of hair. Candida Esophagitis and intestinal Candida are covered as well.

One rare symptom of Candida albicans is Candida of the nails: We sell a natural antifungal against nail fungus (not just Candida) [here](#).

Symptoms don't have to be physical - they can be mental as well - one reason is that intestinal Candida produces alcohol and neurotoxins in the gut. Mental Candida symptoms include apathy, confusion, dizziness, foggy thinking, poor concentration, poor coordination and spaced-out feeling.

Classical oral Candida symptoms are a sore throat, a white coating on the tongue, blisters or sores in the cheeks, a burning tongue or bad breath.



Digestive Candida symptoms can be food allergies, gas, abdominal pain, gastritis, rectal itching, sugar cravings and ulcers.

Urinary Candida symptoms can be bladder infections, burning urination, kidney infection and urethritis.

Respiratory Candida symptoms can be bronchitis, chronic cough, clogged sinuses, excess mucous, nasal itching, sinus infections, wheezing, sneezing, pneumonia and chronic congestion.

Skin Candida symptoms can be diaper rash, eczema, red rashes, itchy patches on the skin and sores.

Eye symptoms can be floaters and blurred vision.

6. Candida Diagnosis

Candida is not necessarily hard to diagnose, but it is hard to obtain a positive diagnosis mainly due to the fact that Candida is very expensive to treat effectively with pharmaceutical medicines supplied by Big Pharma at extortionate prices. The problems with getting Candida properly diagnosed are exacerbated by the fact that it is often deemed "controversial" that people without serious immune system problems can have chronic Candidiasis at all. Antifungal medicines are extremely expensive, and Candida acquires immunity against them quickly, necessitating the administration of multiple antifungals simultaneously.

Diagnosing Candida

Candida albicans can be diagnosed with blood-, mucous membrane- or urine culture tests where they try to grow Candida in a Petri-dish and use a microscope to see what kind of Candida it is, or antibodies can be found with an **ELISA test**. There are many other, more accurate tests (PCR and immuno-fluorescence tests), but the more accurate a test, the more taboo it is, because it essentially forces the initiation of treatment because systemic Candidiasis has a near 100% mortality rate. Often, a doctor will simply refuse to do a Candida test at all.

Medical staff likes to stress that "Many people have antibodies against Candida", when denying treatment after testing positive for Candida albicans. They call it a "false positive", even though you do have Candida symptoms!



On the contrary - in case of Candida tests, our biggest headache are the false negatives, which is when you have Candida but the tests doesn't show it. This is due to the problem that Candida antigens are rapidly cleared from circulation.

Allopathic Candida Diagnosis

There is a Candida yeast infection test based on the fact that the Candida organism ferments sugars into alcohol. This tests measures the baseline blood alcohol level. After that the patient eats a large quantity of sugar, causing Candida fermentation into alcohol, which is measured by the test. This test is only suitable for intestinal Candida - Candida in the gut. This test is also called the "alcohol challenge" test.

There is a Candida stool-culture and urine-metabolites test that can accurately identify the type of Candida species. These Candida tests have been developed by Michael Biamonte. The urine test finds organic acids that are a byproduct of Candida metabolism.

Candida saliva test (ELISA)

A very specific, reliable test is the Candida ELISA saliva test, which tests for antibodies against Candida albicans in the saliva. These types of antibodies are of the IgA type, and the test plate will change color when enough of those antibodies are detected, resulting in a positive Candida diagnosis.

There is a simpler saliva test: Simply taking a swab of mucous tissue and investigating the cells under a microscope, looking for the characteristic Candida filaments typical for invasive Candidiasis. Candida can be diagnosed like this, but the test is unsuitable to judge the extent of the infection.

7. Chronic Candida

Preventing chronic Candida

Candida is normally a yeast, and can be seen as vaginal thrush, discharge or whitish plaque on the tongue or inside the mucous membranes in the mouth. You have to prevent at all cost - whatever it takes - that this yeast stage of Candida transforms itself into the chronic form: Candida fungus. Chronic Candida often is not visible any more as white thrush, because the Candida organism is not a loose paste any more, not a smear of granular cells that can be scraped away, but a totally different form: The fungal form.

Fungal Candida can be compared with a plant that has roots, as opposed to plant seeds. The yeast manifestation of Candida are the "seeds", and the chronic, fungal form of Candida are the "plants". The roots of the Candida are called rhizoids, and instead of soil to root in, they penetrate your body tissues and suck the nutrients they need right out of your cells and bloodstream. This form of Candida is nearly impossible to get rid of and is often near-invisible.

Whilst yeast thrush is merely inconvenient, chronic Candidiasis is the next step towards a possible systemic Candidiasis, which can become life-threatening when immunity drops significantly, for example at an advanced age or after an organ transplant. There is a big difference between Candida yeast and Candida fungus. To help you understand how dangerous Candida can be: A mere 3000 Candida yeast cells injected into the bloodstream of an adult (an amount so small that it would be totally invisible to the naked eye) has a lethality of 98%. Death usually occurs from severely damaged heart valves or central nervous system involvement.

There are three stages of Candida infection:

- 1. Yeast (discharge, rash, thrush etc.)**
- 2. Chronic form (reoccurring ulcers, red patches, painful sores, long-term serious problems and symptoms)**
- 3. Systemic form: Untreated always lethal and 30-40% dies even with prompt medical treatment.**

The first stage usually takes several years, and always is caused by underlying conditions or problems. Taking antibiotics long-term, for example. This is by far the most common cause of an eventual chronic Candida. When you are on antibiotics, you should take some precautions. Oral hygiene is of the utmost importance. The longer the Candida yeast remains in your mouth, the more chance it has to defeat the immune system and sprout roots. Don't forget your tongue when brushing your teeth.

Another safeguard against Candida is to regularly consume "living" yoghurt or kefir, with probiotic bacteria, good bacteria such as Lactobacillus Acidophilus and Bifidobacteria. This beneficial gut flora raises the acidity in the intestines, and Candida has trouble living in an acidic environment.

Diagnosing chronic Candida

The number of symptoms associated with chronic Candidiasis are so numerous and so seemingly unrelated, that just about anything *could* be caused by a chronic Candida infection. The only way to be reasonably sure is to use some common sense: Have you had long-term thrush or rashes before? Especially after using antibiotics, getting sick, pregnancy or being on medications such as hormones? Do you still have rashes, ulcers or pains occasionally? Are there other symptoms that can't be connected to other diseases, but appeared after your Candida and/or your immune system got worse? When in doubt, try to get professionally diagnosed.

Managing chronic Candida

When you have bad luck, you were unable to prevent the yeast form of Candida to transform into the fungus form. In that case, you have to try to get rid of it as much as possible. **In my opinion, the second, chronic stage of Candidiasis is nearly incurable. But you can at least suppress it and minimize its symptoms and severity.**

The first and foremost thing you have to do is keep your immune system in perfect order. This is much more important than **anything else**. A strong, healthy immune system is more effective in suppressing Candida than even the best and most expensive antifungal medicines - especially long-term. Candida easily gets resistant to antifungals - you have to rely on your immune system to pull you through.

Then you have focus on diet. Avoid food with a high GI (Glycemic Index), especially when suffering from intestinal Candida. With Candida in the colon, you simply can't eat any sugars or any grains. No pasta, bread, potatoes or even most fruit. The Atkins diet is your friend in this case. I would recommend going easy on the butter and fat meat, and eat nuts, fatty fish and organic eggs instead.

When you suffer from the occasional sore in warm, moist areas, **use essential oils like Oil of Oregano to kill it off.** Mix the oil 1:3 with vegetable oil, because undiluted, essential oils will damage the skin.

Mouth sores can be rubbed with a variety of powdered fungicidal herbs, such as myrrh. Anyone will have access to cinnamon powder - this is a real Candida-killer but beware: A little known fact about Cinnamon is that it can cause [oral cancer when overused](#). Then again, Candida in the mouth is also known to cause oral cancer, so it's OK to use a little Cinnamon now and then to get rid of the Candida.

Curing chronic Candida

When Candida is still in the yeast stage, it can be gotten rid of - given you follow quite a few rules and regulations. It is a whole different ballgame when you are afflicted with chronic Candida. However, after having studied medical research and medical patents, My husband John came across something that actually does work with any kind of chronic Candida infection, as long as you're not on intravenous antifungals in a IC ward. This method is not "natural", it involves an over-the-counter veterinarian substance that has nothing to do with Candida. It's 100% safe. You can read more about it here: [Lufenuron Candida cure](#).

8. Candida in the small intestine (IBS)



Did you know there are no methods known to medical science to have a look at the small intestine? So if you ever gotten a colonoscopy to diagnose possible Candida in your gut, then you're out of luck when the Candida resides mainly in your small intestine. Yet, this is what Candidiasis in the small intestine looks after you died of it. This is why you need to ask for a Candida stool culture test as a diagnostic tool for Candida in the intestinal tract.

Doctors do not believe that people with intact immune function can have such a thing as Candida in the colon. They will therefore usually not prescribe the proper tests, because they are laborious and expensive, and they would dismiss a positive result as a false positive anyway, due to their belief system.



The reality is that anyone who has ever been on a few weeks of antibiotics can have a severe Candida overgrowth in the intestines, because as soon as Candida has taken root in the colon, it will never yield its gained ground back to the beneficial acidophillus gut bacteria.

Candida albicans has extensive defense mechanisms

..to neutralize the good gut flora. This is what intestinal Candida looks like.

The big problem with Candida in the gut is the "Leaky Gut Syndrome", which is caused by the microscopic holes the Candida fungus makes in the lining of the intestinal wall. Through this perforated gut lining,

large food molecules can pass into the bloodstream, and cause all kind of allergies because these substances are not supposed to enter the blood without first being digested, especially not in the large molecular size they have before digestion.

Risk factors for gastrointestinal Candidiasis include a weakened immune system (due to cancer or stress for example), hypothyroidism, diabetes, oral contraceptives, alcoholism, a diet rich in simple sugars and, last but not least, (repeated) use of antibiotics.

9. Systemic Candida

Systemic Candidiasis is officially almost always lethal within days, without treatment. Still, many Candida patients consider their Candida infection to be "systemic" in the sense that it's "everywhere", and they can't get rid of it. And they are right. In the strict medical sense however, systemic Candidiasis is one of the most desperate and hopeless diseases, and the prognosis for even otherwise healthy persons with access to unlimited antifungal medicines is quite poor.

Candida is said to be "systemic" when Candida yeast cells can be found in the bloodstream or in body organs. The official medical wisdom says this is impossible when the immune system is in good order, and therefore they will only call a Candidiasis "systemic" when they find it in an AIDS patient or someone on immunosuppressant drugs.



It is my personal theory that otherwise healthy people also can suffer from systemic Candidiasis, and that they do not die of this because their immune system is strong enough to keep it in check. Sometimes their immune system is strong enough to suppress most symptoms, and sometimes, due to lack of sleep, bad dietary habits or stress, the Candida flares up again. Mind you - I'm talking relatively serious Candida here - not a little rash on the skin but chronic coughing with a feeling of congestion in the chest, or signs like persistent sores on genitalia, anal region or mouth. People usually end up in such a state after years of a neglected Candida thrush.

There is evidence that my theory is correct, because research has shown that blood is not always sterile as claimed, and that people who claim to have serious, long-term trouble with Candidiasis actually have living Candida cells in their bloodstream.

Unfortunately, medical science in the West is evidence-based because it is dominated by a for-profit methodology. A doctor simply can't *believe* their patients, tests have to *prove* it, regardless of the fact that most tests test the wrong things, or are principally flawed.

10. Candida Diet

Candida loves sugars, so you can starve this organism - especially when you have intestinal Candidiasis. The key is to eat very little sugars - this includes fruit sugars, cakes, jams and honey. Since the blood sugar raises dramatically when you eat food with a high Glycemic Index, also this food is taboo - at least until you have gotten rid of the Candida infection. **Food with a high GI are bread, potatoes, white rice and pasta.**

Antifungal drugs will often fail, if sugars are not eliminated from the diet. This includes all sweetened drinks & soda, fruits and fruit drinks, corn syrups, and other high sugar containing products. **Read your labels!** Past publications have emphasized the fact that Candida ferments and rapidly proliferated in the presence of simple sugars. This is correct, and research has proven that sugars greatly increase the ability of Candida to adhere to epithelial mucosa cells and may be the most important factor in causing gastrointestinal Candidiasis.

To make a long story short: A near-ideal anti-Candida diet is the Atkins diet. As a side effect, this diet incidentally works wonders to lose weight as well!

A reminder: The Atkins diet minimizes the intake of carbohydrates. Don't overdo it - when you go fundamentalist-extremist on the Atkins diet, you can damage your kidneys.

Here's why it's not advisable to eliminate all carbohydrates from your diet: A high protein diet can even be bad for these reasons: 1. The breakdown of proteins produces ammonia, creating an environment favorable to Candida yeast. 2. Undigested proteins that are absorbed through the consequential "leaky gut" can put an excess strain on your immune system. 3. Carbohydrates provide food for your beneficial intestinal flora. Without feeding your normal, "good" flora, they will die off - allowing further proliferation of Candida.



So a dietary regimen that combats Candida is not a simple matter.

It is of great importance to keep your blood sugar level as even as possible throughout the day when you're trying to starve the Candida. One way to achieve this is to take small regular meals every 3 hours - amounting to 5 or 6 meals daily. Unsweetened living yoghurt or kefir are excellent snacks, as well as nuts or canned fish. Salads should be one of your mainstays. Modest amounts of lactose (milk sugar) from fermented dairy is beneficial to people with intestinal Candida.

The interesting thing about salads is that unwashed, they contain a plethora of bacteria - most of them in fact beneficial to your digestive system. Another thing about salad is that if you mix yoghurt into it, it turns into a veritable ecosystem for those good bacteria, because the many leaves increase the surface area for the bacteria. Chop up a varied salad, put a little yoghurt in it and notice the effect on your digestive system!

More of these tips can be found in the books I linked to above.

When eating so often during the day, make sure you keep your caloric intake within reasonable bounds. This "many small meals" strategy actually helped quite a few people to go down in weight!

Excellent food for the Candida-afflicted is vegetable soup without starchy ingredients like pulses or potatoes. But the effectiveness of certain vegetables like garlic and onions has been overstated though. Raw, they can prevent or ameliorate a beginning Candidiasis in the intestine or mouth, yes. But firmly entrenched, Candida is not going to care much.

11. Candida Myths

There are some persistent fairy tales circulating about Candida, and I assume the reason is that they sound credible to the average person - not being a biochemist or molecular biologist.

Candida and baker's yeast

People tend to believe that because Candida is a yeast, and because bread-yeast is a yeast, that the totally harmless dough-yeast is somehow bad for them, that they will be at the very least "allergic" to baker's yeast.

This is complete nonsense in many ways. The people who spread this myth ignore the fact that the very high temperatures involved in baking bread not only completely kills any and all yeast in the bread (the bread becomes sterile) but that there remains nothing left of the yeast molecules! All life on Earth is made of proteins. Proteins already "denature" at 60° C. Bread is baked at five times that temperature. So the bakery yeast is neither harmful alive because it is a harmless organism for humans, neither is it alive in bread, neither can it act as a "fungal allergen" because its entire structure is broken down by the extreme temperatures in an oven. Of course, bread can be bad for Candidiasis patients for other reasons: Flour breaks down into simple sugars, feeding the Candida.

Candida and mushrooms

Some folks even go further, and spread the Candida nonsense that when you suffer from Candida infection, that you can't eat mushrooms like Champignons. This is "magical thinking", or at the very least pseudoscience and a wrong deduction. Mushrooms are not Candida, even though Candida is a "mushroom". Mushrooms do not infect the body, neither do they magically become allergens just because you have a leaky gut caused by Candidiasis. Champignons are as far removed from Candida as is a Llama from a bed bug. On the contrary, mushrooms are [good against Candida](#).

Candida and antibiotics in meat

It is generally believed that when cattle is given antibiotics, that the antibiotic residues in their meat somehow can kill the beneficial bacteria in and on your body, and that this will enable Candida to take root or spread. This is nonsense! Bacteria can only be influenced when the MIC (Minimum Inhibitory Concentration) exceeds a certain level. Firstly, the antibiotics get eliminated from the animal as soon as they are administered. Secondly, by eating a large steak of an antibiotic-fed cow, you will not even ingest a thousandth of the dose you would need to have the slightest effect on any bacteria in your body. Because not only have the antibiotics been broken down in the cow, but you are diluting the antibiotic at least a hundredfold by eating only 1% of your body weight in a meal of antibiotic-treated meat.

Candida and the spit test

There is [no evidence](#) that the spit test is particularly reliable.

Candida and the muscle test (Kinesiology)

Any kind of "muscle testing" - also to diagnose Candida infection - is [complete quackery](#).