Healing Your Gut with GAPS:
A Special Interview with Hilary Boynton and Mary Brackett
By Dr. Joseph Mercola

DM: Dr. Joseph Mercola
HB: Hilary Boynton
MB: Mary Brackett

DM: We all know that eating a high-quality, nutrient-dense diet is one of the most important ways you’re going to maintain optimal health. But just how do you do that? What are the recipes? Hi, this is Dr. Mercola, helping you take control of your health. Today we’re joined by two authors who are going to help us answer that question. First is Hilary Boynton and the second is Mary Brackett. Welcome and thank you for joining us today.

HB: Thank you for having us.

MB: Thank you.

DM: Why don’t you both give us a little bit about your history and then we can go into some of the reasons as to why you wrote the book.

HB: Okay. I’m Hilary Boynton. I am from Massachusetts. I’m a local food advocate and a certified holistic health counselor. I run several local food co-ops and teach cooking classes out of my home – nutrient-dense cooking classes.

DM: What about you, Mary?

MB: My name’s Mary Brackett. I’m a photographer first and foremost, a whole foods advocate, and a creative visionary. I like to work on projects that illustrate the importance of healthy choices, which naturally became a project between Hilary and I.

DM: Terrific. What motivated you to put this book together, which is based on the Gut and Psychology Syndrome (GAPS) principles, the diet developed by Dr. Natasha Campbell-McBride that is used to treat many children with damages from vaccine injuries?

HB: Well, I had embarked on the GAPS Diet and was teaching a cooking class out of my home. Mary was attending the cooking class. She, too, had been on the GAPS Diet. After the class, she said, “We have to write a cookbook on the GAPS Diet.” I said, “That’s a brilliant idea.” Because when we first embarked on it, I was frantically searching the Web and looking for books, and there wasn’t that one juicy book that I could get into bed with, where I would be visually inspired, have all the information I needed, and buy it in one book.
We knew that it was a really good idea; we just pitched it. I had a friend who wrote a cookbook and had it published. We pitched it and got in. We just sort of went with it right away. We’re so happy to be able to have this opportunity to help people.

**DM:** Terrific.

**MB:** One of the issues with what was going on when we were both doing GAPS was that there wasn’t a resource book that was both inspiring and beautiful, that had great recipes, and that really laid out all the information on GAPS clearly and concisely. I think we were both constantly flipping through Natasha’s book because it’s unbelievably amazing. But because we’re both visual learners, we really needed something that was laid out a little bit differently.

Because that resource didn’t exist, we just thought, “Okay, we’re going to take it into our own hands and we’re going to start doing it ourselves.” It just happened so fast. We were deep in the throes of testing recipes and laying out the information for weeks when we were starting that book. We were kind of fast-tracking it, but…

**DM:** All right. Well, let’s take a step back. We know what motivated you to write the book now. But what motivated you to pursue the GAPS Diet? Why would you do that? Many people who are watching this haven’t been exposed to that yet. Maybe you can share your journey as to what motivated you.

**HB:** Well, I started out… Taking it back a little bit further, I have five kids. I had triplets and then two more. When my fourth child was born, he at two-months-old had severe eczema from head to toe. He was just scratching all day and every night. For two hours, I had to pin him to my body in the middle of the night and soothe him. I tried everything I could to take it away. Finally, this pediatrician-friend of ours said, “You’ve got to do something for this baby. You’ve got to put him on steroid cream.” He was on Zyrtec twice a day. Sure enough the eczema went away.

But I knew as soon as I didn’t put anything on or give him Zyrtec, it flared again. In my heart, I knew that that was not the answer. It’s simply a Band-Aid, not the solution. Kristin Canty, my friend who produced or created Farmageddon, she said, “You’ve got to put him on raw milk.” I said, “What is raw milk?” Fortunately, right after she said that, there was a conference, the Fourfold Path to Healing Conference, in Westford, Massachusetts right down the road by Sally Fallon Morell.

I put him on eggs. I just dove right in. I put him on raw milk and cod liver oil, and he was completely healed. That started my journey into nutrient-dense food. I kind of purged everything from the organic cereals, snacks, bagels, or whatever to bringing in eggs, bacon, pastured beef, and healthy fats. My kids have been fairly healthy, really healthy, on that diet.

And then we have a daughter who has epilepsy, [inaudible 05:06] epilepsy. A few years later, she’s on several medications and still having seizures. I had tried several things to try and get her off of her medication. A friend of mine had hooked me up with a medical intuitive that she had had good luck with. I said, “Oh, gosh, my husband is not going to
“Go for that.” I shot her an email and said, “Would you ever come meet with us just to tell us what you do before we spend more money on another alternative treatment?”

She nicely drove out and she said, after listening to our story for about five minutes, “You guys need the GAPS Diet.” My ears perked up. I had seen Natasha speak. I was familiar with it. I just hadn’t wanted to kind of go with that route because it seemed kind of daunting. But she got out her whiteboard and her markers and drew a healthy gut and a leaky gut. My husband totally understood it, which was a huge thing. Because we were both on-board, the next day, we started. That’s how we kind of came about the GAPS Diet.

DM: You did that for the treatment of seizures.

HB: We did.

DM: And it worked for him or her?

HB: For her. She actually ended up being more ketogenic. She’s on the GAPS Diet with a little bit more of a ketogenic focus, which is very little carbohydrates.

DM: That’s what I was going to mention because typically nutritional ketosis works wonders for seizures. That’s how it was initially developed – was for the treatment of seizure disorders. And then we realized that probably it has more uses like in the treatment of cancers, too.

HB: Right. She’s been on that. My boys, my husband, and I are more GAPS, and she’s really more keto. But it’s the basic principle of nutrient-dense food and whatnot. We’re all doing this.

DM: What about you, Mary?

MB: My story is pretty different. I struggled with stomach problems my entire life. I was diagnosed with irritable bowel syndrome (IBS) when I was 16. I was, “Good luck. See you later.” At that point, there really was… I mean, the Internet wasn’t quite as big. There was no research out in terms of what you could do. I grew up. My young adult life had been constantly searching: “How do I heal myself? How do I get better?”

And 2008 was when I discovered the Weston A. Price Foundation. I read Nourishing Traditions: The Cookbook that Challenges Politically Correct Nutrition and the Diet Dictocrats by Sally Fallon Morell, and that was an eye-opening experience.

But what I went through after that… I started introducing a lot of foods that my body just wasn’t ready to accept. A lot of dairy and things. I wasn’t actually healing. The next few years that followed were just trying different diets and seeing what worked. And then I had my son, who’s now four. When he was born and he was only a month old, the doctors found blood in his stool, indicating that there was some allergy of some sort. That point was when I really had to sit down, get serious, and figure this out.

From there, it was actually at one of Hilary’s cooking classes (because I had no idea how to cook) that a fellow student said, “Oh, this food’s delicious but I can’t eat it. I’m on
GAPS.” I’m like, “What’s GAPS?” Of course, I went home, researched, and read the book. Within a week, our family was on GAPS. Almost immediately, we started healing. It began to uncover a lot of underlying issues for myself and my intestinal tract. It’s been quite a journey. I mean, it’s definitely… It’s been amazing.

**DM:** What would you say, for those who aren’t familiar with the GAPS Diet as some of the most important things that they should know or be aware of, and how it’s related to the gut-related chronic diseases?

**MB:** To begin with, GAPS starts as an elimination diet. I think a lot of people don’t necessarily know what that is or what that means. But basically, it begins by taking out all things that are going to cause inflammation within your gut, including high amounts of fiber, processed foods, or anything that is going to be difficult to digest. By doing that, it’s going to give your body some space to begin to heal and lower the inflammation and thus will be able to digest various foods. Do you want to pick it up from there?

**HB:** Yeah. One thing I thought that helps me get my point across, I saw a YouTube video with Natasha Campbell-McBride a few years back, who’s the creator of the GAPS Diet. She was with Donna Gates, the creator of the Body Ecology Diet. They were linking the gut health with autism. Natasha said that a baby’s gut flora is passed down from the mother to the child at birth. It goes through the birth canal. It’s what populates their gut.

I thought about that as a mother of today, thinking of the gut flora of mothers of today versus the gut flora of our great-great grandmothers, who had no antibiotics, no processed foods, no vaccinations, certainly fewer environmental toxins, no genetically modified foods, no birth control pill, and they were probably breastfed. All that is, you know, they probably had a very balanced internal ecosystem, whereas mothers of today probably had all those things.

And then I was also reading an article where the Environmental Working Group (EWG) said that – and don’t quote me on this – the average baby of today, their cord blood had about 287 toxins in it. Not only are these babies today starting off with a toxic burden, but they’re inheriting a compromised gut flora. They’re already starting out with their immune systems a little bit lower.

It’s kind of a tethering scale. What’s going to tip them over, if in fact it does? But really, everybody’s different. The vaccinations being so close together and given so quickly after birth as well as oftentimes kids are not breastfed. They are getting processed foods and having an ear infection and quickly being prescribed an antibiotic, which wipes out all the good and the bad [bacteria]. It’s very hard for them to regain this proper balance.

When the pathogenic bacteria start to win out over the beneficial, it can wear down the healthy villi in the intestinal tract and create the cracks, which then allow the pathogenic bacteria to pass through the gut lining, get into the bloodstream, and cross the blood-brain barrier. That’s why we have all sorts of diseases and issues happening. We’re
basically creating an epidemic with the increase in autism, allergies, attention deficit hyperactivity disorder (ADHD), and epilepsy – you name it. There are just so many more diseases that were created than there were 50 or a few years ago.

The GAPS Diet is really a beautiful thing. It allows you to kind of give yourself a fresh start, take control of your own health, and set your children up for a lifetime of health. Once people kind of understand that process, then it kind of makes a lot of sense. I’m pretty amazed with a lot of toxic burden these days.

DM: I think she’s really one of the major contributions to the health field, helping us understand that one of the (at least certainly me, the first time I ever I heard her, because I never heard anyone really identify this) risk factors for autism is the quality of the bacterial flora of the mother prior to delivery. That clearly identifies the risk factors as birth control pills, antibiotics, and sugar, which decimates the gut flora. If you’re coming in there compromised to begin with, you can…

There are tests that can be done, too, to confirm this. But you have to be really, really careful about vaccinating your children because you’re just asking for trouble primarily because of the mechanism you mentioned, which is this leaky gut that is essentially passed down to the child through the vaginal flora or even worse if they have a C-section.

HB: Right. And you just don’t know. You could be the one that, you know. Your plan for one vaccination is going to tip the scale. You might… There are certainly other things that are factored in – yeast, fungus, or others.

DM: Sure.

HB: But I also think it’s so important, like you said, not only for people with children but if you’re planning to have children. You have an opportunity to totally clean up your intestinal flora and your tract in time to pass down a very good thing to your child, set them up, and save yourself a lot of pain.

DM: Yeah. It’s not like vaccines cause autism directly, but it’s certainly just like smoking doesn’t necessarily cause cancer. But we know indisputably that it increases your risk. I mean, no one is going to argue with that. It’s the same scenario here. It doesn’t mean if you have a compromised gut flora and you get these vaccines, you’re going to have a child with autism or some type of autistic disorder. But it certainly increases your risk.

HB: Right.

DM: Why increase the risk when it’s an easily reversible risk factor? I mean, much easier than stopping smoking.

HB: Right.

MB: I can actually confirm. I had a comprehensive digestive tool analysis (CDSA). My son had the same sort of stool tests, and he had the exact same makeup that I had. We got all the confirmation that we needed. I’ve done this many times to see how the gut
has healed, and it's been years. And it will continue to take years I think simply because my issue has been so long in the making.

That’s one thing about GAPS: you really have to have a lot of patience. You have to be on-board for a while because as long as it takes you to destroy your gut, it takes an equal amount of time – well, not equal but a few years. Yeah, hopefully not a decade like it’s in been in the destroying piece. But we really owe it to the next generation and ourselves. I mean, if you don’t have your health, you don’t have anything.

DM: Yes. Well, let’s go a little bit about the specifics of the GAPS Diet, because it is a bit counterintuitive. The average person who has a superficial awareness of health would say, “Hey, vegetables. I should eat as many vegetables as I can because it’s, you know.” I think that’s a basic premise.

But there’s a modification or revision of that in the GAPS Diet, which is counterintuitive and which is addressed because of this leaky gut issue. That’s just important. Vegetables can be counterproductive. Why don’t you go into what foods are excluded, how that works, and the different phases of the GAPS Diet?

HB: Can you start?

MB: GAPS starts with an elimination portion of the diet, the intro. It goes in six stages, where Dr. Natasha has figured out various foods that will easily be digested. You basically start with bone broth. The idea here is that the amino acids in the bone broth are very easily digested and it will go right into your gut to help heal and seal the gut lining, because that’s the first piece. We’re both eliminating foods that are hurting the gut as well as beginning to rebuild...

DM: Can I stop you there?

MB: Sure.

DM: I know this is Dr. McBride’s certain assertion and belief as to what it’s doing, but I think it might be overly simplistic. I just watched a presentation that Dr. Kaayla Daniel gave. She wrote a book about bone broth. I don’t know if it’s out yet; I think it might be coming out in November. She gave this presentation at the Ancestral Health Symposium. I was just shocked – I had no idea of the additional benefits of bone broth other than the ones you just mentioned. But it may have some very profoundly powerful immune-optimizing components in there.

It’s very rare where I encounter a new therapy that I think is really a foundational building block for the treatment of autoimmune diseases. I’ve treated thousands of patients with rheumatoid arthritis, which is one of the primary autoimmune diseases. But this is really an essential... There’s no doubt in my mind that this is huge. This is absolutely groundbreaking stuff. It sounds so simple. But I mean, it’s just like… That is probably one of the main reasons why the GAPS Diet works – it’s because you have this foundation of bone broth.
Many people just easily dismiss this like, “Oh, I’m not going to be baking bones.” They’re like, “What the heck?” The hassle factor. But it is so crucial. I couldn’t emphasize this more strongly. I’ve actually contacted a few people I know who had really serious challenges with autoimmune diseases. This would be things like lupus or multiple sclerosis (MS). I’m telling them to get on this bone broth, because it’s just magnificent. Sorry for the interruption, but I just wanted to emphasize the massive importance of bone broth.

**HB:** Right. That’s so helpful, so healing. And it’s so good. Once you get the hang of it, it is an easy, quick meal. You can freeze it. I mean, God, heat up or create a bone broth, throw in some spinach and the egg yolk.

**DM:** Give us the hints, because obviously it’s bone broth, right? You don’t want to use just any old bones.

**HB:** Right.

**DM:** What’s the best strategy to acquire the raw materials to make this magnificent healing concoction?

**HB:** You definitely want to get the best bones you can get, say, from pastured animals. If you can find a farmer in your area, and certainly reaching out to your local Weston A. Price chapter leader, [that] is going to be key. I also help run an Amish coop. We could get stuff from them, which is really key because they make bone broth. There’s also a broth man and I think a brotheria. There are resources to get homemade bone broth if you can’t make it yourself.

**DM:** Right.

**HB:** But you want to find that farmer that’s supplying with good bones from pastured animals. That’s helpful.

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**DM:** Just a quick question. I’m going to play devil’s advocate here for a moment. Say, someone doesn’t want to go through the hassle factor, the inconvenience, or necessarily even the expense of getting these raw materials, the correct raw materials. From your experience and review of the literature, is there going to be a significant difference if they use bones from confined animal feeding operation (CAFO) animals? Obviously, there are going to be toxins in there. But would they still get some of the healing benefits?

**MB:** That’s a good question.

**HB:** I think I remember Sally Fallon Morell saying eating any liver’s better than no liver. I think the same would go with bones. If you can only get CAFO bones, I guess you go with that. You can still get some healing benefits certainly. But it would be better to…

**MB:** Far better.
HB: Ask your grocery store, too. They might have access. They might be a little more expensive, but bones in general aren’t too pricey.

MB: Yeah, they’re usually pretty cheap. It’s one of those things where the bone broth is such a staple of the GAPS Diet that if you go through any expense this might be the one.

DM: Okay.

MB: Because in the beginning, you’re going to be eating soup. You’ll be living with soup. And we have lovely recipes for soups. But you want to make that as high-quality as possible.

HB: And there are a lot of resources online, too, which are in the book. I’m happy to give you.

DM: Okay, great. Well, give us the best tips on how to make this high-quality bone broth, because that’s really, you know. If you’re going to summarize GAPS really in one sentence or two words, it’s bone broth, right? Would that be a fair assessment?

MB: Yeah.

HB: Yeah. You’ll be making bone broth.

DM: Okay.

HB: You almost are having it kind of continuously on your burner just going. You’re ladling it right out of the stock pot into the soup bowls. Or you’re making soups, freezing them, and then starting fresh. You really just kind of take… There are a few ways you can make it. You can make it from a whole chicken by just throwing the whole chicken raw in the pot with water. You can put a little vinegar in to leech the minerals out of the bones, and let that sit for a little bit. Or you can just roast chicken. When you’re finished, throw the carcass in the pot, and add some vegetables.

One of the most important things that took me a while to do was to add in chicken feet and chicken heads. I think I added the chicken feet and then it took me another year to throw in the heads. But they’re so filled with collagen.

DM: Oh, yeah.

HB: It’s so healing. You can just kind of get over that. When you talk to people from other countries, they’re like, “Oh…” My babysitter from Trinidad, they make chicken foot soup. She’d sit there and eat the chicken feet. We’re just not used to that in this country and certainly in this time. Maybe our great grandparents did more of that. But you guys kind of, you know.

MB: Get over it.

HB: Get over it. [Inaudible 23:04]
DM: No. I could recommend that probably the same people who are going to supply the bones would be the suppliers of the chicken feet, too.

HB: Yup.

DM: To me, it's crazy to go through all the hassle factor of creating this magnificent broth without the feet. I mean, it's just unacceptable.

MB: Yeah.

DM: If you're going to do chicken... I mean, if you're making bones from cows, you wouldn't put the cow hooves in there, would you?

HB: You could. I don't know. But pigs' trotters, you can with pigs. I've never done a cow broth.

DM: Okay.

HB: But pigs you certainly can. And if you think about, like I said, other countries, they're throwing the whole animal right into the pot basically.

MB: Right.

HB: Taking out and using every bit of the animal. You kind of just have to get back to that.

DM: Now, obviously, this is going to require... Let's get to the specifics of cooking this. First, you've got the bones, which is the key part of it. You can certainly spice it up with spices, herbs, or vegetables. But that's the finetuning. But you have to create this. It's going to require heat in a relatively long period of time. Can you go over the pros and cons of using a gas or electric stove versus a crock pot?

HB: Yeah. I have a gas stove. You kind of bring it to a boil. One really important thing is that sort of the scum is going to rise to the top, which are the impurities, certainly if you have a CAFO carcass or whatever you're going to use.

DM: Excuse me, one moment. We were using the word “CAFO.”

HB: Yes, we shouldn't.

DM: And we're not defining it. Most people listening to this don't know what it is. That's confined animal feeding operations or basically factory-farmed animals.

HB: Right. Thank you for doing that. You're going to want to skim the scum off the top as it's coming to a boil. Once it comes to a boil, it kind of puts all the scum back in. You want to kind of carefully... That's probably the most annoying part. It's waiting. It's like the watch pot. You're always waiting for the scum to come up and skim it. But once you've done that, you bring it to a boil.

DM: How do you skim it?
HB: I just take a ladle or a spoon and just sort of put it off into a bowl.

MB: It's very frothy. It'll just come right off.

HB: Once it's done, you kind of notice that it's enough to get every last bit or piece of scum. But you do your best. You turn it down and let it go all night. If you don't feel comfortable with that, you can certainly let it sit overnight and then turn it back on in the morning. Bring it to a boil, skim the scum, and then let it simmer. So, 12 to 24 hours.

And then a crock pot is an excellent way to do it, especially if you’re worried about leaving your stove on. You don’t even have to think about it. You would want to bring it to a boil, skim the scum, and then put it into the crock pot. You’re not going to get it to a boil in the crock pot.

DM: Sure.

HB: But then you can just leave it and forget about it.

DM: What temperature setting do you leave it on? Is it the low, medium, or high?

MB: It would be the low.

HB: Low, yeah.

DM: Okay. All right. That might be a more energy-efficient way to do it, too.

HB: Yes.

MB: Yeah.

DM: Because we’re not talking about making this once or in rare occasions; we’re talking about this as a major part of your diet. And actually it’s an interesting serendipity, my interview with you and then me watching Kaayla’s presentation at the Ancestral Health Symposium. I’m absolutely re-motivated. I’ve done bone broth in the past, but I’ve never integrated it, primarily because of the hassle factor of making it. But I’m absolutely convinced of the magnificent healing potential of this food source. I think it’s crazy not to integrate it into your lifestyle. I’m really making a commitment to integrate this myself personally.

MB: That’s great.

HB: Right.

MB: It’s definitely a process. I think one of the reasons why people get so intimidated by the GAPS Diet is that you have this constant cooking piece in your life. It takes a time commitment.

DM: Yeah.

MB: You’re so used to just grabbing and going. But once you get the hang of it, it really does take up just a small percentage of your time. It’s getting over that learning curve
and that hump. Once you get it, you’re just like, “Hey, broth’s on. Ferments are in. The dehydrator’s on.” You’re good to go. But you got to get there.

HB: One thing that I was going to say is that it’s really hard to be healthy when we have this society of speed and convenience. It’s like everything is fast, fast, fast. I was saying to Mary that I was watching a baby eat the other day, a two-year-old who’s squeezing those pouches that are like organic butternut squash that goes with plums, prunes, or whatever. We’ve sort of taken away now even one step further that connection to foods, the smell of food and cooking made in the kitchen, and the connection between mother and baby. Now the baby can feed himself or herself.

It’s really important. It’s one of the biggest gifts you can give to yourself and your family: to slow down, just enjoy the process of cooking, and then reap the benefits of sitting around a dinner table with your family. Make that a priority. Notice everybody eating the same thing. My 6-year-old, 7-year-old, and 10-year-olds are eating grass-fed steak with broccoli, salad, and ferment versus one eating chicken nuggets, and mom and dad eating the grass-fed steak. It’s really, really rewarding in the end. You just have to kind of buckle down and learn the concepts and the techniques, and then you’re good to go.

DM: Could you comment also on the importance or necessity of using a variety of different animal-type bones? You’ve mentioned the chicken, of course, which is pretty easy and simple and I imagine the best place to start. But how about the beef bones? Which type of bones do you go for, how do you integrate those, and are there additional benefits of using a variety of animal bones?

MB: Well, there are always benefits in switching things up. I’m sure there are different nutrients in each type. The main that we’ve use are fish bones, chicken bones, and beef bones. All of them carry different flavors. The reason why we suggest starting with chicken is simply that it has the most mild flavor. Beef can be pretty overpowering sometimes.

I think a lot of it is personal preference. If you find that you love fish stock or fish broth but you can’t do beef broth, don’t beat yourself up. You just go with what works for your body. They all taste great. It’s great to have variety. Also it might become an issue of sourcing. Maybe it’s something that you can easily… If you have a farm up the road and you can get beef bones cheap, then that works for you. But sourcing fish bones is much, much harder.

DM: How do you source fish bones? I’m not familiar with that.

MB: You can go to your fishmongers or your local grocery store and ask, which is what I did. We live pretty close to the ocean.

[----- 30:00 -----]

DM: Sure.

MB: Getting down to the fish pier is not as big a deal for us, you know, if you’re in the middle of the country obviously.
DM: And the people who sell the fish… I’m not sure. That’s not a butcher obviously. I’m not sure what the term would be.

MB: I think they call them fishmongers.

DM: Fishmongers, okay. That’s typical for them to extract the bones?

HB: Or you can just get the whole fish, too. And just put it that way.

DM: Okay.

MB: But I mean, if you are just to get the bones, it’s much cheaper.

HB: And the heads.

MB: Because normally when they fillet a fish, they’re tossing the bones anyway.

HB: Right.

MB: Or it’ll be reused in some way, shape, or form.

DM: Oh, so use the fish heads?

HB: Yeah.

MB: Yeah.

DM: Now, do you actually eat the fish heads, too, after they’re brothed in? Or do you throw and toss them?

HB: I don’t.

MB: I don’t.

DM: Okay. It’s okay to toss the fish heads?

MB: Yeah.

HB: Like in anything, too, it’s always good to have a variety. I know especially with ferments, too, every time you switch it up, you’re adding a different beneficial bacteria into your gut. Certainly if you did the same one every day, it’s not going to hurt you. But the more you can switch it up, then… Having kefir and yogurt or switching things up is making your gut, kind of keeping it on its toes and adding new things. It’s good to always have a variety if you can.

DM: That’s terrific. Well, that is just really an important component. What’s the next step after bone broth?

HB: After bone broth… In the very beginning stages, the first stage, you’re going to have bone broth with boiled meat and boiled veggies, very easily digestible veggies like carrots and zucchini. You slowly add an egg yolk, a pastured egg yolk, and then you
move on to avocado. You’re slowly adding things in, bit by bit and seeing if there’s a reaction.

**DM:** Before we go to that.

**HB:** Yeah.

**DM:** I would say the majority of people that are viewing this are likely healthy to begin with. That’s why they’re watching. They just want to maintain their health and not fall prey to some of these chronic degenerative diseases. If a person’s healthy, they don’t have to jump in at the beginning. They could jump in right at level 6 or whatever, right?

**HB:** Right, into full GAPS.

**DM:** Yeah. I just want to make that clear that you don’t have to. But if you have these symptoms… What would you say the target disease groups would be for someone with GAPS? If you could name a few.

**MB:** It’s going to be all your autoimmune diseases. Allergies, asthma, autism, things like lupus, attention deficit disorder (ADD), and eczema can fall into that category. Eczema. Dr. Natasha Campbell-McBride even talks about schizophrenia.

**HB:** And the psychological disorders, IBS, Crohn’s, and colitis.

**DM:** I can give an interesting testimonial, too. One of my friends has a daughter who was in college two years ago. She was losing weight. She was just entering college and was basically allergic to almost everything she ate – almost everything. She probably would have been dead. I mean, she was going downhill that fast. He asked me my opinion and I said, “Go on the GAPS Diet.” It literally transformed her life. It was like a miracle. It’s a very powerful tool in these conditions. I couldn’t endorse and recommend it more heartily.

**HB:** One thing I’d like to say, too, is that if you do have a condition and you feel like you need to start in the intro, if you’re totally overwhelmed and you need to kind of ease into it, you can start on the full GAPS for a couple of weeks, a week, or a month just to kind of get your feet wet. And then when you kind of got some of the techniques down, then go back to the intro and start again, so that you’re not… If you jump into the intro, sometimes people find it’s too overwhelming. But if you’re ready for it, if you’ve been cooking this way for a while, then I would say start there.

**MB:** That’s actually what our family did in part to learn to cook that time. We were doing full GAPS. We just searched for how to do GAPS properly and get all that information together, so that I was able to see what to introduce when and how to move on from stage to stage. We did full GAPS for a few months and then we went to the intro.

When you do the intro, you can’t… Say, you’re doing the intro and you’re like, “Oh, this is going great,” and then you want to stop. You can’t necessarily just stop cold turkey because your body is now in this healing process. If you’re in a few weeks of bone broth and soups and then you say, “I’m going to go have a pizza. I can’t do this anymore,” you
are going to find yourself in a healing crisis. That’s why we always say you have to have a lot of patience and just, you know.

DM: Hey, Mary, it sounds and looks like you’re talking from personal experience.

MB: I am. It’s a little bit of pizza.

HB: But it’s called die-off, and that’s what happens to the pathogenic bacteria. You’re starving that basically in your gut. Your body can experience all sorts of, you know. We had every kid threw up within 24 hours. They’re just in the bathroom. We’re just like, “Is this for real?” But ours thankfully subsided after about 24 hours. My husband and I just felt like we were walking through mud for kind of a week like, “Ugh, we’re so tired,” and then they subsided.

But people can have all sorts of symptoms of die-off, depending on how dire their situation is. But you just have to kind of push through, take it, understand yourself, and take it back. Don’t make plans to go to any big parties or anything.

DM: And then maybe if you can give a typical range of the process that people… I mean, you gave your example with your family for a few days or so with this die-off reaction. But what’s the typical range of times that you experience and the times that you spent at each stage of the program?

HB: Typically it’s about two to five days per stage. We did five days per stage. But certainly I think some people hang out at a certain stage. If you find you can’t quite move forward, you might hang out at Stage 3 or 4 for a month until you manage to say, “All right. I’m totally comfortable here. I have it down,” and then you can reintroduce things. If you have a reaction, you step back and then move forward. But typically, I’d say, two to five days, right?

MB: Yeah. And I think…

DM: I’m sorry for interrupting you. But the whole premise here is to heal this leaky gut. People think that that’s just a metaphor or something. But this is a literal leaky gut. There are holes in the integrity of your gut that these large protein molecules get through. The purpose to go into this transition is to heal that gut.

HB: Yes.

DM: Is that correct?

HB: Correct.

DM: All right. Mary, sorry I interrupted you.

MB: Oh, no. I was going to say that because my gut was so compromised, it took a lot longer per stage. I think that most of your viewers who are healthy, they could easily go through the intro stage. A month and a half, and then it would be a great reset for them. Even if they are healthy, it’s still a great way to kind of boost your immunity and just
keep your good health rolling. For people who are sick and dealing with these things, it can be a much longer process.

**DM:** Yeah. Someone like yourself who’s relatively thin and certainly not overweight... I imagine many people, especially like my friend’s daughter, she was at risk of potentially dying from malnutrition. How do you get enough calories with this approach in the intro stages to make sure that you don’t lose even more weight?

**HB:** Right. You do lose weight.

**MB:** Right. Well, you might lose some weight. However, you are adding in animal fats. Once you get the egg yolk in, that’s a great amount of fat.

**HB:** Avocado.

**MB:** Avocados.

**HB:** You balance out. You kind of initially lose weight. But I would say I didn’t really have that much to lose, but I probably lost five pounds. My husband had some and he lost more. But it’s a very balancing diet, and your body naturally kind of comes to an equilibrium. And you’re adding in... I mean, I couldn’t get enough animal fat. I was putting in a big tablespoon of lard, pastured lard, in every single bowl of soup.

I actually, in the book, talked about when we actually moved to Stage 2. We were at my cousin’s house, at my uncle’s funeral, and I brought my soup. It was the first day of the egg yolks. I was so excited to have a little more nutrition. I was like straining my egg yolk. My sister distracted me and my egg yolk went down the drain, and I was like, “No!”

**DM:** All right. Now, wait, you gave us a little tease there and you can’t leave that alone. You said pastured lard. This is not something you go to your local grocery store and get. Where does one get pastured lard?

**HB:** You’re going to want to find, if you can, a farm down the street that’s doing things right. Or there are certainly resources online. Like I said, I have this great Amish farmer. And then the US Wellness Meats is a great resource.

**DM:** That’s good to know. I didn’t realize they carry pastured lard.

**HB:** Yeah, I’m pretty sure. And they have chicken fat, beef tallow, and duck fat.

**DM:** Interesting. That’s terrific. That is really good.

**HB:** There’s more and more coming out, more and more resources.

**DM:** Because you’re not going to get this at the grocery store.

**MB:** No.

**HB:** No. Yeah, you want to be careful. Somebody said to me, “Oh, I got some lard at the grocery store.” And I was like, “Hydrogenated, ugh.”
DM: Yeah. I guess if we turn the clock back a 120 years, we might be able to get it at the grocery store, but certainly not today.

[----- 40:00 -----]

HB: Right.

DM: Not today at all. Hopefully, in the future, that’ll be the case. We’ll create a market for this, and enlighten, inspire, and motivate the people who run these commercial enterprises, because there clearly is a market for it. Not only is there a market for it and there’s a need for it, but there’s an increasing awareness in the importance of this healing modality.

HB: Right. Definitely. It’s coming. I can feel it. It’s coming. More and more people are getting sick. More and more people are trying to take the power back into their own hands and heal themselves. There’s going to be a demand.

DM: Yes. Well, I think most of our viewers now got a pretty good understanding of what the GAPS Diet is through this discussion. But to further refine that understanding, perhaps you can compare it to another popular diet that has many healing principles and is popular contemporary-wise, which is the Paleo Diet.

HB: Right.

DM: I’m wondering if you can comment on the differences.

HB: Yeah. The Paleo Diet is very similar in many ways to the full GAPS Diet. But some people can have health issues and jump right into Paleo and resolve their health issues with that. But the GAPS Diet, just like what we’ve been saying, is really a healing protocol to heal and seal your gut. That’s the major difference from Paleo.

Food-wise, with Paleo, dairy is not allowed at the start of Paleo, though I feel like more and more Paleo people are jumping on-board with raw dairy and cultured dairy for sure. And then legumes are not in the Paleo Diet but are allowed on the GAPS Diet – the sprouted legumes. I think with Paleo, if you were to have, say, a bowl of lentils, sprouted lentils, once a month, I don’t think it’s going to throw you off track. But if you’re having it as a mainstay of the diet, the Paleo people think that’s not okay because the nutrients that you gain from animal products versus a bowl of beans or whatever is not equal.

For people who argue that there are cultures that survive on legumes alone, getting that, they are going through painstaking processes to soak, sprout, and cook their beans to make them more digestible. Also these cultures are usually having organ meats, bone broths, and fermented foods, and good fats, and adding in all the other stuff to get the nutrients. It is applicable to anybody. Anybody who wants to do Paleo could easily follow this cookbook and have success. There are a lot of Paleo-friendly cookbooks.

DM: Yeah. And then you mentioned the fermented foods. I’m a huge advocate of that. It got started actually when I had dinner with Dr. McBride I think two or three years ago at
one of the Weston Price conferences and got inspired. I followed that and have been doing it ever since. We actually got so inspired that we actually took about two years to develop a probiotic starter culture…

**HB:** Oh, right.

**DM:** That actually you can ferment your vegetables with. It’s interesting. As far as I know, it’s the only one in the market that actually has strains to produce high amounts of vitamin K2, which, of course, is important to balance out the vitamin D. You basically get free vitamin K2 because this is an expensive supplement if you have to buy it.

**HB:** Right.

**MB:** It is expensive.

**DM:** It makes a lot more sense to get it for free. I think they should be part of everyone’s diet and it typically is in mine unless I forget. Because you know, when you put together your meals, it’s like, “Oh, yeah, this, this, and this,” and by the time you’re finished and you forgot to add the fermented vegetables.

**HB:** It’s sort of just become a main staple on our table. I grab the ferment and I put it out on my table.

**DM:** What type of ferments are you using aside from the vegetables?

**HB:** I love ginger-carrot [kraut], sauerkraut, garlic kraut, and hot sauce. Fermented hot sauce is a good one. Pickles. My kids – a good tip because they weren’t so thrilled to be eating sauerkraut juice – we would take a syringe of pickled juice and give them shots of their ferments in the beginning.

But I did just have a woman call me who just started the GAPS Diet. She said, “Oh, I got my sauerkraut and it only has vinegar, water, and salt.” I said, “Was it from the refrigerator section?” She said, “No.” She said, “Oh, I got to go back to Whole Foods.”

**MB:** Right.

**HB:** Because you want to make sure that you’re getting live probiotic fermented foods. If it’s in the middle aisles, it’s dead.

**DM:** Yeah. And just to emphasize that, we’ve actually contracted Cornucopia to do a report on the yogurts because it really annoyed me several years ago when I had to go and get some yogurt for a friend of mine who was busy in the hospital. It was like 99 percent of the yogurts there were terrible. They were junk food, absolute junk food. They should never be purchased by anyone. They’re desserts.

**MB:** Yeah.

**DM:** They’re not health foods. But the typical person who’s not enlightened is going to think, “Hey, there’s my fermented food. Go and get some yogurt.”

**HB:** Right.
MB: It can be very confusing, especially if somebody, you know. The word “fermented,” you think, and then there’s “cultured.” My nutritionist won’t even let me use the word “fermented” anymore because that can be associated with all things that are done with vinegar. You’re not getting those live cultures. It’s a different process altogether as opposed to getting all the Lactobacilli and all the cultures via actually culturing something. It’s kind of a word play. Some people can get pretty mixed up, I think. They grab the things in vinegar and they think, “Oh, this is super healthy.”

HB: And you have to read labels, no matter how good something looks on the outside. It’s just... Sugar is ridiculous. It’s in everything. You might pick up a jar of pickles and there’s high-fructose corn syrup in it. Whether it’s the food section or not, sugar is the number one enemy of the body I really think. It’s just within everything.

DM: Yeah. I couldn't agree more. It's definitely a big issue. But it's just so exciting to have access to these tools. Because once you understand the truth and really avail yourself to these healing foods, your body just kicks into healing mode. That’s what it’s designed to do. It’s designed to be healthy; it’s not designed to be diseased.

HB: Right.

DM: You just have to understand the foods to feed it. I think GAPS is really an important part of that equation for so many of us who have these challenges.

MB: Right.

DM: It’s a really great tool. You’ve put together a wonderful book and a resource to help people implement this. But from your experience in teaching people how to integrate this into their life, what would you say be the most challenging aspect of implementing the GAPS Diet?

HB: We both have thoughts on that. Implementing, certainly finding your resources, and setting yourself up can be a challenge in the beginning. But once you get it, you’re good to go. But I would say that the most difficult part for us was the resistance that you bump up against. There are just people, you know. It’s not convenient for anybody to feed your kids really. It’s overwhelming and daunting. People go, “What are you doing? Why are you doing this to your poor kids? They can have popsicles at every single soccer game.” You’re going to have the rolling of the eyes and the criticism. That, for me, was really hard.

DM: Socially challenging.

HB: Yeah. You just kind of become isolated and lonely. You just really have to believe in what you’re doing. There’s nothing more rewarding than seeing your children benefit from it or feeling good yourself every day.

DM: What strategies have you found to address that have been useful?

HB: I would say setting yourself up. A huge thing is reaching out to your Weston Price chapter leader. There are GAPS practitioners all over the country and probably all over
the world now who are ready to assist you with everything. You can sit down with one and know. They'll support you every step of the way. At least mine was super reasonable. Monica Corrado of SimplyBeingWell.com, she’s a GAPS certified chef and trainer. She does cooking classes throughout the country as well.

Certainly setting yourself up and looking at the resource section of our book. We pretty much laid out where you can get everything you need. As soon as you set up your kitchen, you’re good to go in that sense. In terms of friends, you’ll find your friends, who’ll totally support you. For my daughter, she has fortunately a couple of friends who are from very healthy families. They totally get it. It’s just so, so nice to be able to send her over there and not worry about it. You kind of find your easy avenues and then you know when to pump up.

**DM:** That’s good to know. There are consultants available and resources. What’s the best way to find these individuals and these groups?

**HB:** If you go to the Weston Price Foundation website, there’s a list of local chapter leaders. It’s for every state and even across the country. You just call or email them. They will be able to give you resources in that area. As far as GAPS practitioners, I think it’s GAPS.me. That has a list of practitioners. You can Google “Find a local GAPS practitioner.” Monica Corrado is at SimplyBeingWell.com. She actually vetted every single recipe in our book to make sure it was GAPS-legal. She’s like a GAPS guru.

**DM:** Okay, perfect. Are there any other challenges other than the social isolation?

**MB:** My biggest challenge I think was learning how to listen and trust that my body actually knows what’s good for it. I grew up with parents who, if the doctors said, “Take this pill,” they took the pill. They didn’t even question it. Although I’ve always been very curious and never really wanted to just listen to what somebody said to me – there’s a part that when you’re not well you want to look to a book and you want to read it. It will say, “This is what you do now.” Or look to another person, doctor, or practitioner to say, “This is what you do now. Go for it.”

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But our bodies are more complex than that. We have bio-individualities. With GAPS, it gives you space and time to actually see how foods interact with your body. For me, listening to that was hard because I wanted to eat something and my body was saying no. I wanted to override it and I couldn’t. That process, it’s kind of a warning. It’s a dying out of the things you’ve maybe eaten your entire life. It’s a cultural shift.

Food is so integrated into everything you do. You eat it every day. It maybe is not something that you think about, but it’s the way in which we celebrate and it’s the way we sometimes mourn or deal with stress and things like that. It’s a big revolution that you end up taking on, changing the way you eat. Sometimes sucking it up and saying, “I actually can’t have eggs even though they’re delicious and even though they’re super nutritious.”

**DM:** Well, only in the short term, too.
MB: Yeah. Right. In some instances, you can begin to reintroduce things, but it might just take your body a while to heal before you’re actually able to do that.

DM: What are the parameters that one knows it’s okay to advance to the next level?

MB: Well, you’re going to just start...

DM: Or is it just a timeframe like your experience, like three to five days in each level before you advance?

MB: It’s not really a timeframe; it’s more of how your body is reacting. Let’s say, you’re a parent with an autistic child and you are making sure that your child isn’t doing the behaviors that got you to go to the GAPS Diet to start with, whether it’s [inaudible 52:21]. For me, it was actual stomach pain. My body is pretty clear about what it can and cannot have. If somebody’s healthy and they’re not experiencing any symptom, then yes, it’s three to five days. Because that’s just how long it’s going to take you to actually introduce these foods.

HB: Right.

MB: It’s very variable, depending upon what brought you into GAPS and what issues you’re dealing with.

DM: Okay, perfect. Are there any other challenges about the implementations of the GAPS program that you’ve encountered, the common ones that people might expect? Because if you know something to expect, you’re already a bit forewarned.

HB: Right. I know a friend of mine whose husband had so much die-off that he gave up. He said, “I’m not going to do it. I’m good.” You have to be prepared. If you know you’re headed into it and you have severe issues, expect that. Expect the worse and know that it’s not going to last forever. You just have to get through it. But also like I said, I don’t make plans. Maybe take a few days off of work. Just plan to chill out and really focus on yourself and healing. That can be totally variable. And if you’re doing it with several family members, you’re juggling. You’re not only cooking but you’ve got one kid in the bathroom and a husband lying down. You could have a lot going on for a week or so.

DM: But the bottomline is it’s worth it. It’s totally worth it. It’s not going to cost you a lot of money and resources to do this, but it will cost time. It’s a commitment of energy to do this. But when your back’s against the wall in conventional medicine or even natural medicine doesn’t offer you a lot of options, this is a really important resource that you can implement into your life with pretty phenomenal results on a consistent basis.

MB: Yeah, it’s amazing.

HB: I would say, too, that cost can be a factor for people. It does cost more money to buy good food, but if you think of it as an investment in your health... And really one of the main benefits is that my kids haven’t been to the doctor, aside from the check-up that is mandatory for their school, in five years. They just – and knock on wood. But every year, they’re not sick. They have healthy, strong immune systems.
DM: Well, the cost is relative, too. I mean, Americans spend less for food than any other country in the world. It’s going to cost more than that, but it’s probably still going to be less expensive than in most other countries or than people are spending in other countries.

MB: Right.

HB: Right. They just have to realize the value and the taste. I mean, it’s so good. I think it’s really like… My cooking class is really like, “Gosh, it really tastes good.” People are just used to so much processed [food], sugar, and salt. People need to retrain their tastebuds. It’s amazing how delicious real foods do taste.

DM: Well, I’m just greatly thankful for the time, effort, and energy you put together to create this phenomenal resource, *The Heal Your Gut Cookbook: Nutrient-Dense Recipes for Intestinal Health Using the GAPS Diet*. It’s great. It’s available online at Amazon or your favorite bookstore. If you’ve got a health challenge, I’d think you’d really be highly irrational not to consider getting this book and applying it, because it could really help you and your family enjoy a higher level of health and wellness. I really appreciate you doing that.

MB: Thanks.

HB: Thank you. We really hope to inspire a lot of people to just take the plunge and try it out.