

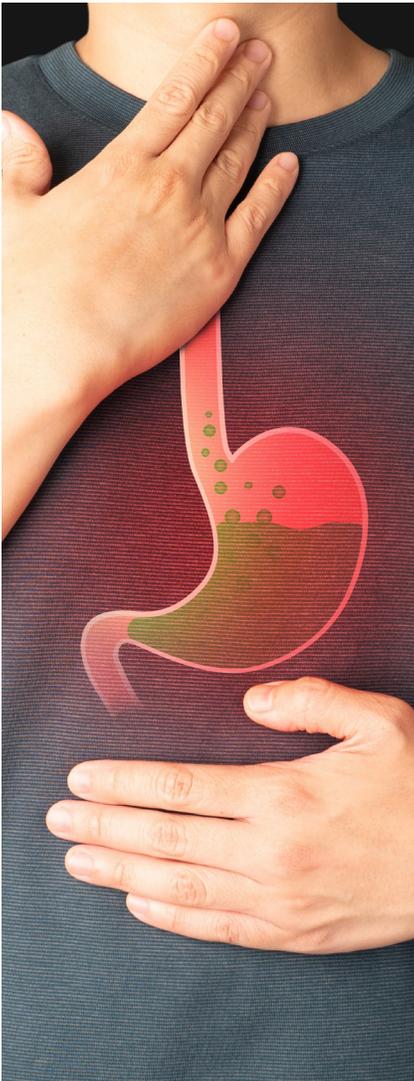
ACID BLOCKER RECOVERY PLAN



Long-term use of acid-blocking drugs like proton pump inhibitors (PPIs) has been linked to potential risks including nutrient deficiencies, bone fractures, kidney disease, pneumonia, and gut infections like *Clostridium difficile* (*C. diff*).

Suddenly stopping PPIs can cause a rebound surge in stomach acid. To reduce this effect, it's best to taper slowly under medical supervision.

The following protocol is for informational purposes only and may be useful for you and your healthcare provider as a guide.



SUGGESTED TAPERING PROTOCOL

DAYS 1–7:

Take half your usual PPI dose and begin the following support:

- ✓ L-glutamine powder: 6–12g daily on an empty stomach (first thing in the morning)
- ✓ Probiotic: 100 billion CFU daily
- ✓ Digestive enzymes (plant-based): With meals; should contain 100,000 HUT protease or more

If heartburn arises, use a natural heartburn remedy as needed (available at most health food stores).

DAY 7 AND BEYOND:

- ✓ Switch to a digestive enzyme formula with hydrochloric acid (HCl) — take only with meals, never on an empty stomach.
- ✓ Continue taking L-glutamine and your probiotic.
- ✓ If symptoms improve while using HCl, it may indicate you had low stomach acid (hypochlorhydria), which is a common cause of upper GI discomfort.

WHEN TO STOP:

- ✗ If symptoms worsen at any point, stop the protocol and consult your provider. A small number of people may have high stomach acid (hyperchlorhydria) and need a different approach.
- ✗ Talk to your doctor about your concerns with long-term PPI use and your interest in a safer, more natural path to digestive health.

⚠ **This guide is not a substitute for medical advice. Always consult your physician before changing or discontinuing any prescribed medications.**



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