

# Hydrochloric Acid Challenge



## **READ COMPLETELY BEFORE STARTING!**

### Why take supplemental hydrochloric acid?

Taking supplemental hydrochloric acid (HCl) can assist in lowering the stomach pH, which assists in the proper breakdown of food and increases nutrient absorption. Proper gastric acidity triggers the necessary cascade of events that are critical for maintaining proper digestive function and, in effect, “sterilizes” the contents of your meal. This challenge is designed to find your optimal dose of supplemental HCl. The goal is to determine the amount you tolerate before provoking symptoms of excess acid.

**Take HCl mid-meal**, after at least a few bites of your food. Begin by taking 1 HCl supplement (150-mg betaine hydrochloride tablet) per meal. As long as you don't feel adverse digestive symptoms, continue taking 1 HCl with every meal for 3 days and then increase the dose to 2 per meal. Continue taking 2 per meal for 3 days and, as long as no adverse digestive symptoms have arisen, then increase the dose to 3 per meal. Continue taking 3 per meal for 3 days and then, if no adverse digestive symptoms, increase the dose to 4 per meal for 3 days. When you get to 5 of the 150-mg tablet formula per meal, if no adverse symptom, switch to a higher-dose formula. This will keep the pill count down and is more economical.

**5, 150-mg betaine hydrochloride tablets = 1 higher-dose formula**

Example:

Day 1-3: 1, 150-mg tablet per meal

Day 4-6: 2, 150-mg tablets per meal

Day 7-9: 3, 150-mg tablets per meal

Day 10-12: 4, 150-mg tablets per meal

Day 13-15: 5, 150-mg tablets per meal OR 1 higher-dose formula

Day 16-18: 6, 150-mg tablets per meal OR 1 higher-dose formula and one 150-mg tablet

Day 19-21: 7, 150-mg tablets per meal OR 1 higher-dose formula and two 150-mg tablets, etc.

The maximum dosage is 6 higher-dose tablets (no more than 4,200 mg).

If and when any adverse digestive symptoms arise, cut back the dose to the previous dose where there were no adverse symptoms present. For example, if at four 150-mg tablets per meal there are no symptoms, but when the dose is increased to five 150-mg tablets per meal there are adverse digestive symptoms, then go back to 4/meal. If no adverse digestive symptoms are present at that point, 4/meal is the optimal dose.

Over time, and as the body increases its own capacity to produce HCl, that dose may also begin to trigger symptoms, which is the indication that it is time to go reduce the dose again, in this example, to 3/meal.

#### TIPS:

- It is critical to find your upper threshold (the highest dose you can handle) in order to ensure you are fully digesting and absorbing your food.
- At some point, you will likely determine that a particular dose is too much for you. For some, this may be a feeling of warmth in the stomach or chest, or a heartburn sensation. For others, too much supplemental HCl causes a gurgling feeling in stomach or throat, gastric distress, or other type of digestive reaction. Once you find your upper threshold, back down to the next lowest dose you were previously taking. Do not stop until you find your upper threshold.
- If you get immediate burning from HCl, stop it immediately and let your practitioner know. Preliminary stomach healing may be necessary. This is not an indicator that you don't need HCl but rather that healing must take place first.
- If this discomfort is intense, you can take 1 teaspoon baking soda in water to reduce discomfort.
- If you are eating a smaller snack-like meal or a low protein meal, you will likely need to lower your HCl dose.

Over time your dosage may need to be adjusted – As you increase absorption and maintain a state of “rest and digest” when you eat, you will likely need less supplemental HCl. If you feel a reaction at your usual dose, decrease by one until you find the dose that is comfortable. Conversely, if you are under stress, you may need to increase your HCl dose to ensure proper digestion.