

An Objective Look at the Low Salicylate Diet



Low salicylate diets have been recommended for hyperactivity, autism, hives, asthma, respiratory, digestive problems, etc.

But, does the diet live up to the hype!

[Sensitivity to Natural Food Compounds](#) is a great introduction to this article.

What are salicylates?

Salicylate is a general term for several related compounds in plants. The most well-known compound is acetylsalicylic acid (ASA) - the active ingredient in aspirin. ASA was originally isolated from willow bark. Food salicylates are mainly in the non-acetylated form, so they are a little different than ASA. They are considered nutraceuticals (naturally occurring chemicals in plant foods with health benefits – particularly anti-inflammatory).

Can low salicylate diets improve health?

Dr. Feingold first popularized the concept of food salicylates sensitivity in the 1960s and 70s. The Feingold diet was promoted to treat hyperactivity in children (reduced salicylates, food colours, certain additives, etc.). In the 1980s, a research team at the Royal Prince Alfred Hospital (RPAH) in Australia studied a diet that eliminated the above compounds, plus amines and glutamate. The Feingold and RPAH diets still have followers but are not widely accepted in the medical community.

Research interest has shifted toward low salicylate diets for individuals that are sensitive to aspirin. A recent Canadian study demonstrated improved nasal symptoms when subjects with *aspirin-exacerbated respiratory disease* followed a low salicylate diet compared with their usual diet (they followed their usual diet or a low salicylate diet for six weeks and then switched). Their symptoms were evaluated by a physician before the study started and at the end of each diet. The physician did not know what diet the subjects were following (physician blinding). These results are exciting because it is the first scientific study evaluating a low salicylate diet (as the only restriction). Some internet websites have used this study as proof that a low salicylate diet is effective, but it is important to keep the following in mind:

- ◆ It was a small study (larger studies with more subjects would be needed to make any firm conclusions).
- ◆ It is hard to know if the benefit of the low salicylate diet was due to restricting salicylates or a different dietary component. As I will discuss in more detail in the next section, food salicylate levels are variable, so it is hard to define an exact low salicylate diet. Many of the restricted foods are also high in other compounds (e.g., histamine, other diamines, glutamine, etc.)
- ◆ Symptom improvement may have been due to a healthier diet. When the clients were following the low salicylate diet, they may have paid more attention to their dietary choices. The symptom improvement may have resulted from healthier choices, not the restriction.
- ◆ This study looked at a very specific condition –*aspirin-exacerbated respiratory disease*. Even if further research confirms that a low salicylate diet benefits this condition, the results can not be applied to other conditions.

Despite the drawbacks, these results are exciting and will hopefully encourage future research.

Salicylates in food

Defining a precise list of high salicylate foods is not possible due to the lack of research and tremendous variation. The most recent information comes from the article: *A systematic review of salicylates in foods: estimated daily intake of a Scottish population*. For many foods, there was only one sample, but for the foods with more than one sample, there was great variability. For example, the five samples of blueberry ranged from 0.33 – 27.80 mg/kg and the three samples of chilli powder ranged from less than 0.2 – 1466 mg/kg. Salicylate content is affected by growing conditions (soil, temperature, etc.) and storage/processing. Therefore, salicylate levels of food grown in one area, such as Australia (location of most of the research), may be different than another area.

Practical Tips

- ◆ Many conflicting low salicylate diet lists are available on the internet. It is impossible to say which one is “right,” considering the variability described above. Here’s a link to a [low salicylate diet](#) written by a well-known expert dietitian, Dr. Janice Joneja.
- ◆ If you tolerate ASA (aspirin), dietary salicylate sensitivity is unlikely.
- ◆ There are no medical tests to diagnose dietary salicylate sensitivity.
- ◆ If you are sensitive to dietary salicylates, your reactions will likely be inconsistent, due to the variable levels (as described above).



Are you following unnecessary diet restrictions?
We can [help you](#) break out of the Food Fear &
Symptom Cycle and expand your diet.