



“The effectiveness of nutritional therapy is really reliant on the ability of the client to make the necessary changes”

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TRAINING: I studied at the Institute for Optimum Nutrition (ION) in Richmond. My studies started in September 2008 with a Science Access Course, and I graduated in 2012 with a diploma and foundation degree in Nutritional Therapy.

I added to my skills by undertaking a Wellbeing Coaching and Specialist Practitioner training with The Chrysalis Effect in 2020. I also completed Lifecode GX Practitioner training in 2022.

How long did it take for you to qualify?

My training took three and a half years, studying part-time and attending lectures in London and Richmond. I started studying while on maternity leave with my oldest daughter, and my youngest daughter was born during my studies. I remember attending training clinic in Richmond while heavily pregnant and struggling to fit behind the desk; my final year was a blur of study and mum duties (with a toddler and a baby).

Tell us something about your training. What stands out for you?

I loved my studies and being in a learning environment. I had worked in retail and corporate HR roles for over ten years, but I had always had a yearning to work in health in some capacity. It was therefore really refreshing to be expanding my knowledge and learning the skills needed to really make a difference in people's lives. Attending lectures was a great way to meet other people who were also balancing studies with working and bringing up a young family, so I felt really supported. I especially enjoyed gaining clinical

practice experience and learning how to apply the science to real-life cases.

How long have you been in practice?

I started to practise as soon as I qualified, but the nature of how I practise and what area I specialise in has evolved over the years.

Where do you practice?

I currently work with private clients online, specialising in ME/CFS, long COVID and fibromyalgia. I am also a clinic tutor and lecturer at ION. I really enjoy the variety of my working week.

When I first graduated, I focused on child health while my own children were young. I worked in a local health clinic and saw mainly parents of young children focusing on digestive and immune health. I then moved to work at Nuffield Health as a nutritional therapist and worked in two different branches and their clinic at Tesco Head Office. While at Nuffield Health, I worked as a generalist and saw clients with a wide range of health concerns. I was mainly based in the clinic area within Nuffield Health Wellbeing Centre, so I was working with GPs, nurses, physiologists and physiotherapists. I particularly enjoyed collaborating with other professionals.

What's your main therapy/modality and why?

In 2016, I developed post-viral fatigue following a mild infection. I was bedbound and unable to look after my young children. I realised quite early on that I had developed ME/CFS and despite many GPs and consultants telling me that this was something I needed to live with, my professional training had shown me that this wasn't the case. I researched extensively and tried a lot of different CAM therapies and

specialists, and gradually, over time, found my own route through to recovery.

My full story is on my website and is something I am very happy to share with anyone who would find it useful. I remember in my darkest days of being ill that I would cling to other people's recovery stories to keep my hope alive - and now I am one of the success stories, so I feel there is value in sharing this with others. If I can give hope to just one other person, then it is worth it.

During the final stages of my recovery, I studied to become a Wellbeing Coach and Specialist Practitioner with The Chrysalis Effect, so that I could help others to recover their health and vitality. I now combine nutritional therapy with wellbeing coaching and my specialist practitioner training to support my clients through their journey to reclaim more vital health.

Why did you decide to become a practitioner?

I saw an advert for a talk at my local yoga centre with a nutritional therapist about preconception health. My husband and I were planning on starting a family so I thought it would be a great idea to attend. Unfortunately, we couldn't make the date, but we did book in for some consultations and I was immediately hooked. After the first consultation, I said to my husband: "That is what I want to do", and the rest is history. Thank you, Kim Crundell!

Who or what has been the main influence/inspiration on your practice?

My yoga teacher has been a big inspiration. She guided me through yoga nidra sessions when I first managed to leave the house, where I could just lie on the floor and she would give me props, pillows and blankets to make sure I was as comfortable as possible. She really understood what I needed and introduced me to various

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forms of yoga, Red Tent and kirtan chanting.

This new community and feeling a connection with others were a really vital part of my recovery. This experience helped me refine my clinic skills with an understanding of how important it is to focus on mental, spiritual and psycho-logical wellbeing, as well as physical health. As a result, I hugely value having a wide network of colleagues whom I can refer to as needed. This is one of the great benefits of being aligned with a clinic like The Chrysalis Effect, where all the practitioners have experience and knowledge of working with clients who are suffering from a fatigue health condition.

What do you find the easiest to work with?

I embrace complexity with my clients. There are no quick wins with clients who have chronic health conditions, but there are some proven steps that can really make a difference. It really helps when clients are committed to making changes and we can work collaboratively to find the best next steps for them.

What is your favourite type of client?

I really like to work with people who are ready to make a change. The effectiveness of nutritional therapy is really reliant on the ability of the client to make the necessary changes. I use coaching and other behaviour



change strategies with clients who might feel hesitant about making changes to their diet and lifestyles, and enjoy working with them to find creative solutions to ensure that the recommendations are manageable.

What is the most challenging type of symptoms/illness/problem that you get presented with?

I really enjoy the detective work of being an NT and it is a big part of working with people who have a chronic health condition. The most challenging aspect of working in this area is when I really want to recommend a particular supplement and the client is taking a lot of medications. The possibility of drug-nutrient interactions is something that I take very seriously and navigate with care, especially

given the high sensitivity for supplements with a lot of the ME/CFS community.

What one thing is absolutely essential to you in your practice?

Being trauma informed. Understanding ACEs and the impact that these can have on the development of complex health conditions is vital.

Clients with ME/CFS often talk about flares, dips or crashes as a result of being “triggered”. These triggers can be a physical response to a food, toxin or over exertion and are generally well understood by clients and NTs. However, they can also be a result of an emotional or psychological trigger; the root cause of which may not be understood by the client. As a result, it can feel like the crash came out of nowhere.

These types of triggers can indicate developmental trauma and can really impact the client’s ability to make meaningful improvements with nutritional therapy changes alone. Referring to appropriate specialists - eg trauma therapists or EMDR practitioners - are therefore essential for many clients. Ensuring that I work with my clients holistically and knowing when they need expertise that is outside of my remit has led to some really excellent outcomes.

Which CAM book has helped or inspired you most, so far in your career?

Pete Walker’s work around complex PTSD is really engaging and informative. I find that



We know our practitioners are quietly getting on with changing people’s lives, every day – and we want to celebrate and share the inspiration. In Practice is coordinated by regular contributor Rebecca Smith, who runs a successful practice of her own, established 20 years ago. Contact her direct to be part of the feature: rebecca@newportcomplementaryhealthclinic.co.uk, and follow her on Twitter: [@NCHealthClinic](https://twitter.com/NCHealthClinic).

Case study: ME, IBS and type 2 diabetes

This is a client that I am currently working with. We have made some great progress and have used Lifecode GX genetic testing to inform our consultations so far.

She was diagnosed with ME 25 years ago. Client presented with fatigue, frequent migraines (worsened after Moderna COVID vaccine), IBS and type 2 diabetes.

She had always felt that her fatigue came from her brain and spoke of it being "in her head", however she had heard about the possibility of genetic testing being able to provide more insights some years ago and was interested to investigate this further.

She has a supportive GP, but they have not been able to provide any advice with regards to obtaining improvement with her ME/CFS. Treatment had therefore been focused on symptom management.

Medication: Metformin, Levothyroxine, Flupentixol, Simvastatin, Topiramate and occasional Omeprazole.

The client's digestion was very sensitive and she reacted to a number of foods. She also couldn't tolerate taking nutritional supplements in capsule form as this could lead to digestive distress, migraines, palpitations and bruising.

The client had tried a number of different approaches over the years including taking part in the Gupta programme (a specialised programme for ME/CFS recovery). While she had found some limited improvements, these were not sustained. Periods of stress would always bring on more symptoms.

She was realistic with what she wanted to achieve, which was to regain some energy, improve her migraines and diabetes, as well as

reduce her symptoms of IBS, which she described as bloating and diarrhoea. Her overall goal was to achieve her energy levels of 20 years ago and to be able to go on holiday with her family.

Assessment

When I first spoke to the client, she was particularly keen to carry out some genetic testing (this is how she had found out about me), so this was taken in to account when assessing her case.

I recommended the Lifecode GX Metabolics and Nervous System reports, both of which could provide invaluable insights in terms of energy production and neurotransmitter regulation.

I agreed that we would focus on stabilising her blood glucose levels, because she really wanted to come off her metformin, which she felt she wasn't tolerating very well. I was very mindful of her digestive issues so I asked her to carry out an HCL bicarbonate test and try a small amount of fermented foods (kefir and kombucha) to see how well they were tolerated. Tests needed to be spread out, so we decided to postpone a Small Intestinal Bacterial Overgrowth (SIBO) test and/or comprehensive stool analysis until we had made some progress with blood glucose levels and migraines.

The Metabolics test showed a number of interesting SNPs, but of particular interest was the upregulated (red) TCF7L result indicating that she had a predisposition to T2D especially driven by stress. She also had an upregulated (red) FTO, suggesting that she might have difficulty regulating her hunger and weight.

The Nervous System report was especially informative. There was a high level of SNPs on all

pathways. Of particular note was TPH1, indicating a reduced serotonin synthesis in the gut, and heterozygous MTHFR, which was likely having a wide-reaching impact on all aspects of her health. Perhaps the most powerful information we gained from this test was the significant number of SNPs on the GABA-glutamate pathway, including TRPV1. This indicated that GABA was likely to be low and may well be a significant contributor to her mood, energy and migraine symptoms. She found this report really useful because it confirmed what she had long suspected about the nervous system aspect of her health.

The client was also predisposed to long-term inflammation via SNPs on TNF and IL6. There was further evidence of this in the client's blood tests.

Intervention

We have been working together over the last nine months.

■ Diet

Given the client's fatigue, recommendations needed to be simple and easily prepared. The client was managing her diabetes with regular carbohydrates so the first step was to increase her protein. We focused specifically on protein sources rich in tryptophan as we could see from her genetic testing that her serotonin pathway was likely to be compromised. Cinnamon was also added to plain yoghurt with breakfast.

We supported her GABA pathway with lemon balm tea, rosemary crackers and peppermint tea. Oily fish and seafood was introduced at least three times a week to support TRPV1 SNP re: migraines and GABA pathway, as well as inflammation.

clients often relate really well to his work, and his approach to managing emotional flashbacks is particularly useful. His first (and in my view, best) book is *Complex PTSD: from Surviving to Thriving*, but his website is also very helpful - <https://www.pete-walker.com>.

I also enjoy reading

books that expand my understanding of using nutrigenomic testing in my practice, eg *Nutrigenetics: Applying the Science of Personal Nutrition* by Martin Kohlmeier, and *Lifespan: Why We Age - and Why We Don't Have To* by David Sinclair.

Emma Beswick from Lifecode GX makes some great book recommendations in her training, which I always add to my reading list.

If money, time and effort were no object, what one thing would you change about your practice or integrative medicine in general?

Having a diagnosis of ME/CFS, Long COVID or Fibromyalgia can feel very bleak. The impact of these conditions means that many are unable to work, and the reality of the benefits system is such that it can be very difficult for them to be able to access benefits like PIP. This can leave them in real financial difficulty and often heavily relying on friends and relatives. This is coupled with the lack of any treatment options for these conditions from the NHS; instead being told that you can't recover and need to learn to live with the symptoms instead.

Living in this space is really tough. I used to refer to it as my virtual prison.

However, the reality is that there is hope and these conditions are not a mystery to those of us who have experienced them ourselves, have

recovered and now work with them every day.

So, if money, time and effort were no object, I would want to ensure that every GP understood that it is possible to reclaim vitality and health so they can start to share hope and possibility. It would then be a dream for me to be able to provide nutritional therapy advice regardless of a client's ability to pay, especially testing and specialist supplements, which can make such a difference in terms of informing personalised nutrition for chronic health conditions.

What piece of advice would you give to newly-qualified practitioners who are just setting up in business?

It is great to be able to specialise in an area that you feel passionate about and ideally an area where you have personal





A client "keen to carry out some genetic testing".

Green tea was introduced daily re: TCF7L2 and blood glucose regulation.

She was gradually increasing her fruit and vegetable intake but this was limited by her food intolerances.

■ Supplements

Given the client's medications, we were cautious in terms of adding in new supplements. She also had a history of not being able to tolerate capsules and was wary of trying new supplements as a result.

The products that I recommended were BioCare Nutrisorb methylated B complex with additional B6 and Igennus VegEPA (to replace the client's own cod liver oil).

Epsom salts were also recommended for use in the bath.

Digestive enzyme tablets and Vogel's Passiflora

complex liquid were recommended but the client couldn't tolerate them so we discontinued use.

Outcome

The client's HbA1c reduced significantly and she was able to come off her met-formin (with her GP's consent). The client's energy improved to the point where she was able to have work completed in her house without worsening of symptoms. Her migraines also improved significantly. She put these improvements down to eating more oily fish and protein, taking methylated B vitamin supplements, eating foods to support GABA conversion and coming off metformin.

She is now hopeful of reclaiming more of her vitality and her son has commented on how much better she seems. She has now booked her first holiday in years (a weekend away in the UK) with a

view to going on her dream holiday next year.

This feels like amazing progress to me but, as we know, recovery isn't linear, and she has had a recent setback due to eating food that didn't agree with her. The resulting symptoms lasted for a couple of weeks.

We are now entering the second stage of our plan where we are starting to focus on digestive health. She has been trying kombucha and kefir, which she has struggled to tolerate in any meaningful amounts, so we are now going to focus on upper digestive health and have ordered a SIBO test.

There is a lot more we can work on together, and I look forward to building on the progress that we have already made.

Review/conclusion/learnings

Working with this client has really made me focus on using foods over supplements, as well as how small incremental changes can really start to add up and make a difference.

On reflection, prioritising where to start was difficult, because I would usually start with a focus on digestive health, which was an alternative approach that I could have taken. It feels right that we are looking at this now and that the client has a good foundation on which to build going forwards.

Resources

Informed by Lifecode GX training (CPD, Practitioner Programme and 1:1 test support with Amanda Grant), and Specialist Practitioner training with The Chrysalis Effect.

- <https://www.lifecodegx.com>.
- <https://thechrysaliseffect.co.uk>.



experience. However, this might not be clear when you first graduate, so take your time to work with a range of clients to help build your skill set.

Be flexible and open to take advantage of opportunities that present themselves along the way, and your area of specialism will start to become apparent and open up for you.

Networking is really important, so chat to people about what you do - the more people who know about the power of nutritional therapy, the better!

What is the biggest challenge you face as a practitioner?

Finding enough time to carry out research for my clients and fit in all the CPD I want to do.

How did you adapt personally and professionally to the COVID-19 climate – and have things gone back to “normal” for you?

I moved my business completely online and haven't looked back since. I really enjoy the flexibility that this gives me and my clients. It works better for my home life balance, and I feel much happier being able to practise from my own office.

How has COVID impacted your practice?

As I specialise in fatigue conditions, long COVID clients are part of this. I see a lot of similarity between CFS/ME clients and those experiencing post-COVID fatigue. Some clients feel that the COVID vaccine exacerbated their symptoms, and this is always something that I will consider as part of the overall picture.