

NUTRI-SPEC



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THE NUTRI-SPEC LETTER

Volume 22 Number 3

From:
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March, 2011

DOUBLE TROUBLE

Dear Doctor,

How often do you face the nemesis of all NUTRI-SPEC practitioners ---
the patient who is ...

DOUBLE TROUBLE?

These patients are your ...

VACILLATORS ...

vacillating between two metabolic balances that are virtually impossible
for you to work on simultaneously. This vacillation situation clinically
presents in two forms upon NUTRI-SPEC testing. There is the ...

VACILLATOR OSCILLATOR ...

swinging between the opposite extremes of Sympathetic and
Parasympathetic Imbalances from one office visit to the next. You also
have the ...

VACILLATOR MASQUERADER ...

who shows simultaneous Ketogenic and Parasympathetic test patterns,
forcing you to use your QRG Analysis ...

VACILLATION CALCULATION ...

to choose Ketogenic or Parasympathetic as the higher priority.

Sympathetic and Parasympathetic; Parasympathetic and Ketogenic. When you see such a vacillation demonstration just what exactly is going on? More importantly, what exactly must you do for this patient to achieve vacillation elimination?

Your first step is to stand with confidence --- assured that with NUTRI-SPEC even the most extreme case of vacillation abomination need not become a source of vacillation frustration. With your arsenal of NUTRI-SPEC weapons, plus the strategies you will learn in this and next month's Letter, you are equipped as ...

A VACILLATOR GLADIATOR ...

battling to restore your patient's health.

Your second step is to ...

INFORM YOUR PATIENT RIGHT UP FRONT ...

of the battlefield you two are entering. You must be your patient's ...

VACILLATOR MOTIVATOR ...

so that he sticks with you during all the twists and turns along the road back to health. Look your patient in the eye and state confidently, "You came to the right place. I am going to help you. My NUTRI-SPEC analysis tells me exactly what you must do to be as strong and healthy as you can possibly be. --- But --- what we must do for you will not be easy.

"You are what I call DOUBLE TROUBLE. Your body chemistry is shifting back and forth between one Imbalance and another --- struggling to keep you strong enough to get by. Double Trouble patients like you are my toughest cases. Your struggle becomes my struggle because much of what we must do to fix one of your Imbalances can temporarily make the other Imbalance worse. Double Trouble ...

FIRE AND WATER ...

--- Your body is using two entirely different forces in its struggle to preserve health. Sometimes you are burning out and sometimes you are being washed out. The two different stress reactions you are dealing

with can be brought under control if we work together over the next few months. Are you ready to work with me?"

Your patient, with you as his ...

VACILLATOR INVIGORATOR ...

responds with eager affirmation.

Now --- what is behind this Double Trouble? What stress reactions constitute Fire and Water?

As a simple model to help you understand what constitutes a vacillator generator in your Double Trouble patients, consider Fire as an exaggerated catecholamine stress response, and Water as a hyper cortisol stress response. In essence, some people react to challenge as catecholamine (adrenalin) reactors, while others mount an adaptative response as cortisol reactors. Your catecholamine reactors show some combination of Sympathetic, Dysaerobic, and Glucogenic Imbalances; cortisol reactors will test with some combination of Parasympathetic, Anaerobic, and Ketogenic Imbalances. With NUTRI-SPEC, you can routinely bring either Raging Fire or Flooding Water under control. No other clinician can begin to match the service you offer.

But --- suppose you have a patient who is Double Trouble. Your initial NUTRI-SPEC testing shows a patient who is burning out --- generating Fire to the point of depletion. You recommend a NUTRI-SPEC regimen to quell the raging flames, and on your follow-up testing 5 days later the patient is totally washed out by surging flood waters. You revise the patient's NUTRI-SPEC regimen to turn back the tide and schedule another follow-up. The patient returns a week later and now you have ...

FIRE + WATER = STEAM.

The patient's symptoms may have improved, or may have gotten worse, but the clinical picture is so foggy you cannot choose a direction. Groping through the mist, you may find that the patient has reverted back to the Imbalance shown on initial testing; or, the Imbalance you addressed on the follow-up testing may look objectively worse, yet the patient has symptoms associated with the opposite Imbalance --- for example --- a worsening Sympathetic test pattern is accompanied by an exacerbation of seasonal allergies (a Parasympathetic condition), or, a test pattern moves further Parasympathetic as the patient's insomnia (a Sympathetic symptom) gets worse.

Your patient is habituated to an exaggerated ...

DUALISTIC STRESS RESPONSE ---

struggling to adapt with an extreme vacillating release of catecholamines and cortisol. If we are to fully understand how to ...

RESTORE FUNCTIONAL ADAPTATIVE CAPACITY ...

to these patients, we must expand our catecholamine-cortisol stress response model. Why is the Fire so easily ignited? Why does the Water so frequently spill over the dam?

HOW CAN WE SOLVE THE VACILLATION EQUATION?

Expand the paradigm: Catecholamines and cortisol are hormones --- so --- one element in our equation is endocrine. But activation of the endocrine system is always accompanied by multiple activations of the nervous system. Neurological aspects of the stress response are evident in the CNS, as displayed by reactions in the hypothalamus, the hippocampus, the amygdala, and peripherally as both Sympathetic and Parasympathetic fibers connect to mast cells of the immune system. Immunological sensitization is the third element that is a constant in all vacillation activation.

IMMUNOLOGICAL + NEUROLOGICAL + ENDOCRINE = IMMUNONEUROENDOCRINOLOGY

Never is NUTRI-SPEC more exciting than when we look deep inside the mechanisms underlying our Five Fundamental Metabolic Balance Systems. Each Imbalance has an immunological component; each Imbalance has a neurological component; each Imbalance has an endocrine component.

Immunologically: Every one of your NUTRI-SPEC Imbalances affects the White Blood cell count, with Fire decreasing the WBC and Water increasing it. Every NUTRI-SPEC Imbalance alters the WBC differential, with Fire decreasing neutrophils, and Water increasing lymphocytes, eosinophils, basophils, and mast cells. All NUTRI-SPEC Imbalances either activate or inhibit monocytes, macrophages, and dendritic cells. The state of NUTRI-SPEC Metabolic Balance determines which set of inflammatory cytokines will be released in excess and which inflammatory cytokines will be suppressed.

Neurologically: Every one of your NUTRI-SPEC Imbalances has a Sympathetic or Parasympathetic component. (Think of the pioneer Francis Pottenger and his monumental work, Symptoms of Visceral Disease.) --- Fire or Water. Every NUTRI-SPEC Imbalance involves

different hypothalamus stimulation or inhibition. Every NUTRI-SPEC Imbalance will either activate the CNS (even to the point of excitotoxic brain cell destruction), or, depress certain CNS functions. Every one of your NUTRI-SPEC Imbalances creates a cacophony of chatter over afferent and efferent Fire and Water neurons that connect directly to mast cells dispersed throughout the body.

Endocrinology: Fire (epinephrine, norepinephrine, and dopamine) and Water (glucocorticoids, mineralcorticoids) give the hypothalamus a good kick, the direction depending on which NUTRI-SPEC Imbalances are involved. The flames of Fire are sometimes fanned by renin/angiotensin; the overflow of Water is provoked by insulin reactivity or estrogen stress.

Immunoneuroendocrinology --- **INE** --- Which is primary, the immune system, the nervous system, or the endocrine system? As a chiropractor, I would be pleased to say the nervous system is top dog. Most of the medical research tries to pin much of the blame on the immune system. But the truth is --- I, N, & E are inextricably intertwined such that any stressor, or any adaptative response to stress, that involves one system automatically triggers a twitch and a kick from the other two.

All 3 systems react at once; all 3 must be addressed with NUTRI-SPEC at once. You have the tools to calm the INE storm. In just a minute, we will give you one clinical procedure to restore INE balance. Begin using it immediately on all your hyper SYMPATHETIC/PARASYMPATHETIC vacillator oscillators.

In next month's Letter, we will begin to show you more details on how and why to work with:

- the various WBC Differential imbalances
- the various inflammatory cytokine imbalances
- a complete understanding of Chronic Fatigue Syndrome
- a complete understanding of chronic pain/fibromyalgia

So for now, immediately, you can have some of your most difficult patients Doing FINE. How? Replenish. An INE storm takes a terrible toll on its victims. They are all depleted of zinc, copper, selenium, and magnesium (irrespective of the role these nutrients play in the FIVE FUNDAMENTAL BALANCES). Replenish these and other depleted reserves, then, control the raging Fire & Water. Be your patient's vacillator facilitator --- **F**acilitate INE balance, and your patient will be Doing FINE.

▲ [How to Integrate Doing FINE with your NUTRI-SPEC Metabolic Balancing Analysis](#)