

NUTRI-SPEC



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THE NUTRI-SPEC LETTER

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From:
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Dear Doctor,

YOU'VE FINALLY GOT WHAT YOU WANT.

You have long been aware that superior nutrition is perhaps the most important component of a healthy lifestyle. You have always known that scientifically administered clinical nutrition is the key to preventing and correcting the biochemical imbalances responsible for disease symptoms and premature aging. For yourself, for your family, and for your patients, you have searched for nutrition supplements that guarantee you will ...

LIVE STRONGER LONGER.

- You can live well and live long.
- You can at least partly reverse the damage done by the errors in lifestyle you have committed.
- You can restore METABOLIC BALANCE.
- You can activate efficient energy production.
- You can maintain glycemic control.
- You can minimize oxidative free radical damage.
- You can enhance water/electrolyte dynamics.
- You can control ImmunoNeuroEndocrine stress.
- YES --- You can live well and live long.

--- And --- you can make an emotionally gratifying and financially satisfying living helping hundreds of patients live stronger longer. --- You've finally got what you want --- supplements with the most powerful combinations of ADAPTOGENS to be found anywhere --- your entirely revised and expanded ...

DIPHASIC NUTRITION PLAN.

ANTI-AGING? --- I have been listening to lectures presented at last year's A⁴M (American Academy of Anti-Aging Medicine). I am thoroughly impressed with the goals, the nicely organized programs, and the certification process offered by the Academy. --- But --- listening to the presentations of all those highly respected and well-meaning doctors, I find them to be dull and/or comically inept, or at best pathetically limited in scope. Each anti-aging specialist is promoting his "cure" for aging. As a group, they are wandering through a maze of confusion, searching in the darkness for the right combination of remedies to enhance longevity. --- Fragmented – there is no fundamental philosophy; no coherent plan.

But you --- you understand that aging is a diphasic phenomenon. Aging is uncontrolled anabolism as well as uncontrolled catabolism. Your Diphasic Nutrition Plan could just as well be named your ...

DIPHASIC LONGEVITY PLAN.

Within the context of your DNP longevity plan, you define the two phases of premature aging as Pathological Hyperplasia and Pathological Disintegration. --- Some aging processes involve a build-up of dysfunctional tissue; some aging processes involve a tearing down of viable tissue.

Living stronger longer requires a comprehensive program to simultaneously defend against both the anabolic and catabolic phases of premature aging. --- You've got it. --- The supplements of your DNP are unmatched in their power to promote efficient energy production while also putting up a solid defense against destructive environmental forces. Vital energy + vigilant defense = the essence of youth versus aging.

----- If you have any doubt that your Diphasic Nutrition Plan puts to shame all the A⁴M allopathic attempts to discover the Fountain of Youth, go to your NUTRI-SPEC website (and send all your patients there too) and review the presentations on "Extraordinary Nutrients." No one can offer your patients such a comprehensive package of adaptogens --- so tell them so. With your DNP, you will empower your patients as you make yourself rich in every sense of the word.

For you, your family, and your patients to live rich and happy-ever-after, here is your step-by-step procedure:

1. Immediately, and throughout a stronger longer life, get yourself, your family, and as many patients as you can on your Diphasic Nutrition Plan.

2. Everyone benefits from your Diphasic Nutrition Plan.
 People age 32+ need your Diphasic Nutrition Plan.
 People age 52+ desperately need your Diphasic Nutrition Plan.

Administering the Diphasic Nutrition Plan is simple. Follow precisely the instructions on how to get your patient started. Use your set of doctor's instructions to fill out each individual patient's instruction sheet. Also, give your patient the instructions for the Balancing Procedure to determine the ideal quantity of Oxy A+ and Oxy D+. Modify each individual's DNP instructions as needed for conditions such as diabetes, asthma, cardiovascular disease, etc. Along with the instruction sheet and the Balancing Procedure instructions, give your patient the Diphasic Nutrition Plan brochure.

3. Recognize that your IMMUNO-SYNBIOTIC gives you the means to immediately restore a healthy intestinal milieu --- but the benefits are systemic as well. Since 75% of the immune system originates in the gut mucosa, your IMMUNO-SYNBIOTIC has a powerful effect at correcting ImmunoNeuroEndocrine stress. Most of your patients will begin their DNP with 3 IMMUNO-SYNBIOTIC twice daily. Some will need to go through 1 bottle; some will need to go through several bottles; some will need to stay on it indefinitely. For most patients, after the first bottle at 3, twice daily before meals, you can reduce it to 2 or 1 twice daily before meals. For patients who experience a yeast/fungal die off reaction in response to IMMUNO-SYNBIOTIC or, who experience diarrhea, you will want to back off the quantity and recommend only 1 or 2 daily, and gradually build up from there.
4. Recognize that at least 1 in 6 patients has the superantigen immune response to yeast/mold/fungi known as Eosinophilic Fungal Rhinosinusitis. These patients will need to use BOOGEY BUSTER &/or A GOOD THYME as adjuncts to their Diphasic Nutrition Plan. They will also need to remain on IMMUNO-SYNBIOTIC at the full dosage for a longer time. A GOOD THYME is essential to be used in a Grossan nasal irrigator for those with extreme Eosinophilic Fungal Rhinosinusitis. A GOOD THYME should also be taken orally for those with yeast overgrowth at the root of the tongue, in the esophagus, or further down the GI tract, as well as for patients with H. pylori infection of the upper GI tract.
5. Precede your Diphasic Nutrition Plan with your Doing FINE strategy for all patients who have chronic fatigue syndrome, fibromyalgia, multiple chemical sensitivities, post traumatic stress disorder, or major depression --- or --- who have autoimmune disease such as rheumatoid arthritis, lupus, alopecia, insulin-dependent diabetes,

Hashimoto's or Grave's thyroiditis, Crohn's disease, ulcerative colitis, Sjogren's, etc.

Use your doctor's instructions for integrating Doing FINE with your Diphasic Nutrition Plan to fill out the Doing FINE instruction sheet for the patient. The Doing FINE instructions give your patient a clear idea of what to do for the first 10 intensive days of Doing FINE, and then the changes to make on Day 11 that will begin the transition into the DNP. On or before Day 29, the patient will come in for the first follow-up visit, at which you will give that patient's individualized DNP instructions. --- Simple; easy.

6. Recognize that the fastest way to get on track to a stronger longer life is with NUTRI-SPEC Metabolic Balancing using the NUTRI-SPEC test procedures. If your office is geared up to run the NUTRI-SPEC test procedures, and if your patient is not one whose test results would be impossibly scrambled due to medications, then put the patient on a Metabolic Balancing regimen with the idea of transitioning to the Diphasic Nutrition Plan over time.
7. Recognize that some patients on whom you are doing metabolic testing will immediately reveal themselves as vacillator oscillators, and need to be switched to the 10-day intensive Doing FINE procedure. Follow the set of doctor's instructions for Doing FINE integrated with NUTRI-SPEC Metabolic Balancing analysis. After the 10-day intensive, then retest the patient and get reoriented with the proper NUTRI-SPEC Metabolic Balancing regimen. Then, over time, transition to the DNP.

[Note: We originally attempted to streamline these procedures by using 1 set of patient Doing FINE instructions for both patients who were Doing FINE as a preliminary to the DNP and for those who were shown to be vacillator oscillators as part of their Metabolic Balancing regimen. Now, to make things more clear and easy for you and your patients, we have created 2 different sets of instructions --- one strictly for those Doing FINE in preparation for the DNP, and one for those Doing FINE as part of their Metabolic Balancing regimen.]

To highlight exactly how you are going to ...

HAVE A LIFE-CHANGING IMPACT ...

on even your most severely ill patients, let us resume our discussion of exactly how your IMMUNO-SYNBIOTIC will ...

STRENGTHEN A STRESSED IMMUNE SYSTEM.

You have already learned how your IMMUNO-SYMBIOTIC L. reuteri kills Candida, suppresses H. pylori, prevents vitamin B12 deficiency, decreases elevated cholesterol and triglycerides, elevates depressed white blood count, kills a broad diversity of noxious bacteria, restores balance to the cytokines produced by T lymphocytes --- particularly decreasing the inflammatory cytokines TNF- α , IL-6, and IL-12 --- increases the production of health-promoting short-chain fatty acids from prebiotics, protects diabetics from renal fibrosis, and has shown to be specifically beneficial in a broad diversity of diseases including asthma, atopic dermatitis, and Crohn's disease. --- And --- you have learned that L. reuteri is the least important of the 5 ingredients in your IMMUNO-SYMBIOTIC.

You also learned in last month's Letter that Saccharomyces boulardii is unmatched in its power as a probiotic. S. boulardii is by far the most effective probiotic against Candida, against Helicobacter pylori, against antibiotic-associated diarrhea and all other forms of diarrhea, and that S. boulardii has unparalleled trophic effects on the intestinal mucosa, as it increases colonic butyrate and yields immuno-stimulatory effects far exceeding those of any other probiotic.

You now know all you need to know about probiotics. The 2 probiotics in your IMMUNO-SYMBIOTIC are so far superior to all others, that there is no point wasting your patients' money on anything else. So now, let us sneak a peek at your 3 prebiotics and the health-restoring, age-preventing effects they have.

We have already pointed out the many problems and insufficiencies of the common (cheap) prebiotics such as wheat bran, rice fiber, lactitol, and maltitol. --- A person needs to swallow a truckload to do anything at all, and they are hopelessly inferior to your inulin, glucomannan, and guar gum in feeding beneficial flora and increasing the overall quantity of short-chain fatty acids, as well as the proportion of butyrate to other fatty acids. Furthermore, many prebiotics support the growth of pathological bacteria such as Clostridia, and can cause extreme GI distress.

LET US LOOK AT INULIN ...

Inulin is perhaps the most popular of the prebiotics. It is an undigestible carbohydrate consisting of a broad diversity of undigestible saccharides, including fructo-oligosaccharides (FOS), as well as many longer chain oligofructoses and other saccharides. There is a problem, however, in the shorter chain polysaccharide version of FOS, as it can in some patients lead to GI side-effects such as cramping, bloating, and

occasionally diarrhea. Longer chain inulin has the same healthful effects as FOS or oligofructose, but with less GI side effects. As you can well imagine, your NUTRI-SPEC IMMUNO-SYMBIOTIC contains predominantly the longer chain polysaccharide form of inulin.

- Inulin supplementation has been shown in countless studies to increase the population of beneficial intestinal flora. Inulin hydrolyzes to oligofructose and galactooligosaccharides, which specifically feed bifidobacteria.
- Inulin increases the colonic and fecal levels of butyrate better than other sources of fiber, including beet, soy, cellulose, FOS, and multi-oligosaccharides, and, far better than wheat bran, psyllium, Metamucil, and rice bran.
- Inulin decreases postprandial insulin response but has no effect on fasting glucose nor insulin --- and thus helps Type II diabetics.
- Inulin is beneficial for Crohn's disease by increasing the anti-inflammatory IL-10, and increasing toll-like receptor 8 and toll-like receptor 4 expression. The problem is, that patients with Crohn's disease (as well as those with ulcerative colitis) desperately need the immune-modulating benefits of inulin --- but --- the inulin can increase the already excessive stool frequency in these patients. [Patients with Crohn's disease or ulcerative colitis can be some of our most gratifying triumphs, but they can also be our most frustrating patients. Some of these patients need Oxy D+ and glutamine and histidine to control their symptoms by reducing their immune system stress, and other benefit from taurine and carnitine and either calcium or bicarbonate. But --- regardless of what other supplements they need, these patients will respond much more quickly if you can get inulin from your IMMUNO-SYMBIOTIC into them without excessively increasing gut motility. These patients can be a challenge to manage, but please understand that no one else can offer them any health-promoting physiological approach to their pathology but you. Without you, they are destined to surgery and a lifetime of prednisone and immune-suppressing drugs.]
- Inulin increases GI absorption of magnesium, copper, and calcium.

----- Yes, with IMMUNO-SYMBIOTIC and an amazing array of adaptogens, you've finally got what you want --- your comprehensive and powerful, easy to administer ...

DIPHASIC LONGEVITY PLAN.