

NUTRI-SPEC



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THE NUTRI-SPEC LETTER

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From:
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**GOT A WIFE AND KIDS
IN BALTIMORE, JACK;
I WENT OUT FOR A DRIVE
AND I NEVER WENT BACK ...**

Dear Doctor,

I outgrew pop music when I was a boy, but I delight in sharing with you the opening line of an old Bruce Springsteen tune. It is the perfect introduction to this month's look at how ...

SYMPATHETIC AND PARASYMPATHETIC IMBALANCES DOMINATE THE LIVES OF SO MANY PATIENTS.

You learned in last month's Letter there are actually 10 combinations of Sympathetic and Parasympathetic reactivity you will find in your patients. Since the Sympathetic/Parasympathetic Balance System is ...

THE PRIMARY FORCE DRIVING IMMUNONEUROENDOCRINE ACTIONS & REACTIONS AT THE SYSTEMIC LEVEL OF BIOLOGICAL ORGANIZATION ...

it is essential you master the art and science of maximizing Adaptative Capacity via Sympathetic/Parasympathetic metabolic therapy.

With that as your goal, you will take away from this Letter a new appreciation and clinical understanding of the Sympathetic/Parasympathetic role in health and disease --- including the specific nutrition requirements demanded by each of the 10 types of autonomic nerve physiopathology. --- And --- it is instructive (as well as fun) to consider

how in some of your patients, not only is the INE reactivity under autonomic control, but so is the personality.

What sort of fellow is Springsteen singing about? The most amusing feature of those few individuals whose social behavior is dictated by autonomic dominance is that --- body, mind, heart, and soul ...

THEY ARE RULED BY IMPULSE.

Is Springsteen's character expressing Sympathetic impulsivity, or Parasympathetic impulsivity? Read on ...

Sympathetic vs Parasympathetic Types (--- broad generalizations that apply to the lives of only a distinct few individuals):

Preface --- All the remarks below regarding Sympathetic and Parasympathetic dominant personalities apply only to those who:

- a) are above average in intelligence
- b) are not spoiled brats

- ❖ Unintelligent or over-indulged Sympathetics are dangerous.
- ❖ Stupid, bratty Parasympathetics are a dark cloud over any parade.

Now --- IMPULSE. Both Sympathetic and Parasympathetic types are driven by neurological impulse. But, their impulsive reactivity is expressed in different behaviors.

--- The Sympathetic impulse is FIGHT-OR-FLIGHT. Response to challenge is immediate (though not thoughtless) --- with instantaneous, high-powered mental integration choosing a course of action in a flash. And for better or for worse, that choice is executed without hesitation. --- The impulse to punch a guy in the nose, or the impulse to jump in the car with only the shirt on your back and the cash in your wallet, and flee out of state --- abandoning the wife, kids, and job (Springsteen's "hero".)

--- The Parasympathetic impulse is RESIST OR PERSIST. Perceived injustice is always met with sharp criticism. Verbal lashing out is the norm. Physical resistance, when provoked, is powerful and without limitation. Perceived incompetence is also met with a quick critical impulse. Barriers in the road of life are always carefully contemplated, and there is a tendency to stubbornly persist in the chosen direction, staying the course regardless of what may seem to others as impassable obstacles.

--- Sympathetics react and move quickly.

--- Parasympathetics react quickly and move deliberately.

--- Sympathetics make great point guards, sprinters, wide receivers, and center fielders. --- Think in terms of all the flashiest sports heroes.

--- Parasympathetics make great pitchers and catchers, power lifters, rowers, and goalies.

--- Sympathetics scream; Parasympathetics nag.

--- Sympathetics scream, "Shut up!" and expect that to be the end of it.

--- Parasympathetics berate and debate, and don't want it to ever end.

--- (For students of History) --- Sympathetics quickly conquer new territories --- think Alexander the Great. Parasympathetics organize, defend, and counter-attack --- think Alfred the Great.

--- (More History) --- Sympathetics lead world conquest today with little thought of tomorrow --- think Alexander the Great, Atilla the Hun, Justinian, Napoleon, and Charlemagne. Parasympathetics lead revolutions – thoughtfully risking everything today for the prospect of a brighter tomorrow --- think Stephen Langton, Oliver Cromwell, Thomas Paine, and Thomas Jefferson.

--- Sympathetics go with the flow --- taking the path of least (physical/mental/emotional/spiritual) resistance.

--- Parasympathetics are quite at ease struggling to swim upstream.

----- I could go on endlessly, but I expect you are getting the big idea. Both Sympathetic and Parasympathetic dominant types are driven by neurological impulse, and are thus often driven to either great achievement or total self-sabotage. ----- But also understand that only a small fraction of the population is dominant in one Autonomic Nervous system over the other. Most people are either:

- A) Sympathetic/Parasympathetic balanced, with neither system dominating either behavior or metabolism
- B) normal in Sympathetic function, but weak in Parasympathetic function --- always hyper-stressed out, and impotent to do anything about it

- C) normal in Parasympathetic function, but weak in Sympathetic function --- always worried sick over everything, but too impotent to do anything but whine about it.
- D) weak in both Sympathetic and Parasympathetic function --- low achievers, apathetic, and old, even in youth

Then, to complete the discussion, I must mention those who are powerful in both Sympathetic and Parasympathetic function --- rising above the challenges of life with power, grace and ease. --- Think Socrates, Aristotle, Pericles, Maimonides, St Thomas Aquinas, Leonardo da Vinci, George Washington, Benjamin Franklin, Richard Feynman, Davey Crockett, and Guy Schenker.

--- Admittedly, the preceding few pages are partly for fun. But --- do they have any clinical relevance? Absolutely yes. Look at your patient population. Among them you should be able to pick out a few clearly dominant Parasympathetic types and a few who are clearly dominated by Sympathetic impulse. You may even have a few Aristotles and Davey Crocketts among the bunch. (God forbid you have any Guy Schenkers.)

Then, you have those patients described immediately above --- Types B), C), and D), who desperately need your help to balance and empower Sympathetic/Parasympathetic reactivity. Truly, this autonomic balance system (along with its specific supplements, Complex S and Complex P) is critical to the vast majority of your patients --- from teens to geriatrics --- if you are to assure they will live stronger longer. Recognize the incredibly diverse functions of Sympathetic and Parasympathetic reactivity --- plus --- how...

**ONLY YOU CAN WORK VIA THAT BALANCE SYSTEM TO
MAXIMIZE THE QUALITY AND LENGTH OF LIFE.**

Now, to expand your understanding of Sympathetic/Parasympathetic Balance, carefully consider the list of 10 possible combinations of Sympathetic and Parasympathetic reactivity you find in your patients:

1. High Parasympathetic + High Sympathetic
2. High Parasympathetic + Low Sympathetic
3. High Parasympathetic + High Cortisol
4. High Parasympathetic + Low Cortisol
5. High Sympathetic + Low Parasympathetic
6. High Sympathetic + High Cortisol
7. High Sympathetic + Low Cortisol
8. Parasympathetic Failure exceeds Sympathetic Failure
9. Sympathetic Failure exceeds Parasympathetic Failure
10. Parasympathetic & Sympathetic Failure of equal degree

First, consider #10. How many of your patients suffer from sagging Vital Reserves because much of the juice is gone from both their Parasympathetic and Sympathetic reactive capabilities? These patients are deficient in the Metabolic Activating functions of both the Sympathetic and Parasympathetic systems, plus, they are suffering from a deficiency in the INE protective effects of Sympathetic and Parasympathetic activity against both anabolic and catabolic stressors.

The majority of your patients age 53+ are painfully aware of life slipping away from them bit by bit, month by month. It is these victims of generalized autonomic failure for whom the Diphasic Nutrition Plan as designed for your patients age 53+ is invaluable. Your DNP will significantly reduce the biological age of these patients relative to their chronological age. With the DNP as a life-long plan, your patients will dramatically reduce their probability of succumbing to cardiovascular disease, cancer, Alzheimer's, obesity, and all the other maladies associated with premature aging.

Is generalized autonomic failure found only in your patients age 53+? Absolutely not. Remember, we are all physiologically "over-the-hill" beginning at age 33. The decline is not perceptible at first, but in many of us that decline is associated with an insidious fading of both the Sympathetic and Parasympathetic metabolic spark, as well as Sympathetic and Parasympathetic defense against dysfunction, disease, and aging. If you are doing NUTRI-SPEC Testing on your patients age 33-52, you will never see either a Sympathetic or Parasympathetic test pattern as the juice leaks out of their autonomic reserve. --- But --- you will pump up the autonomic nerve adaptative system without specifically addressing it --- by either restoring balance to the other 4 Metabolic Balance Systems, or, with an individualized Diphasic Nutrition Plan.

In many patients age 33-52, priming the pump is a breeze. But there are some (even a few under age 33) who fall under Type D described above --- who are chronically low achievers, apathetic, and old, way beyond their years. Still, relative to life before NUTRI-SPEC, you and only you can inject some vitality into these lives. Remember ...

ADAPTATIVE CAPACITY = METABOLIC BALANCE + VITAL RESERVES

Now, consider #9 from your list of Sympathetic/Parasympathetic reactivity --- those whose Sympathetic failure exceeds Parasympathetic failure. This pattern of physiopathology is quite common in your patients age 53+, and will also be found in many of your wimpier patients in the 33-52 age group. What you see here is the beginnings of the generalized autonomic failure that eventually applies to all of us as we age. But in these individuals, the Sympathetic capacity for reactivity

is failing faster than the Parasympathetic. NUTRI-SPEC Testing on these patients will reveal a Parasympathetic Imbalance --- but --- you must be absolutely clear that this is not a case of Parasympathetic dominance or Parasympathetic over-reactivity, but merely a case of the Parasympathetic system being relatively reactive in comparison to the rapidly failing Sympathetic system.

These patients will often show typically Parasympathetic symptoms and conditions, but muted --- arising solely from the inability of the Sympathetic system to balance out Parasympathetic activity that is itself somewhat deficient. These are your patients in Type C, above --- always worried sick over everything, but too impotent to do anything but whine about it. These are your Parasympathetic patients who often show some degree of Electrolyte Insufficiency Imbalance as well. If you are working with these patients via an individualized Diphasic Nutrition Plan, you will find that they usually benefit from supplementing with Electro Tonic, and very often eventually need to replace Oxy A+ with Oxy Tonic.

Our last quick look for this month is at #8 from your list of Sympathetic/Parasympathetic physiopathologies --- Parasympathetic failure exceeds Sympathetic failure. #8 is the mirror image of #9 --- both the Sympathetic and Parasympathetic systems are experiencing failure to some degree, but the Parasympathetic system is fading far more quickly than the Sympathetic. NUTRI-SPEC Testing would reveal a Sympathetic Imbalance, but only because there is inadequate Parasympathetic capacity to balance the also deficient Sympathetic activity.

These are typically your patients from Type B, above --- always hyper-stressed out, and impotent to do anything about it. NUTRI-SPEC Testing reveals not only a Sympathetic Imbalance, but very, very often a Glucogenic Imbalance as well. On an individualized DNP, these patients also need Electro Tonic to keep the juices flowing. Constipation or GERD symptoms plague these people as the entire GI tract is pathetically lethargic. --- Only a short course of Metabolic Balancing with Complex S, followed by an individualized DNP, will pump some life back into these people.

By now, you realize that either Sympathetic/Parasympathetic reactivity or Sympathetic/Parasympathetic failure dominates the lives of countless patients. We are nowhere near finished with our series of NUTRI-SPEC Letters discussing autonomic imbalances. We will continue our Sympathetic/Parasympathetic discussion next month, but in the meantime get yourself prepared for a New Year --- prepare to empower people with Complex S and Complex P. --- **SPECIAL**: 2 FREE with every 10 you buy in December.