

NUTRI-SPEC



THROUGH
SPECIFIC NUTRITION

89 Swamp Road
Mifflintown, PA 17059

800-736-4320

717-436-8988

Fax: 717-436-8551

nutrispec@embarqmail.com

www.nutri-spec.net

THE NUTRI-SPEC LETTER

Volume 29 Number 5

From:

Guy R. Schenker, D.C.

May, 2018

SCOLIOSIS

Dear Doctor,

“Scoliosis?!” you react. “That’s a strange title for a NUTRI-SPEC Letter to help me become ...

A MASTER METABOLIC THERAPIST.

How can scoliosis possibly have relevance to my NUTRI-SPEC practice?”

--- Good question, Dear Doctor, and the answer will leave you astounded. --
For the 3rd month we are celebrating your quick & easy, yet ultra specific ...

SYMPATHETIC/PARASYMPATHETIC SUPPORT SYSTEM.

Now add this to the countless ... **CLINICAL PEARLS** you find only through NUTRI-SPEC:

**ALL YOUR PATIENTS WITH
IDIOPATHIC SCOLIOSIS ...**

are Sympathetic. Yes, all.

Think about that cute little 12-year-old girl sent home from school with a note that she flunked the scoliosis screening. Now she and her parents sit in your office wondering what they should do. “Is this a serious condition?”, they worry. “What do you recommend, Doctor?”

--- If you are a Medical Doctor you probably say something like, “I can refer you to an Orthopedic doctor, but since she is not experiencing any pain, we might just want to watch it to see if the condition progresses.” ----- If you are a Doctor of Chiropractic I shudder to think what you might do. If you pound on the left lumbar convexity and the right thoracic convexity in a misguided attempt to “straighten the spine” you are not only displaying your ignorance of Chiropractic neurology, but putting the girl at risk for injury.

* *[This is not to say that there is no Chiropractic answer for scoliosis --- there very definitely is. Chiropractic Distortion Release Technique gives you access to the root neuropathic processes underlying scoliosis. In addition to the conflict between the Somatic Nervous System and the Sympathetic Nervous System mentioned above, you find in scoliosis a Spino-Thalamic Tract overriding the Spino-Cerebellar Tract, as well as dysfunction of the Vestibulo-Occular Reflex system. These functional neuropathic processes are very definitely treatable chiropractically.]*

Fast forward two years --- your cute little girl is now 14, and her scoliosis has begun to cause pain. Her parents bring her to you once more. By visual observation you note a very definite progression of the scoliosis, and refer the family to an Orthopedist. What will he do? --- Again I shudder to think. Surgically rip the spine apart and insert steel rods? Lock the kid in a Cincinnati Brace or a Milwaukee Brace for the duration of her adolescence --- absolutely ruining her teenage years? (--- After which, when the brace is removed, the scoliosis goes right back from whence it came. --- What quackery.)

From a NUTRI-SPEC perspective what you need to understand is that this little girl is under tremendous Sympathetic Stress --- stress that impacts her life in every conceivable way --- far beyond the aggravations of the scoliosis. The link between Sympathetic (excess catecholamine) Stress and scoliosis --- with a relentless antagonism between the Autonomic Nervous System and the Somatic Nervous System, has been thoroughly written up in the Literature since about 2002. Yet no doctors know about this critical truth, nor could really do anything about it if they did know.

----- You however, can have a major impact on these young lives with nothing more than Complex S and whatever other supplements are indicated by your Sympathetic/Parasympathetic Support System Analysis. (Note: As teenagers, many of these Sympathetic Stress victims will actually test Glucogenic upon complete NUTRI-SPEC testing. Once you get most of the pizza and Pepsi out of their lives, the Sympathetic test pattern will be quite evident.)

Fast forward again --- this cute young lady is now a college freshman. After doing well her first semester, she begins to struggle severely with her academics. When she comes home for Spring Break her parents are appalled at how sickly she looks. Beyond physical appearance, her previously vivacious personality seems subdued, even withdrawn. --- What has happened to our once adorable little girl? She is now Anorexic/Bulimic. ----- So here is another clinical pearl that only you as a NUTRI-SPEC practitioner can use to your patients' advantage. --- All cases of Anorexia/Bulimia are Sympathetically stressed, and desperately need Complex S.

Fast forward again --- about 15 years this time, and our adorable little girl is now age 33+. The past 15 years have been a classic saga of surrender to Sympathetic Stress. Our girl struggled through college, taking 5 years to complete it with less than mediocre grades. With no employment offers, she stagnated in her parents' home for a few years while holding down menial jobs as a waitress or store clerk. Mid-20s she had a baby, and after burdening her parents for another year, took advantage of all the welfare "benefits" and moved into a low-income housing dump. A couple years later she got married and had another kid, and the "marriage" ended shortly thereafter. Now she is mid-30s, and something strange is happening to her skin --- white blotches coming out of nowhere ...

Vitiligo. ----- Write it down. Vitiligo is another condition 100% associated with Sympathetic Stress.

Fast forward another few years. Our previously adorable girl has now been on one or another SSRI or SSNRI for about a dozen years (--- drugs that make almost all forms of Sympathetic/Parasympathetic Stress worse). Now suddenly, her heart is doing tricks. For no reason at all her heart will start racing. It might race for a few minutes, or a few hours, and occasionally for a couple days. --- Tachycardia? Particularly, PSVT (Paroxysmal Supra Ventricular Tachycardia)? --- Another Sympathetic Stress syndrome. Write down yet another clinical pearl. --- All your patients with PSVT --- along with all your patients suffering from Vitiligo, along with all your patients who are Anorexic/Bulimic, along with all your patients who show a SCOLIOSIS, are Sympathetic, and absolutely must have Complex S, along with whatever else is indicated by your S/PSS. Yes, doctor --- change a life --- (truly) save a life --- with your Sympathetic/Parasympathetic Support System.

Are you beginning to appreciate how far-reaching is your grasp with NUTRI-SPEC? You should be puffed up with a sense of personal power. Look at just this S/PSS component of your NUTRI-SPEC protocols. --- With your staff devoting just a few minutes to the simplest of testing procedures, you have a comprehensive look at virtually all aspects of ImmunoNeuroEndocrine stress. How comprehensive? Look at your S/PSS analysis table ...

You see no less than 17 Patterns of Metabolic Imbalance. Each Pattern reflects either a major manifestation of Sympathetic or Parasympathetic involvement --- revealing to you (again with minimal time and effort expended) the broad array of mechanisms by which the autonomic nervous system can be either over-reactive in attempted adaptation, or failing in attempted adaptation. And each Pattern reveals one way the autonomic nervous system touches and is touched by all other Metabolic Balance Systems.

Simple and comprehensive. --- How simple? In your March Letter we invited you to play a game --- guessing the one single clinical test (included in your S/PSS analysis) that most definitively and virtually unfailingly defines Sympathetic/Parasympathetic Balance. Many of you played the game --- and guessed correctly --- (Pa - P1), the difference between the sitting heart rate and the recumbent heart rate. How simple is that? The result of that test simply cannot be abnormal without indicating some degree of autonomic stress or failure.

How comprehensive? In your April Letter we encouraged you to play a more challenging game. We offered you a nice bonus of **FREE** NUTRI-SPEC supplements just for taking your best shot. We gave you (in scrambled order) the 17 Metabolic Imbalances revealed by your S/PSS analysis. You were to see if you could match the name of the Imbalance with its abnormal Test Pattern from your Analysis Table. Many of you called to take advantage of the freebies offered just for playing the game, but most of you also said something such as (here is a representative quote from one NUTRI-SPEC practitioner) “ ... I tried to match the different letters on the Sympathetic/Parasympathetic Challenge --- but I could only guess at one of them. I have no idea how to figure out all the rest of them.” --- His perplexity is exactly the point of the game ...

He is right --- you do not have, and no Doctor in the world has, the means to analyze these 17 Imbalances that are driving your patients deeper and deeper into INFLAM-AGING. That is, no Doctor has the means except through NUTRI-SPEC. Here is the correct list of your 17 Imbalances, in order:

- | | |
|--|--|
| A. Alpha 1 Adrenergic stress | J. Prostaglandin E2 excess |
| B. Alpha 1 Adrenergic insufficiency | K. Leukotriene excess |
| C. Vagotonia | L. Adenosine excess |
| D. Beta 2 Adrenergic stress | M. Corticotrophin Releasing Hormone exc. |
| E. Beta 1 Adrenergic stress | N. Prostaglandin I2 or cAMP deficiency |
| F. Beta 3 Adrenergic stress | O. Parasympathetic + Anaerobic |
| G. Alpha 2 Adrenergic stress | P. Parasympathetic + Dysaerobic |
| H. Histamine excess (or
Prostaglandin E1 Insufficiency) | Q. Glucogenic |
| I. Prostaglandin D2 excess | |

Yes, that is the whole point of the game --- to illustrate to you just how much you know --- just how powerful you are. And the real point is you have all you need to quickly identify and correct all these Metabolic Imbalances ...

WITHOUT BEING BURDENED BY THE BIOCHEMISTRY INVOLVED.

That is what NUTRI-SPEC has done for you. You do not need to understand the physiological and patho-physiological mechanisms behind all these 17 Imbalances. All you need to appreciate is that you have the power to work with these Imbalances and serve your patients as no other Doctor can --- with the understanding that your powerful clinical tool is supported by NUTRI-SPEC's understanding of the biochemistry. NUTRI-SPEC has done the work --- you get to play --- and your patients are thoroughly empowered.

My reward in playing my end of the game is when you (or at least a substantial percentage of you reading this Letter) "get it" as it dawns on you just how much fun, satisfaction, and \$\$\$\$ are to be derived from NUTRI-SPEC. Here are comments from a top NUTRI-SPEC practitioner --- one who has always demonstrated a sense of play and adventure --- and who has dramatically changed and even saved lives with NUTRI-SPEC ...

"I have spent the last few weeks studying the Sympathetic/Parasympathetic Support System Analysis. The amount of data that you must have collected and correlated over the last 30 (?) years must have been enormous in order for you to produce such an incredible document.

Here is my take on the S/PSS:

- 1. There is no math involved - allowing those who are mathematically challenged or suffer from calculophobia to "get into the game".*
- 2. You have identified 17 distinct patterns of combinations of the (now) 6 Metabolic Imbalances. These patterns are measurable, reproducible and clinically relevant.*
- 3. These distinct patterns allow you to be much more specific when recommending supplements to help restore Metabolic Balance and increase Vital Reserves in select patients showing these patterns.*
- 4. You have now incorporated Nitric Oxide/Prostaglandin Imbalances into the NUTRI-SPEC system.*
- 5. Within each of the 17 specific patterns, you have identified sub-patterns allowing you to be even more specific than ever before.*

6. Because the dermagraphic responses are less sensitive to "noise" of drug effects, dietary effects, barometric effects and circadian effects, the specificity is enhanced and changes/fluctuations in these patterns should not be as confounding as with full NUTRI-SPEC testing.

I want to congratulate you on this momentous achievement!

I have continued to do full NUTRI-SPEC testing on most of my patients, then use the S/PSS to check for correlations. I am often surprised how the 2 different methods provide the same recommendations. Using the S/PSS this way is fun. I am also using the S/PSS instead of full testing on selected patients - especially those who have many potentially confounding influences.

One concern I have about the S/PSS - it seems too simple. I would think that someone who has not made the effort to understand the physiologic significance of the skin responses could possibly come to the wrong conclusion - that you cannot possibly get this much information with so little effort. Yet you have done it. Amazing.

Thanks for all you do ...

Simple, comprehensive, powerful --- is why in your past two NUTRI-SPEC Letters we so enthusiastically encouraged you to ...

GET IN THE GAME ---

to have some fun. Our point is that with the power of NUTRI-SPEC at your disposal, you can freely "let go"--- NUTRI-SPEC frees your spirit to play. Any rich life is a playful life. Richness expressed as play, and playing to become ever more rich, is one of life's most precious virtuous cycles.

--- So --- how many of your patients (not just teens, but of any age) have a spinal curvature? Are any of your patients Anorexic? Even Bulimic? Do you see white areas of pigment loss on the arms of your patients (--- your staff might notice Vitiligo while doing the Dermographics)? How many of your patients report "My heart's been acting funny"? --- Or --- are already taking a Beta-blocker for their PSV-Tachycardia? ----- How powerful do you feel, and how much fun is it --- knowing you are the only doctor who understands a) where these conditions originate, b) that they are manifestations of a broader & deeper Sympathetic Stress response, and c) how you can do something to correct the fundamental cause?

And how many of your patients are being driven down the road to INFLAM-AGING by one of the 17 Patterns of INE Stress that you and your staff can have fun finding and fixing? --- Play richly.