

NUTRI-SPEC



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SPECIFIC NUTRITION

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THE NUTRI-SPEC LETTER

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From:
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Dear Doctor,

Just yesterday, nearly 10,000 baby boomers turned 65. 10,000 more are turning 65 today, and the same thing will happen every day for the next 19 years. If you want to thrive as a metabolic therapist with NUTRI-SPEC, you have no choice but to understand the significance of this demographics.

Driven by the baby boomers, the nutrition supplement market is gearing up for a decade during which it will double in size. With an annual growth rate of 7%, the supplement market is now growing faster than almost any other part of the economy. From 32 billion dollars in 2012 revenue, the supplement industry is expected to grow to more than 60 billion dollars by 2021. And, this is a highly fragmented market, with no single company having a market share even approaching 5% --- so --- there is no concern that just a small handful of companies will dominate the industry's growth.

Of course, this growth all comes from baby boomers. With the baby boom generation, nutrition supplementation became commonplace. Now that they are not only aging, but also panicking about aging, the boomers are about to dump a fortune from their retirement savings on a desperate attempt to preserve youth. Only you --- with NUTRI-SPEC --- can deliver what they crave --- and --- do it honestly, by delivering real value, not nutrition industry hype.

So --- will you seize this opportunity? Will you take full advantage of your unique position as a NUTRI-SPEC practitioner to truly add quality and quantity to these people's lives? With some combination of your NUTRI-SPEC Metabolic Balancing and your NUTRI-SPEC Diphasic Nutrition Plan you can truly, truly ...

TRULY ... HELP THESE PEOPLE LIVE STRONGER LONGER.

These baby boomers are desperately throwing money here and there, frantically grasping at every health food industry promotion to restore their failing memories, tighten their sagging tummies, and put a lid on their skyrocketing cholesterol and blood pressure. Unless you reach out to them, they will not realize that all the demons tormenting them derive from one source --- a declining Adaptative Capacity.

ADAPTATIVE CAPACITY = METABOLIC BALANCE + VITAL RESERVES

With this fundamental NUTRI-SPEC premise, you can simultaneously address the fundamental sources of all their devastating demons. You will not offer a random assortment of health food remedies for memory loss, weight gain, high cholesterol, hypertension, or any of the other signs of premature aging. Rather, you will empower these people so that they can truly ...

LIVE STRONGER LONGER.

What common denominator will you find among all these baby boomers? What is the one primary cause underlying all their secondary symptoms? What do memory loss, weight gain, high cholesterol and triglycerides, high blood pressure, depression, fatigue, and cardiovascular disease all have in common? --- They are all associated with the major theme of every issue of these Letters for a full year ---

INSULIN REACTIVITY leading to INSULIN RESISTANCE.

Nearly all those age 65+ boomers (along with the majority of your other patients age 53+) looking for nutrition "cures" on which to waste their money are insulin resistant to some degree. (--- The abdominal weight gain is a dead giveaway. All patients whose waist lines have expanded more than their hip or chest lines over the past few years are insulin resistant. --- Count on it. Fix it. --- And with no disease-specific remedies --- shrink the tummy, drop the cholesterol and triglycerides, and control the blood pressure --- while adding zip to the step and zap to the brain.)

The NUTRI-SPEC staff just yesterday received a report from a doctor regarding his 55-year-old diabetic with weight gain, insomnia, frequent urination, sore joints, foot cramps and tingling, fatigue, and sleep apnea. Here are some of the doctor's comments: "Well, maybe some of our knowledge and expertise is rubbing off. I think this patient got the message. After meeting with him last week and going over his NUTRI-SPEC results, he took himself off all meds except for the insulin, and, he

has decreased his insulin already. In just a week, he has lost 7 pounds. He has stopped all the snacks and diet Cokes. He said he does not even have any sugar cravings. He has been testing his blood sugar, and it has dropped into the 150s. Thanks for your help. It's awesome to know that we are truly extending, if not saving, patient's lives!!!"

Did this NUTRI-SPEC Doc give his patient a cure for diabetes, a cure for insomnia, an herbal drug to help him lose weight, a "natural" remedy for joint pain, megadoses of nutrients to "give him energy" --- or even address the patient's symptoms at all? None of the above. All the Doc did was effectively explain how the Electrolyte Stress, Sympathetic, and Acidosis test patterns revealed by NUTRI-SPEC testing related to this man's long list of symptoms and conditions. The patient got it.

Your patients will get it too. Most patients get it. But you really do need to spell it out for them --- 3 substantial meals daily, each with an adequate portion of meat, fish, poultry, eggs, or cheese, and absolutely no eating or drinking between meals. All those recommendations are part of the Eat Well – Be Well you give all your patients, but you really do have to say it out loud while standing eye-to-eye with each patient.

As you begin the New Year, you must clearly envision how ...

**YOU WILL PROSPER IN SERVING THE COUNTLESS
BABY BOOMERS IN YOUR COMMUNITY ...**

who desperately need your service. While you are visualizing, get yourself fired up over ...

**THE INCREDIBLE CLINICAL RESULTS
YOU WILL ACHIEVE.**

The report we just gave you from a NUTRI-SPEC Doc on his diabetic patient is by no means out of the ordinary --- we get a steady stream of such reports at NUTRI-SPEC, and you can produce the same gratifying results yourself.

Saving lives by controlling or even reversing cardiovascular disease is something we repeatedly make a point of. But now, consider some of the other sequelae of insulin resistance that will torment all your new baby boomer patients. --- Memory loss is a big one. The latest research shows that older adults with even slightly elevated blood sugar levels do far worse on memory tests than those with normal blood sugar. The reason is because as blood sugar rises even a slight amount, the hippocampus in the brain shrinks. Yikes!!!

The hippocampus is the part of the brain most associated with memory and learning. The slight elevation of blood sugar that causes hippocampal shrinking is not in the diabetic or even in the pre-diabetic range. Even slightly above “normal” blood sugar is enough to cause cognitive decline associated with hippocampus shrinking. Clearly, the 141 older adults in this study I am referencing were suffering from the insulin resistance we have been talking about for an entire year. Not only were they not diabetic nor pre-diabetic, but also they were not heavy drinkers, they were not clinically overweight, and they were not suffering from any clear signs of memory loss or cognitive dysfunction.

They were just like dozens and dozens of your own patients --- age 53+, and mildly annoyed that, “My memory just isn’t what it used to be.” --- So --- insulin resistance is a major factor in memory loss, and eventually dementia. Surely, the link between poor glycemic control and dementia is enough to motivate you and your patients to jump on the NUTRI-SPEC bandwagon in a big way. Eat Well – Be Well, and supplement with Complex S &/or Complex P, Oxy A+ &/or Oxy D+, along with the extraordinary adaptogens Diphasic AM and Diphasic PM.

Here is another important consideration as you extend the quality and quantity of baby boomers’ lives... In Letters last year we referred to the “Aisle of Death” --- the supermarket aisle that sells sweet drinks. Probably the most important recommendation on Eat Well – Be Well is the total elimination of sugary drinks. “Cut the sweet drink” emphasis from NUTRI-SPEC is obviously about insulin reactivity and glycemic control, but it also highlights the interface between Metabolic Balance and ImmunoNeuroEndocrine stress. Not only will sugary drinks destroy a person’s life with all the consequences of insulin resistance, but will also devastate the immune system.

You are learning that even minimal intake of sugary drinks like soda increases obesity, diabetes, heart disease, and even cancer, but also it is now shown that, according to a study presented at The American College of Rheumatology’s annual meeting, even 1 sugary drink per day increases the risk of rheumatoid arthritis by 71%. Interestingly, this increased risk of rheumatoid arthritis does not merely apply to those who also suffer the obesity, the diabetes, the high triglycerides, and the heart disease from soda, but affects even those who do not become overweight and who maintain reasonably normal triglycerides. In other words, the lymphocytic Th1 inflammatory cytokines responsible for the autoimmune destruction from rheumatoid arthritis react to sugary drinks independently of any of the other devastating effects.

Another study shows that osteoarthritis is also exacerbated by sugary drinks. Even less than 1 drink daily (5 per week) is shown to increase

the progression of osteoarthritis of the knees in men --- leading to more pain and greater disability.

ImmunoNeuroEndocrine stress? Rheumatoid arthritis? How about cancer? A study on over 23,000 postmenopausal women tracked for up to 25 years shows that there is an 80% increased incidence of endometrial cancer in women who drink soda regularly. Even though only a few of these women actually suffered diabetes, the insulin resistance and the insulin-like growth factor proteins lead to the rise in uterine cancer.

Do you see how serving patients with insulin resistance can be the foundation of your practice --- and must be your major focus as you begin to tap the baby boomer market --- those whose lives only you can enrich? Ideally, you will reach these people before insulin reactivity turns to insulin resistance. That goal is easily achieved in patients younger than 53. But at age 53+ some degree of insulin resistance is in the clinical picture for almost all your patients. Will insulin resistance become diabetes? Only you can stop it.

And for those patients who are already hyperglycemic? You, like the NUTRI-SPEC Doc featured above, are their potential miracle worker:

- You will have many insulin resistant diabetics who, with your help, will get off all their oral diabetic medication.
- You will have insulin resistant diabetics who are inappropriately taking insulin --- and you will be able to get them off the insulin such that they can rely only on oral diabetic medication.
- You will have insulin deficient diabetics on insulin for whom you will be able to minimize the dose of insulin required. --- And --- you can assure the patient that if he makes a full commitment, it is likely you can delay or even eliminate the nasty end results of diabetes --- extreme cardiovascular disease, kidney failure, blindness, amputation, etc.
- You will occasionally have insulin deficient diabetics who are being inappropriately treated as insulin resistant diabetics. You will make it clear to these patients that they have wasted years taking useless oral diabetic medication --- that the reason it “hasn’t worked” is because the problem is not insulin resistance but insulin deficiency. The pancreas is being slowly destroyed by autoimmune attack and they may actually need to get on insulin for life --- but --- with your help the insulin needed will be quite small.

- You will have patients who are both insulin resistant diabetic and insulin deficient diabetic. These are the people who were insulin reactors, who then became insulin resistant, and then insulin resistant diabetic --- but --- who along the way succumbed to some immunological stressor that pushed them into autoimmunity. Now these patients have both types of diabetic pathology raging simultaneously, and only with NUTRI-SPEC can you sort through it all. With patient-specific diet and supplement recommendations you will pave the road to this person's happy, healthy future.

But even if you never serve a single diabetic patient in your entire Metabolic Therapy career, you will still be the most effective "diabetes doctor" in town --- effective because you will prevent more cases of diabetes than most doctors treat. While those doctors are wasting their diabetic patients' lives on oral diabetes drugs, on insulin, on statin drugs, on blood pressure drugs, and on inane low-fat diets --- you will be addressing and fixing the causes of diabetes, the causes of high cholesterol and triglycerides, the causes of hypertension, and the causes of weight gain.

Your practice will be loaded with baby boomers who will not become diabetic --- because of you and NUTRI-SPEC --- but neither will they struggle with tubby tummies, rising blood pressure, dangerous triglycerides, or debilitating fatigue. Neither are they likely to suffer from rheumatoid arthritis, or other autoimmune diseases. Nor --- are they likely to succumb to dementia, cardiovascular disease, or cancer.

One final point regarding your upcoming surge of baby boomer patients ----- not only will nearly all be insulin resistant, but also, all your patients age 53+ will be burdened with some degree of GENERALIZED AUTONOMIC FAILURE. That is why this Letter's companion theme to insulin resistance over the past year is ...

THE ABSOLUTE ESSENTIALITY OF COMPLEX S &/or COMPLEX P ...

for nearly all your patients.

About 1/3 of your patients younger than 53 will need Complex S or P, at least initially. A few will be vacillator-oscillators, and temporarily need S and P while Doing FINE. But at 53+, generalized autonomic failure begins to intrude on every patient's clinical picture. To avoid premature aging, everyone age 53+ should be given the chance to face life with the support of Complex S and Complex P. So give. Serve. "You are an insulin reactor," and, "We need to pump up your Vital Reserves," are your key themes for baby boomers.