

# NUTRI-SPEC



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## THE NUTRI-SPEC LETTER

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From:  
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Dear Doctor,

Your shirt should display a bright silver badge ...

### **“BARRIER BUSTER” ...**

proclaiming your primary role as your patients' metabolic therapist. No one but you can break down the barriers blocking their capacity ...

- to access the vast energy reserves stored in their bulging fat cells
- to burn more energy in the fires of joyful living
- to push fully charged electrolytes across cell and mitochondria membranes
- to activate adrenal power on demand
- to defend against adrenal stress
- to vigorously leap from the depths of hypoglycemia
- to pull carbs and fats with balanced efficiency through the pathways of oxidative energy production
- to pump vitality juice through the entire ImmunoNeuroEndocrine system

Your NUTRI-SPEC supplements are your complete set of therapeutic tools --- each product a one-of-a-kind formulation --- giving you the

precision of a skilled craftsman to rebuild your patients' ADAPTATIVE CAPACITY by:

- accessing and mobilizing stored fat
- igniting the fires of high-vitality living
- maximizing membrane selective permeability
- integrating Immune, Neurological, and Endocrine functions
- restoring BALANCE to the Water/Electrolyte, Anaerobic/Dysaerobic, Glucogenic/Ketogenic, Sympathetic/Parasympathetic, and Acid/Alkaline control systems
- pumping up the VITAL RESERVES that begin to fade at age 33, and that often fall off a cliff at age 53.

But, the essence of NUTRI-SPEC is more than giving you unique formulations that rebuild health faster, more completely, and more permanently than all the health food industry's flavors of the month. The corollary to having the most comprehensive toolset is being able to implement those tools with specificity. Thus, you have two patient-specific means to fully empower your patients --- your NUTRI-SPEC Metabolic Testing and your NUTRI-SPEC Diphasic Nutrition Plan. On any particular patient you may choose either approach, or a combination of the two, and still achieve your ultimate goal:

ADAPTATIVE CAPACITY = METABOLIC BALANCE + VITAL RESERVES

1. You may, for some patients, be able to begin with Metabolic Balancing, then as Imbalances resolve (generally within 3-10 weeks), transition into that patient's life-long, long-life Diphasic Nutrition Plan.
2. In some patients, Metabolic Testing yields no clear path for you and your patient, so it is more appropriate to begin with the Diphasic Nutrition Plan. After a month or two on the DNP, the muddy waters may clear enough that Metabolic Testing reveals exactly what the patient most needs. At that point, you institute Metabolic Balancing Procedures, then transition back to the happy-ever-after DNP when those Metabolic Imbalances have been thoroughly addressed.
3. In many patients, you will start with the DNP, and that is all the patient will ever need. You will fine tune the DNP over the course of months, then years, then decades, as your patient's physiological age is maintained at much younger than the chronological age. These patients will look and feel young and be your most devoted followers, and your most prolific source of referrals.

4. For some patients, you will need to guide the patient through a brief period of DOING FINE, before that patient is prepared to embark on either Metabolic Balancing or a DNP.
5. In some patients, you will want to “juice up” the DNP by supplementing it as per NUTRI-SPEC adjunctive testing procedures. The Pain Control protocol is one such adjunctive procedure. It does not just apply to patients in pain --- the procedure could more appropriately be called Tissue Acid/Alkaline Control protocol.

Another adjunctive testing procedure is the Dermographics + Edema Testing introduced in last month’s Letter --- and which is detailed on the Home Page of your NUTRI-SPEC website. This Dermographics + Edema testing requires at the most a couple of minutes. A quick review of the results gives you a menu of supplements to choose from --- one or more of which is likely to be just what this patient needs to “get over the hump” --- jump-starting the path to robust, good health.

Whichever of these 5 procedures you choose as most appropriate for an individual patient, you will empower that patient to rise above symptoms, laughing in the face of aging as youthful vitality is maintained --- physical stamina and mental sharpness achieved and preserved, while others who do not benefit from your services succumb to the premature aging we see all around us.

And --- over the years and then decades, as your patients are enjoying youthful vitality unmatched by their peers, you will enjoy professional success unmatched by your peers. You will smugly scoff at all the clinical nutritionists desperately administering disease-specific nutrition with the latest popular herbal drug or heavily-hyped natural nutrition cure. Supplementing with individual nutrients and drugs in a desperate attempt to treat symptoms --- irrationally grasping at straws in a frantic attempt to make a patient “feel good” --- has always been a loser’s approach to clinical nutrition. It was a loser 35 years ago when I first got into this game full-time, and it continues to be a loser.

Countless natural food industry “wonder cures” have come and gone over the years. Three decades ago, millions of people spent hundreds of millions of dollars on that day’s flavor of the month. But when the marketing sizzle could no longer overpower the massive clinical failures, people moved their attention and their dollars to the next flavor of the month. And so it has gone, year after year, decade after decade ever since. Yesteryear’s wonder cures are long forgotten; today’s popular remedies are nothing more than a passing fad. With NUTRI-SPEC, you can scoff at such pathetic nonsense. You are a winner, and your patients can only win with your guidance.

But if you want to inject a little “magic” into your NUTRI-SPEC Metabolic Therapy, focus your attention on #5 above. And, focus this concept of barriers. All these incredible health rebuilding benefits of your NUTRI-SPEC Metabolic Therapy and Diphasic Nutrition Plan can ...

### **CATAPULT YOUR PATIENTS TO TOTAL EMPOWERMENT ...**

much faster if you can blast away the barriers blocking their paths to metabolic efficiency. The last 2 issues of this Letter introduce the topic of “energizing” your patients. The point is that you not only have precision tools to rebuild your patients’ health, but also a complete arsenal of powerful weapons to blast these barriers out of the road. The Oxy A+ and Oxy D+, the citrates, the phosphates, the chlorides, and the bicarbonates are all powerful cannons that can give you ...

### **LIGHTENING STRIKE POWER AND ELECTRIFYING VITALITY.**

The problem, as we have made clear, is aiming these cannons with enough focus to minimize collateral damage --- anything with so much power to do good, has equal power to do harm.

The Dermographics + Edema Testing is an especially fun new toy. NUTRI-SPEC Docs are already starting to play with it and report the results to us. Like the Pain Control, the Dermo + Edema ...

### **CAN BE USED AS A STAND-ALONE PROCEDURE ...**

even on patients for whom you are not doing clinical nutrition. If you are a Chiropractic Doctor, you probably have a majority of your patients on whom you do no nutrition beyond Activator, Mighty Mins, and Eat Well – Be Well. But, if your patients are anything like mine, they often present a clinical picture that screams for a Metabolic Therapy booster in tandem with the chiropractic they need.

The Dermographics + Edema Testing is a great way to introduce the concept of Metabolic Therapy without attempting to “sell” these chiropractic patients a concept that is foreign to them. It is such a quick and easy test procedure, yielding a tremendous amount of information relative to the time and energy invested. It will pique your patient’s interest (--- “What does that tell you, Doc?”), but more importantly it gives you a supplement menu from which your thoughtful selections will make an immediate impact on your patient’s quality of life. Those few supplements may be all your patient ever receives as Metabolic Therapy, or, they may open the door to an individualized DNP to assure the patient lives stronger longer.

--- If you are doing Metabolic Balancing on a patient, and there are questions about just what Patterns of Metabolic Imbalance need your attention (either because of inconsistent test results, or medications), this minute or two of extra time invested will clarify the picture for you beautifully. If you are doing the Diphasic Nutrition Plan on a patient and want to add just a little additional specificity, this minute or two of testing will give you everything you need to know. If you are doing neither Metabolic Therapy nor a Diphasic Plan on a patient but want to be able to make some specific recommendations for a patient, and, be certain those recommendations include your NUTRI-SPEC barrier busters, then train your staff to do this quick little test procedure.

**YES --- BARRIER BUSTERS ARE THE KEY.**

A carefully aimed cannon blast with Phos Drops, for example, can blow a major barrier off the face of the map. But --- it can at the same time leave such a huge crater in the road to health that further progress is impossible. This ecstasy-to-agony effect of your metabolic cannons is described in detail in your February Letter. --- “Miraculous” symptomatic improvement, followed within days or weeks by new symptoms that necessitate discontinuing the daily rounds of cannon fire --- has repeatedly been my major source of frustration for over 30 years.

**--- BUT NO LONGER. NOW I HAVE THE DERMO & EDEMA TEST.**

Keeping your cannons precisely aimed is the greatest benefit of the Dermographics + Edema Testing. Not only will it identify the cannons from your arsenal that need to be fired today, but also will clue you in to exactly what has changed --- for better or for worse --- as the days and weeks go by. The arm and leg dermo and the edema are exquisitely sensitive to changes in tissue Acid/Alkaline and Anaerobic/Dysaerobic Balance, and to systemic Sympathetic/Parasympathetic Balance. --- So, that patient whose shoulder bursitis and GERD responded “miraculously” to Phos Drops, but after 2 weeks developed occasional skipped heart beats? ----- Your follow-up Dermographics + Edema shows clearly that a little Oxy A+ is needed with the Phos Drops. Easy. Simple.

But even though this quickie test procedure is a highly sensitive and specific reactor to metabolic changes induced by your NUTRI-SPEC supplements, it is actually less reactive to the effects of drugs than are most of your other NUTRI-SPEC tests.

To illustrate: Suppose your patient has been gobbling down Tylenol for 3 days to control some pain. You might as well forget about urine and saliva testing --- the urine pH and surface tension will sink to rock

bottom lows while the specific gravity along with the saliva pH will soar sky high. --- They have completely been invalidated as clinical indicators. --- Or --- suppose a patient is on a beta blocker to control blood pressure. Same story with urine and saliva --- the drug itself causes low pH, low surface tension, high specific gravity, and high saliva pH regardless of what is actually going on in the patient's own metabolism. Furthermore, the drug will slow the heart and respiratory rate, and (obviously) drop the blood pressure, and decrease the orthostatic response. What does that leave you with? It leaves you with more questions than answers regarding that patient's metabolic needs.

It is not that the Dermographics and Edema responses will not be affected by drugs --- they will --- but far less so than your other NUTRI-SPEC test parameters. Even a diuretic that a patient specifically takes to control edema, will usually not eliminate the edema altogether, so as long as you do the test properly with the patient's legs hanging vertically, you will still pick up the pitting and/or the white dermographics response indicative of interstitial or cellular fluid retention.

What you need to do: --- Go to the Home Page of your NUTRI-SPEC website. You will see a flashing arrow pointing to a topic, "Producing Explosions of Adaptative Energy." That title perfectly explains what you and your patients will gain from this new and easy test procedure.

- Print out those 7 pages.
- Read the first 3 pages for a little further understanding of just how informative these tests can be.
- Make additional copies of the last 4 pages that give the actual procedure and interpretation. Distribute these among your staff.
- Begin to "play." --- First, have your staff run the tests on each other. --- Then, have your staff start running the tests on many patients.
- Running the tests on many patients is done with no intention of making nutrition recommendations. You are achieving 2 purposes. You are giving you and your staff the practice sufficient to master the test procedure and the ability to interpret it quickly. And, you are generating interest in your patients who will be dying of curiosity to know what you are testing for and what it means.
- Within a day or two and several dozen tests, you will have seen the full range of responses from red arms and white legs to white arms and red legs, and every possible dermographics combination with every degree of edema from perfectly normal to a deep crater.
- NOW --- start aiming those cannons. For each patient you test, choose from among the list of supplements suggested.
- Easy. Simple. --- Enjoy your results.