

NUTRI-SPEC



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THE NUTRI-SPEC LETTER

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From:

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Dear Doctor,

YOU ARE AT POWER.

After last month's Letter, you appreciate that you are at power over the primary force of life --- as you balance and integrate the NEURO component of ImmunoNeuroEndocrine stress. You are at power over the spark that ignites all vital action. You are fine tuning the first-responder to all environmental stressors. You are priming the pump behind the flow of vital juices. Yes, the "N" of INE stress is powerfully impacted by your specific use of Complex S and Complex P.

With NUTRI-SPEC, you are able to control ImmunoNeuroEndocrine stress in your patients, and the "N" is primary. You need to make your patients understand as well as you do that there is hardly a symptom they present that does not to some degree represent a loss of INE control.

----- Pause for a moment and think of a patient who suffers from chronic fatigue. The next time you see that patient you will explain how chronic fatigue is not a disease as much as it is a symptom of inadequate or inappropriate ImmunoNeuroEndocrine response. You will go on to explain that your NUTRI-SPEC Metabolic Therapy addresses the Metabolic Imbalances along with the deficiencies of Vital Reserves that allow the breakdown in immune system function, nervous system adaptability, and endocrine balance. And, you will explain that of the three --- the immune system, the nervous system, and the endocrine system --- the nervous system is primary. It is the major focus of your Metabolic Therapy because without a nervous system that can adapt to the stressors of life, neither the immune system nor the endocrine system can function optimally.

Now, think of one of your patients who suffers from fibromyalgia. Picture that patient's face as you spend 30 seconds presenting the essence of INE stress. Now picture one of your many patients who are overweight --- do you have any of those? Now picture the face of a patient who suffers from allergies, one who suffers from irritable bowel, one who has insomnia, one who is hypoglycemic, one who is diabetic, one who has arthritis --- all of these patients are suffering from INE stress --- and the "N" is primary. To fully serve these patients, you must be giving nearly all of them Complex S and/or Complex P.

As you read last month's Letter placing the emphasis on the "N" of INE, the message should have particularly resonated with your mind and heart if you are ...

A CHIROPRACTOR.

After all --- what is chiropractic all about? Doctors of chiropractic are concerned with the neuromusculoskeletal component of health and disease. Where chiropractors differ philosophically from mainstream thinking, and particularly from the medical paradigm, is that we understand the scope of neuromusculoskeletal function to be far greater than is typically assumed.

Why is the neuromusculoskeletal component of health and disease so far-reaching? --- It is the neuro in neuromusculoskeletal. How about that? Once again, it is the "N" that is primary; it is the "N" that represents the primary force of life; it is the "N" that is the first-responder to all environmental stressors; it is the "N" that controls the flow of vital juices. If you are a chiropractor who administers adjustments having a profound effect on your patients' nervous system, then you are way ahead of the NUTRI-SPEC practitioners who do not.

What is the basis of chiropractic's claim that the NMS system is almost unlimited in scope? It is because true chiropractic is not musculoskeletal therapy, but rather designed to balance the neuromusculoskeletal system. The "neuro" component of NMS includes viscerosomatic reflex arcs, somatovisceral reflex arcs, and neurovascular reflex arcs. Every time you deliver an effective adjustment, you are intruding upon a neuropathic process.

Via what part of the nervous system are all these pathophysiological reflexes mediated? ---Yes, it is the Sympathetic/Parasympathetic nervous system.

Some of our top NUTRI-SPEC practitioners are medical doctors; there are a few naturopathic doctors; there are a carefully screened group of

other clinicians such as certified clinical nutritionists. But the vast majority of you reading this Letter are Doctors of Chiropractic. How could it be any other way? --- If you stop and think about it, the philosophy of chiropractic is essentially the same as the philosophy of NUTRI-SPEC. NUTRI-SPEC does not give remedies in a disease-specific attempt to control symptoms. NUTRI-SPEC empowers patients by increasing Adaptative Capacity. Is that patient-specific emphasis on empowering (rather than “treating”) not perfectly parallel to chiropractic philosophy?

Tragically, most chiropractors these days see themselves as nothing more than musculoskeletal therapists. But NUTRI-SPEC chiropractors understand that they are doctors, not therapists. We understand the concept of increasing our patients’ Adaptative Capacity. Yes, we chiropractors (and all other good NUTRI-SPEC practitioners) are keenly aware of our patient’s symptoms --- but --- our ultimate goal is to not merely relieve those symptoms, but to correct their causes.

Think of it this way --- if --- you are a chiropractor who not only understands that you are a doctor, but also understands the far-reaching effects of the nervous system and how it responds to your specific adjusting procedures --- then --- you can understand that every adjustment you deliver has viscerosomatic effects, somatovisceral effects, and neurovascular effects. In other words, every adjustment you give is virtually the same thing as giving your patient Complex P &/or Complex S.

In last month’s Letter, we closed by giving you an extraordinarily effective means to objectively determine each of your patient’s need for Sympathetic/Parasympathetic-directed supplementation. As you can imagine, I, a chiropractor, had my fellow NUTRI-SPEC Doctors of Chiropractic in mind as I presented that quickie test procedure. It is designed to serve every patient of your busy chiropractic practice for whom a Sympathetic &/or Parasympathetic boost is essential.

What could be more clinically magnificent than combining specific chiropractic adjustments with specific NUTRI-SPEC supplementation? Whether you see it as backing up your chiropractic adjustments with the reinforcement of Metabolic Therapy, or as backing up your Metabolic Therapy with chiropractic care --- the two are more than compatible --- they are mutually empowering.

Last month’s Letter presented a “SNEAK PREVIEW” of ...

THE QUICKIE TEST PROCEDURE ...

--- something you and your staff could begin playing with; something to help you realize how easily you can offer the benefits of NUTRI-SPEC to a large volume of patients. This month our Letter gives you the entire ...

SYMPATHETIC/PARASYMPATHETIC SUPPORT SYSTEM.

If you are a chiropractor, imagine your assistant spending 2 or 3 minutes running 5 tests on your patient before you even enter the room.

- To implement the testing, have your staff say to your patients, “We’re going to spend a little extra time with you today. We’re going to do a special test procedure that will give us clues on how we can make you stronger and feel better.” (--- And if you are a Chiropractor, add, “These extra tests work in harmony with our chiropractic analysis.”) --- Your patients will love the extra attention. Their eyes will pop out of their sockets as they watch with wonder the Dermographics response. “What does that tell you?” they will ask eagerly.
- Do the Edema Test on the leg, and observe for 20 seconds.
- With the patient sitting relaxed, count the heart rate for 15 seconds and multiply by 4. That is what we call Pulse a (Pa).
- Do the final check of the Edema Test.
- Do the Dermographics on the arm and leg and watch for a few moments, looking for any extreme initial red or white response.
- Have the patient lie supine, and after exactly 30 seconds count the heart rate for 15 seconds and multiply by 4. This is what we call Pulse 1 (P1). Subtract (Pa - P1).
- Have the patient sit up and do your final check of the Dermographics and Edema.
- Plug the 4 Test Results into the SYMPATHETIC/PARASYMPATHETIC SUPPORT SYSTEM Table (provided on the back page of this Letter).
- When the Quickie Tests are completed, your staff should say, “Our tests show that there are 3 (4) Metabolic Therapy nutrition supplements that should help you better handle stress and keep your body running more efficiently. One is your activator, and the others will make you stronger.”

As you enter and greet the patient, you briefly explain that the tests just done show clearly the nutrition supplementation needed ...

TO ENHANCE THE BENEFITS OF YOUR CHIROPRACTIC CARE.

How long do you continue the Complex P and Complex S supplementation indicated by this quickie test procedure? ----- Let these simple objective tests be your guide. In most patients, the (Pa-P1), Dermographics, and Edema will move toward normal as you do occasional follow-up testing. In some patients, the abnormal tests will be resistant to change, telling you that your patient needs ongoing autonomic support to live stronger longer.

This Sympathetic/Parasympathetic Support System is just what you have been looking for. In the 25 years we have been putting out this Letter we have had ...

HUNDREDS OF CHIROPRACTORS LIKE YOU ...

tell us, "NUTRI-SPEC is everything I want to give my patients in the way of clinical nutrition --- but --- I and my staff just can't consistently squeeze it into our patient flow. --- Is there any way we can offer the core of NUTRI-SPEC without such an extensive set of tests? I have so many patients for whom good chiropractic can only go so far --- patients that I know will have the breakthrough they need if I can support them with NUTRI-SPEC."

Now you have it. --- Whether you are a doctor working exclusively with the Diphasic Nutrition Plan (which in itself is a powerful means to assure your patients live stronger longer), or, have had to limit your NUTRI-SPEC Metabolic Balancing to just a few select patients, or, have put NUTRI-SPEC on hold entirely, this quickie test procedure gives you the power to specifically correct ImmunoNeuroEndocrine stress in a large volume of patients.

Place a copy of the SYMPATHETIC/PARASYMPATHETIC Support System analysis table in each exam room, and get your staff fired up today!

SYMPATHETIC/PARASYMPATHETIC SUPPORT SYSTEM

Arm	Leg	Edema	(Pa-P1)	Supplementation
X	R	+	5+	Activator 2, 2X, A; Comp P 3, 2X, A; MgCl ₂ 1/8 tsp B Brk; I-S
X	R	+	0 - 4	“ ; Comp P 3, 2X, A; Electro Tonic 1/4 tsp, 2X, B; I-S
X	R	+	-1-	“ ; Comp P 2, 2X, A; MgCl ₂ 1/8 tsp B Brk; I-S
X	R	-	5+	“ ; Comp P 3, 2X, A; NaGP 1/4 tsp B Brk; I-S
X	R	-	0 - 4	“ ; Comp P 2, 2X, A; Oxy Tonic 1/4 tsp B Brk; I-S
X	R	-	-1-	“ ; Comp P 3 A Brk; Oxy Tonic 1/2 tsp B Brk; I-S
R	0	+	5+	“ ; Comp P 2, 2X, A; Electro Tonic 1/4 tsp, 2X, B; MgCl ₂ 1/8 tsp B Brk
R	0	+	0 - 4	“ ; Comp P 3 A Brk; Electro Tonic 1/4 tsp, 2X, B; Oxy Tonic 1/4 tsp B Brk
R	0	+	-1-	“ ; Comp P 2 A Brk; Oxy Tonic 1/4 tsp B Brk; MgCl ₂ 1/8 tsp B Eve
R	0	-	5+	“ ; Comp P 3 A Brk; Electro Tonic 1/4 tsp, 2X, B; NaGP 1/2 tsp B Brk
R	0	-	0 - 4	“ ; Comp P 1 A Brk; Electro Tonic 1/4 tsp, 2X, B; Oxy Tonic 1/4 tsp B Brk
R	0	-	-1-	“ ; Comp S 2 A Eve; Electro Tonic 1/4 tsp, 2X,B; Oxy Tonic 1/4 tsp B Brk
R	W	+	5+	“ ; Comp P 2, 2X, A; Electro Tonic 1/4 tsp, 2X, B; MgCl ₂ 1/8 tsp B Brk
R	W	+	0 - 4	“ ; Comp P 3 A Brk; Electro Tonic 1/4 tsp, 2X, B; MgCl ₂ 1/8 tsp B Brk
R	W	+	-1-	“ ; Comp P 2 A Brk; Electro Tonic 1/4 tsp, 2X, B; Oxy Tonic 1/4 tsp B Brk
R	W	-	5+	“ ; Comp P 2, 2X, A; NaGP 1/4 tsp B Brk; MgCl ₂ 1/8 tsp B Brk
R	W	-	0 - 4	“ ; Comp P 2 A Brk; Comp S 2 A Eve; Oxy Tonic 1/4 tsp B Brk
R	W	-	-1-	“ ; Comp S 2 A Eve; Oxy Tonic 1/4 tsp B Brk; MgCl ₂ 1/8 tsp B Brk
0	W	+	5+	“ ; Comp P 2, 2X, A; Electro Tonic 1/2 tsp, 2X, B; MgCl ₂ 1/8 tsp B Brk
0	W	+	0 - 4	“ ; Comp P 3 A Brk; Electro Tonic 1/2 tsp, 2X, B; MgCl ₂ 1/8 tsp B Brk
0	W	+	-1-	“ ; Comp P 2 A Brk; Comp S 2 A Eve; MgCl ₂ 1/8 tsp B Brk
0	W	-	5+	“ ; Comp P 2, A Brk; Electro Tonic 1/4 tsp, 2X, B; NaGP 1/4 tsp B Brk
0	W	-	0 - 4	“ ; Comp P 1 A Brk; Comp S 1 A Eve; Electro Tonic 1/4 tsp 2X, B
0	W	-	-1-	“ ; Comp S 3 A Eve; Electro Tonic 1/4 tsp, 2X, B; MgCl ₂ 1/8 tsp B Eve
W	W	+	5+	“ ; Comp P 2, 2X, A; Electro Tonic 1/4 tsp, 2X, B; MgCl ₂ 1/8 tsp B Brk
W	W	+	0 - 4	“ ; Comp P 2 A Brk; Comp S 2 A Eve; Electro Tonic 1/2 tsp, 2X, B
W	W	+	-1-	“ ; Comp S 3 A Eve; Electro Tonic 1/4 tsp, 2X, B; MgCl ₂ 1/8 tsp B Brk
W	W	-	5+	“ ; Comp P 2 A Brk; Electro Tonic 1/4 tsp, 2X, B; NaGP 1/4 tsp B Brk
W	W	-	0 - 4	“ ; Comp S 3 A Eve; Electro Tonic 1/4 tsp, 2X, B; MgCl ₂ 1/8 tsp B Brk
W	W	-	-1-	“ ; Comp S 2, 2X, A; Oxy Tonic 1/4 tsp B Brk; Electro Tonic 1/8 tsp B Eve
Vacillator Oscillator:				“ ; Comp P 2 A Brk; Comp S 2 A Eve; Oxy Tonic am; Electro Tonic pm
Always appropriate:				Add Diphasic AM 1-5 A Brk and Diphasic PM 1-5 A Eve

