

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 28 Number 5

From:

Guy R. Schenker, D.C.

May, 2017

Dear Doctor,

Picture yourself ----- as you approach a room in your office where you know ...

A NEW PATIENT AWAITS YOU.

What are you thinking as you walk through the door? What are you feeling? Are you striding assertively, or do you step tentatively? Do you have concerns over what challenges your new patient will present to you? Are you concerned about how effectively you will present to your patient?

Yes, picture yourself as you move to and through that door. Does your heart have a bit of extra “pitter-patter” (as it should) with excitement over the prospect of service (“love thy neighbor”) to a fellow human whom (you are confidently certain) needs your expertise? Are you eagerly anticipating in advance the respect, the appreciation, and the \$\$\$\$ you are about to earn ----- not to mention the string of referrals this new patient will generate?

Most importantly, picture yourself --- or actually re-create for yourself as you read this --- how your mind is engaged as you enter upon your new patient.

IS YOUR BRAIN “REVVED UP” ...

... like the engine of a Lamborghini at the starting line of a world-class race? --- Do you know what I mean? Are you feeling what I mean? ----- Is this a familiar feeling --- your finely tuned high-performance brain ready to accelerate on command? --- It should be; it had better be. After all, you are offering every new patient world-class Metabolic Therapy ...

You want to be sharp. You must be ready to let your engine roar the moment you and your new patient make eye contact.

How do you assure your brain has Lamborghini Power? One “trick” is to have a few essential ...

“PATHO-PHYSIOLOGICAL FACTS” ...

at the forefront of your cerebrum, and thus on the tip of your tongue.

To illustrate, using my own experience ...

When I joyfully dance onto the stage before my new patient audience I can hardly wait to burst into song over one of NUTRI-SPEC’s favorite patho-physiological facts. All I need is a tiny bit of feedback from my audience so I can know exactly which song or songs will dominate my performance. --- Patho-physiological facts? --- Here are some of my favorite song titles:

- “1 OUT OF 4”
- “1 OUT OF 6”

- “1 OUT OF 9”

- “10,000”

- “+ 500%”
- “You are what we call an Insulin Reactor.”

The concept is really quite simple. --- I know in advance that NUTRI-SPEC has a song sure to win the applause of my new audience. I know it will be a song that the patient has heard from no other doctor --- so --- the patient will find my performance fresh and exciting --- evoking in the patient visions of long-lost health recovered. NUTRI-SPEC has countless other catchy tunes, but let us just go through the few listed above ...

“You are what we call an Insulin Reactor.” --- To how many patients have I sung those words? Probably a zillion, and to many of those I have repeated the tune over and over again. I generally sing that song as a medley --- as “You are what we call an Insulin Reactor” blends harmonically with “+ 500%”. What fascinating story is revealed by the lyrics of this medley? The theme has almost universal application --- making this a bittersweet melody for close to 90% of your new patients.

The bitterness is in describing where and why the person’s health got lost at sea. The sweetness is in your ability to promise (as no other doctor can) a rescue mission sure to recapture years of lost vitality.

Yes, you need to sing this song as I do. Master the melody and the lyrics, and perform it for 90% of your patients. You have here a feature song of the grand production entitled,

“Dis-Ease = INFLAM-AGING”.

The entire story line of that production was revealed to you in the flow chart of last month’s Letter (--- see Page 8). We presented that chart as the “Flow” in the deep **OCEAN OF MOTION** where powerful currents of Dis-Ease arise, and where nasty Sea Monsters lurk. Note the line:

Eat Rotten – Feel Rotten→Insulin Reactor→Resistance→Metabolic Syndrome

Plus 500%!!! Can you imagine? There are six times as many Type II Diabetics in America today as there were in 1980. We are talking about millions upon millions of people. --- We are talking about nearly 90% of your patients who are either Type II Diabetic, or are one step away as they suffer from Metabolic Syndrome, or are two steps away as they suffer Insulin Resistance. ----- Yes, you could build a thriving Metabolic Therapy practice doing nothing more than addressing the needs of these poor unfortunate Insulin Reactors, adrift in a sea of Dis-Ease.

Here is where the “trick” of having your brain revved up comes into play as you greet a new patient with all your favorite patho-physiological melodies on the tip of your tongue. You know in advance (before Testing, and before completing the History) your new patient is an Insulin Reactor. How do you know? The instant you walk in the door, make eye contact --- but also let your peripheral vision dance all over the patient’s physical presence, while your eyes also delve deeply into the patient’s eyes to more fully explore the essence of that individual. Within seconds you will know at least half of what you need to know about how to serve this patient.

Do you immediately notice the Tubby Tummy? Look at your flow chart. You know this patient needs to hear, “You are what we call an Insulin Reactor.”

Does the individual’s inability to maintain eye contact demonstrate fatigue and/or depression and/or fear? Look at your flow chart, and you know this patient is on the continuum from Insulin Reactor to Type II Diabetes.

As you introduce yourself to the patient, glance at the patient’s history --- noting the statin drug and the ACE inhibitor for the patients elevated cholesterol/triglycerides and hypertension. You know this patient’s health has been washed away by a powerful wave of Metabolic Syndrome.

MEMORIZE YOUR FLOW CHART.

--- Or at least have it available at your fingertips --- on your clipboard or on your table as you take your patients' histories, and a little later when you are giving your Reports of Findings after NUTRI-SPEC evaluation.

Once you have identified the sequelae of being an Insulin Reactor as one of the patient's major ImmunoNeuroEndocrine stressors, all you need to do is use NUTRI-SPEC testing to determine which Metabolic Imbalance underlies that Insulin Resistance --- be it Ketogenic, Glucogenic, Parasympathetic, or Anaerobic. ----- Or, take your patient directly into a life-long live stronger longer Diphasic Nutrition Plan to immediately begin capturing control of that most pervasive Sea Monster --- Insulin Resistance.

If you truly understand the essence of the Dis-Ease = INFLAM-AGING flow chart, you can convincingly sing the final verse of your Insulin Reactor song --- explaining to the patient the folly of all the other doctors who have treated symptoms such as hypertension, high cholesterol, depression, or whatever, as separate disease entities --- when all those symptoms and conditions are part of one interconnected process of Dis-Ease. You, and only you, will offer truly meaningful alternative health care --- a patient-specific approach that addresses the underlying cause of all those symptoms that drive your patients scurrying to one doctor after another looking for palliation. The way I present it to patients is --- "Your high blood pressure (or high cholesterol, or depression, etc.) is not your problem, it is the result of your problem."

"10,000"? --- That is another one of my favorite songs. Again, as I enter the room to meet a new patient I cannot wait to sing that song --- and will sing it in full voice the instant I see that my new patient is among the 10,000 people each day who have reached age 65. You see, by age 65 (actually beginning at age 53 for the vast majority of your patients) you know (in advance) the patient is suffering some degree of ...

GENERALIZED AUTONOMIC FAILURE.

Even the most extraordinarily healthy individuals age 53+ begin to feel the effects of being "over-the-hill". Aging (physiological, not pathological/premature aging) is a fact of life for all of us. Our Diphasic Metabolic Cycle begins to lose amplitude. Our Diphasic Immune Response begins to lose amplitude. We can no longer generate a completely effective anti-catabolic response; nor can we generate a youthful anti-anabolic defense. The morning energy rocket that once upon a time blasted off into a high energy productive day no longer carries us into the stratosphere; nor is there enough overnight energy to complete the reconstruction/rejuvenation cycle.

So --- I know (in advance) that my patient age 53+ needs Complex S and Complex P, along with some combination of Oxy Tonic, Electro Tonic and Oxy D+ to rise above the Generalized Autonomic Failure. Locating these patients in

your Dis-Ease = INFLAM-AGING flow chart is critical. But no matter what your flow chart identifies as the Sea Monster devouring this patient, to fully escape the deadly grasp of that critter, your patient will need an individualized Diphasic Nutrition Plan.

Another Top Ten Tune from among your NUTRI-SPEC hit songs is “1 out of 9”. --- This is a sad song, but do not hesitate to sing it. Sometimes the emotions it evokes are just enough to motivate your patients to take control of their health. --- The first verse of that song goes something like this --- “Mrs. Jones, you have a 1 out of 9 chance of getting Alzheimer’s disease. So do I. Statistically speaking we all have that 1 in 9 chance --- that is simply a medical fact. The only reason I bring that up in your case is that our Analysis shows that you have more of the risk factors for Alzheimer’s than the average person does.”

In last month’s Letter, we asked you to recall those maze puzzles you used to work when you were a child. Now is a good time for you to go to your flow chart, and put your pencil on “Alzheimer’s”. How many different pathways can your patients follow to reach the total devastation of Alzheimer’s? With less than a minute glancing at the chart I come up with at least 16 different Roads to Ruin. When we drop the Alzheimer’s bomb in a patient’s Report of Findings, we are not being excessively dramatic; we are not using scare tactics --- we are simply doing our professional job of apprising the patient of patho-physiological truth.

Sometimes the “1 out of 9” tune plays well as a medley with “10,000” --- and quite often it blends melodically with the harmonic dissonance found in two other important NUTRI-SPEC theme songs --- “1 out of 4”, and “1 out of 6”. These songs are so far removed from what your patients want to hear --- and may drown out songs you would rather sing to your patient. But they cannot be ignored ...

Note that the Alzheimer’s Sea Monster dwells in the darkest, slimiest of deep sea crypts --- **DAVEY JONES’ LOCKER** --- along with all the other yeast/mold/fungal-related pathologies. Even apart from Alzheimer’s, this collection of ferocious beasts is relentlessly attacking the 1 out of 4 of your patients who are genetically ill-equipped to detoxify mold toxins, and the 1 out of 6 of your patients who produce a super-antigen eosinophilic immune response upon mold exposure.

Go to your flow chart and find “Moldy Environment”, along with “Candida”. Also locate “Fungal Infection”. Few environmental exposures are more toxic than mold toxins, and few antigens more quickly and powerfully clobber the immune system than those from yeast/mold/fungus. Mold spores and mold fragments fill the air in many homes and workplaces. Mold is in our food; yeast is crawling all over and throughout many of the people with whom we

come into close personal contact. If we are not one of the “1 out of 4” or “1 out of 6”, then it takes decades for mycotoxins to finally overwhelm our liver, our kidneys, and our brain. But if we are among those that are genetically predisposed --- it takes very little exposure to overwhelm us with ImmunoNeuroEndocrine stress.

And if you examine your flow chart’s **INE STRESS** box you will see how this whole yeast/mold/fungal state of Dis-Ease, is self-reinforcing. Once the immune system has been exposed, or once the detoxification mechanisms have been overwhelmed, the immune system becomes potentiated to extreme reactivity with nothing more than a few mold spores --- and the liver, kidney, and brain are in a constant state of self-defense. The patients to whom you sing “1 out of 4” or “1 out of 6” are truly trapped in Davey Jones’ Locker. They will not get out without your help. --- And --- these are the ones who have a much greater than “1 out of 9” chance of succumbing to Alzheimer’s. But even if Alzheimer’s is not in the patient’s future, all the other Sea Monsters eating away at the patient trapped in Davey Jones’ Locker can devastate that person’s life with **INFLAM-AGING**. The diversity of potential symptoms these yeast/moldy patients show is literally unlimited.

What is your take away from this Letter? We gave you a flow chart that graphically depicts the **OCEAN OF MOTION** --- with powerful currents, swirling whirlpools, and dangerous undertows --- dragging your patients through the deep dark caverns of ImmunoNeuroEndocrine stress. Last month’s Letter made the point that your patients have no other doctor who can see anything deeper than the **WAVES ON THE SURFACE OF THE SEA**. Every time those doctors see a little ripple on the surface turning into a wave ---

THEY “TREAT” THE WAVE!!

They thoughtlessly attempt to suppress what they see on the surface, with no regard whatsoever for the tsunami of forces rising from the depths to create that wave.

So now you know that hypertension is not the disease, it is the result of the Dis-Ease. Only you can dive below the surface and address the Sea’s deep currents of Ease and Dis-Ease. Depression? Obesity? “Sinus infections”? --- They are not diseases --- they will not respond satisfactorily to disease-specific treatments. Only you can dive deep enough to ...

EXPLORE THE OCTOPUS’S GARDEN, and DAVEY JONES’ LOCKER ...

saving your patients from the Sea Monsters that lurk within.

[And there is one more churning current at the very bottom of many patients’ **OCEAN OF MOTION**. --- You find it (appropriately) at the very bottom

of your flow chart. These are the most mysterious conditions of **INFLAM-AGING** --- the surface waves from which are completely beyond the scope of conventional or alternative allopathic (disease specific) practice. --- We will do a major scuba diving expedition into that part of your flow chart next month.]

With this month's Letter you now understand that you can assertively take on any and all new patients with complete confidence --- self-assured that you know --- in advance --- that your new patient's **OCEAN OF MOTION** almost certainly includes:

- Being an Insulin Reactor headed for **THE OCTOPUS'S GARDEN**, &/or ...
- Being age 53+ with fading Vital Reserves associated with Generalized Autonomic Failure, &/or ...
- Is traveling at least 1 of the 16 pathways that lead to Alzheimer's, &/or ...
- Is suffering relentless INFLAM-AGING from Candida/mold/fungal ImmunoNeuroEndocrine stress

So, with your engine revved up with Lamborghini power, songs loaded with patho-physiological facts on the tip of your tongue, and your "Dis-Ease = INFLAM-AGING" flow chart in your pocket --- present yourself assertively, and joyfully as you greet your new patients. You have no problem explaining (where all other doctors have failed the patient) exactly why the patient is experiencing symptoms, and then exactly how NUTRI-SPEC Metabolic Balancing and increasing Vital Reserves will save the patient from drowning among the vicious Sea Dragons that only you can slay.

Where does your power as a "Dragon Slayer" come from? --- Look at the upper right hand corner of your flow chart. You see prominently listed "Rotten Microbiota", "Metabolic Imbalances", and "Fading Vital Reserves" as your means to penetrate that **OCEAN OF MOTION**. Remember ...

ADAPTATIVE CAPACITY = METABOLIC BALANCE + VITAL RESERVES.

No one can offer such powerful adaptogens as you can --- TAURINE, ADAPTO-MAX, OXY-MAX, and of course, IMMUNO-SYMBIOTIC. --- Eagerly anticipate your next new patient!

Dis-Ease = INFLAM-AGING

(--- with the patho-physiology of aging beginning as early as birth)

Associated with ...

ImmunoNeuroEndocrine Stress

