

NUTRI-SPEC



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THE NUTRI-SPEC LETTER

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From:

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SLOGANS ...

BUZZWORDS

Dear Doctor,

What purpose is served by popular slogans and catchy buzzwords? -----
They are essential tools of the charlatan; of the politician; of the snake oil
peddler; of the witch doctor ----- all those whose fame and fortune depends
upon ...

SELLING SOMETHING THAT LACKS SUBSTANCE.

Slogans & buzzwords are a way for the hustlers to reduce a complex subject to
an easily swallowed capsule --- using ambiguities, non-sequiturs and
generalizations.

The ignorant and gullible masses are relieved by swallowing these capsules
of pre-packaged "information" --- relieved of the need to think analytically.
How comforting it is to ...

REJOICE IN SINGING THE SAME SLOGANS AS ALL THEIR FRIENDS.

How gratifying it is to ...

CHANT ALL THE BUZZWORDS IN UNISON ...

with the politicians, the priests, the professors, and all the leading purveyors of
(pseudo) wisdom. For the "sheeple", their guru is their shepherd --- they shall
not want

Nowhere is the slogan & buzzword dominance over the minds and hearts of the masses more prevalent (and more lucrative) than in the health food industry ...

- “Cholesterol Free!” ----- Surely it must be good for my health.
- “Organic.” ----- Surely it is the best choice for me and my family.
- “All natural!” ----- Surely this is superior to all the commercial brands.
- “Mega-dose.” ----- Surely I am getting a lot more for my money.
- “High omega-3 fish oil.” ----- I “know” all the health benefits of fish oil.
- “High in anti-oxidants.” ----- I am such a well-informed health food shopper!

If you have been exposed to the dishonest health food industry even half as long as I have, then you have seen countless slogans wax and wane in their popularity with the ignorant public. ----- And today, the buzzword that carries by far the most weight is ...

“INFLAMMATION”.

Of course, like all successful non-sequiturs, there is at least an element of truth in the snake oil peddlers’ sales pitch. The dishonesty is not in the health food industry emphasis on inflammation --- that emphasis is not only valid, but an essential truth for the public to understand. The deceit is in the snake oil itself --- almost entirely useless remedies that satisfy the blind faith of the sheeple, while separating them from their money and giving them absolutely no value in return.

----- Truly, those sheeple are spending literally billions of dollars per year on Health Food Mythology. --- A huge claim of these \$\$\$\$ is yours to claim ...

You see, you are unique among those whom your community seeks for health guidance in that, with your NUTRI-SPEC procedures, you have a built in power over the essence of inflammation. Furthermore, you understand that reducing inflammation is the key to controlling ...

INFLAM-AGING.

You are the only one who offers your community scientifically validated objective value in the battle against INFLAM-AGING. How? ---

YOUR SYMPATHETIC/PARASYMPATHETIC SUPPORT SYSTEM ...

gives you the means to (in less than a couple minutes) evaluate 17 critical mechanisms of inflammation. Thus, you can uncover --- with minimal time and energy involved --- the one key element of INFLAM-AGING that is most relentlessly pounding on each one of your patients. Who else can offer that to your patients? Absolutely no one. So, claim the respect and \$\$\$\$ only you deserve.

----- We were not exaggerating in the least in last month's Letter when we stated ...

YOUR S/PSS ANALYSIS IS YOUR NUTRI-SPEC DREAM COME TRUE.

[I strongly suggest you re-read your November NUTRI-SPEC Letter. It is absolutely precious in giving you the step-by-step means by which you decide the most direct path to zeroing in on a major critical mechanism of INFLAM-AGING devastating each individual patient --- and, the most effective means to get control over that age-accelerating inflammation. You and your staff will know exactly how to prioritize the use of your NUTRI-SPEC tools ...

- your Diphasic Nutrition Plan
- your S/PSS analysis
- your Acid/Alkaline Tissue Balancing analysis
- complete NUTRI-SPEC Metabolic Testing.

You will make the most efficient use of your time and energy, and give your patients the greatest and quickest return on their \$\$\$\$ invested in your office. --- Re-read that November Letter --- and have your staff read it as well.]

If your Sympathetic/Parasympathetic Support System Analysis is truly your (and my) NUTRI-SPEC dream come true --- you might have two questions to ask me ...

1. How did you derive the S/PSS system?
2. What took you so long?

There are a couple realizations that hit me several years ago that made the system possible. --- Now, you understand as I (finally) do that ...

A) The autonomic nervous system is always active, and therefore always informative in response to any of the 6 Fundamental Metabolic Imbalances --- even if there is not a "pure" Sympathetic/Parasympathetic Imbalance upon complete NUTRI-SPEC Metabolic Testing.

B) The more significant realization is in regard to Sympathetic patients: For years (decades) it disturbed me that while patients who tested Parasympathetic were obviously, without a doubt, truly Parasympathetic --- many patients who tested Sympathetic actually gave the appearance of being Parasympathetic by their typically Parasympathetic symptoms ...

- Sympathetic patients with hay fever.
- Sympathetic patients with chronic diarrhea.
- Sympathetic patients with severe somnolence.

WHY DO PARASYMPATHETIC SYMPTOMS APPEAR IN THOSE WITH CLEAR SYMPATHETIC SIGNS?

C) Finally, while doing literature searches one day several years ago, it hit me like a flash of lightning --- a Parasympathetic patient is cholinergic; a cholinergic patient is Parasympathetic === straightforward cause & effect. But when we talk about Sympathetic Stress, we are not talking about just one neurotransmitter and just one type of receptor ----- we are talking about (mainly) ONE NEUROTRANSMITTER (norepinephrine), but there are many Sympathetic RECEPTORS. I finally realized that the number and sensitivity of receptors had far more to do with a patient's Sympathetic tone than did the absolute amount of norepinephrine circulating. --- So ...

Now, with your S/PSS Analysis, you have an extraordinary capacity for specificity in serving your patients. For those suffering Sympathetic Stress you can target the specific Sympathetic receptor driving their INFLAM-AGING. Among your S/PSS 17 mechanisms of inflammation, you have alpha-1 and alpha-2 adrenergic receptors; you have beta-1, beta-2 and beta-3 norepinephrine receptors, and so on --- each receptor reacting in its own individualized way.

Inflammation → INFLAM-AGING is merely an expression of ImmunoNeuro Endocrine stress --- all the environmental stressors robbing your patients of their Vital Reserves and crushing their ADAPTATIVE CAPACITY. Your patients (particularly those who are listening to the slogans and buzzwords) are keenly aware of this concept of inflammation. That is why they waste precious dollars in the false hope that cinnamon and turmeric will save them. Do you see how tragically pathetic it is that your patients are being hustled --- especially when they, plus countless others in your community, could/should be consulting you?

How pervasive is Sympathetic/Parasympathetic Stress among your patients? How about Sympathetic/Parasympathetic Failure? And how about Generalized Autonomic Failure in your patients age 53+? ----- The Neuro component of INE Stress is ubiquitous. The autonomic nervous system is

active (for better or for worse) in every one of your patients, every minute of the day and night --- but is particularly evident when it ...

EITHER OVER-RESPONDS TO,
OR FAILS TO RESPOND TO ...

the stressors of life. And for your patients (--- and there are many) whose Neuro system perceives the presence of ...

UNRELENTING STRESSORS ...

your S/PSS testing will identify in just a few moments specifically which stress response is either driving that patient to ruin, or failing to help that patient rise above it all.

So now that you have a full appreciation of the health-devastating effects of Neuro stress in all your patients, ask yourself --- will my patient be benefitted by supplementing with cinnamon? Is Resveritrol going to help my patient overcome Neuro stress? Are there any other herbal drugs or nutrient mega-doses or other health food store remedies that are going to move my patients toward Metabolic Balance, while also increasing their Vital Reserves? --- Your obvious answer is, no. Your patients are wasting precious money on “natural” remedies that give zero support to their Sympathetic/Parasympathetic Adaptative Capacity.

You must keep in mind as regards the S/PSS that there is no one “right” answer in evaluating any particular patient. The reason is because there is so much overlap between metabolic pathways that influence each Imbalance. Another way you can think of this --- there are very few people who have only one of the 17 Imbalances --- and the whole point of the system is to prioritize. You want to pick out one or two patho-physiological mechanisms that are kicking the patient in the teeth day in and day out --- and either plunging him so deeply into one or more of the 6 NUTRI-SPEC Fundamental Imbalances --- making that Imbalance frustratingly difficult to correct --- or --- masking one or more of the 6 Fundamental Imbalances.

So --- you might have a patient with High PGD2, High Leukotrienes, High Adenosine, High CRH, and Low PGI2 or cAMP. That is why you will see so much in common in the supplement selections for all those Imbalances. But again, the Imbalances have been listed on your S/PSS Analysis Table in order of the degree to which they are likely to knock a patient off his feet, and so you stop as soon as you come to a positive test pattern and focus on it, and it alone --- all the while knowing you are benefitting many other S/PSS Imbalances, as well as the 6 Fundamental Balance Systems.

What percentage of patients come up showing none of the 17 Patterns? --- Surprisingly, quite a few. The nice thing about the S/PSS is that while it may not always be “right”, it is never wrong. It is a ...

LIGHTNING QUICK ...

way to discover any combination of Metabolic Imbalances that is clearly evident, yet it skips quickly to the solid foundation of an Individualized DIPHASIC NUTRITION PLAN if nothing is certain.

The absence of a clear Pattern simply means there are a broad array of ImmunoNeuroEndocrine stressors devouring that patient's ADAPTATIVE CAPACITY. --- No problem. --- Starting the Diphasic Nutrition Plan with the Balancing Procedure, plus tailoring it for a person's major pathologies and age group, gives you phenomenal specificity in itself. Then, as a foundation of Vital Reserves is built over a period of weeks and months with a DNP, very often a follow-up S/PSS will reveal an obvious Pattern.

You can begin a patient's NUTRI-SPEC care with S/PSS on the first exam, then transition to a life-long DNP over a period of weeks or months ...

Or, begin on Day 1 with an individualized DNP initiated with your Balancing Procedure --- then --- after several weeks of building Vital Reserves with the power of ADAPTO-MAX & OXY MAX supplementation, plus Eat Well – Be Well, plus backing off some drugs --- you can explore your S/PSS as the way to quickly break down any remaining barriers to increased ADAPTATIVE CAPACITY.

Go ahead and “BUZZ” right along with your patients. Chant in unison their favorite slogan, “Inflammation → INFLAM-AGING”. Praise them for their appreciation of the scientific research that highlights Inflammation as the key factor in nearly every condition that causes the symptoms they suffer, and, makes them age prematurely. --- Then follow with an explanation that the health food industry is preying on them --- with the over-priced folly of “spice rack” remedies. Assure them that you have honest science on your side --- with objective tests to tell you specifically what are their individualized anti-inflammatory needs.