

NUTRI-SPEC



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THE NUTRI-SPEC LETTER

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From:
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Dear Doctor,

Bad news ----- then, great news

SORRY --- BUT THE SAD TRUTH IS

you are getting old. Unless you are one of “the one percent” who (either by intent or through familial good fortune) live by NUTRI-SPEC principles

--- Eat Well --- Be Well
--- Maintain Metabolic Balance
--- Preserve Vital Reserves

you are wearing down and wearing out --- relentlessly. No, we don't mean the “aging gracefully” that escorts you to the dignity of senior status in our society. Rather --- your body and mind are suffering ---

PATHO-PHYSIOLOGICAL DISINTEGRATION

&

PATHO-PHYSIOLOGICAL HYPERPLASIA ---

at a rate far faster than The Good Lord intended you should in a bountiful world. Small --- but continual --- violations of

NATURAL LAW

have pushed your ---

PHYSIOLOGICAL AGE

far beyond your chronological age.

- “Celebrating” your 50th birthday feeling like you’re 70?
- At age 33 having trouble sucking in that pot belly beginning to hang over your belt?
- Wearing a heftier dress size than your 65 year old mother?
- Wondering how the joy of living was displaced by a little melancholy, a little anxiety and a disturbing brain fog?

Yuck.

And look at your patients. ----- Patho-Physiological Disintegration & Hyperplasia ---

PREMATURE AGING ---

is showing up in your 23 year old patients! ----- You have 16 year olds showing Insulin Resistance --- already on the path to Metabolic Syndrome devastation. 90+ % of your patients are running to Medicine Men or the health food store looking for remedies ----- when

IT IS YOU

and only you who can promise them both an explanation and a “cure” for their myriad of ailments. ----- You see, the happy news is

NUTRI-SPEC GIVES YOU & YOUR PATIENTS “THE FOUNTAIN OF YOUTH”.

In all seriousness -- while NUTRI-SPEC cannot offer you a magic potion to enhance longevity, we can give you a clear understanding of the mechanisms of aging, and what you can do to reverse and delay the aging process. The mechanisms of aging? --- They are all fully confronted --- and effectively controlled --- by the power built into --- **YOUR DIPHASIC NUTRITION PLAN.**

For patients to whom you apply your DNP without doing complete NUTRI-SPEC Balancing, you will still get the extraordinarily dramatic symptomatic response that you get with your (usually unnecessary) rigorous NUTRI-SPEC procedures, and, you can be assured that

- you will have a major impact on every patient who is more than 32 years old
- you will in many cases actually correct the patient’s NUTRI-SPEC Metabolic Imbalances (although a little more slowly) without explicitly addressing them.

In patients for whom you juice up your DNP with even more specificity --- by embellishing it with your SYMPATHETIC/PARASYMPATHETIC SUPPORT SYSTEM and/or your TISSUE ACID/ALKALINE BALANCING ANALYSIS, your DNP protocol represents, for those who are over age 32, a way to take them to an extraordinary level of personal power and resistance to aging.

What is your DNP protocol all about? We talk endlessly in NUTRI-SPEC about the importance of achieving Metabolic Balance. Why? We know that there are Six Metabolic Control Systems that are continuously at work in maintaining a person's ability to perform four essential functions:

1. To maintain glycemic control
2. To maintain normal oxidative metabolism
3. To maintain ideal pH
4. To maintain ideal concentrations and movements of electrolytes and biologically active water.

These four essential functions are just that -- essential. They are the means by which we grow and develop our full potential as children. They are the means by which we function optimally through young adulthood, and, they are the means by which we maximize health and longevity in resistance to the aging process. In other words ...

**HOW WELL AND HOW LONG WE LIVE
DEPENDS UPON HOW WELL WE
PERFORM THESE FOUR ESSENTIAL FUNCTIONS.**

If you have used NUTRI-SPEC for very long, you have seen objective clinical evidence time and time again that these four essential functions depend on efficiency of the Six Metabolic Control Systems. You have undoubtedly restored Metabolic Balance to quite a number of patients, and in the process seen clearly that these essential functions have improved dramatically --- with that improvement accompanied by an equally dramatic clearing of the patient's symptoms.

But is maintaining Metabolic Balance the whole story in optimizing the four essential functions? No -- and that is the secret of success with your Diphasic Nutrition Plan. There is one important consideration that comes into play, particularly after approximately age 32, as we begin to do battle with Father Time. What each of us needs in order to minimize and delay the processes of aging is ...

TO MAXIMIZE OUR ADAPTATIVE CAPACITY.

We as NUTRI-SPEC practitioners can say without hesitation that adaptative capacity is very strongly dependent upon Metabolic Balance. However, adaptative capacity is not only a function of Metabolic Balance, but as we age becomes a function also of our Vital Reserves. We can think of this as a simple equation:

$$\text{ADAPTATIVE CAPACITY} = \text{METABOLIC BALANCE} + \text{VITAL RESERVES}$$

Just what do we mean by “adaptative capacity”? It could just as easily be called “a strong constitution”, a high level of “resistance”, or any number of other descriptive terms that imply an abundance of personal power in response to the stressors of life.

So -- if we understand this concept of adaptative capacity, and we understand how and why it depends upon maintaining Metabolic Balance, how do Vital Reserves enter into the equation?

Think of it this way. If a person’s adaptative capacity suffers because of a Metabolic Imbalance, the symptoms and conditions that result from that decreased adaptative capacity will be associated with the specific Imbalance. In other words, an Anaerobic patient will show decreased adaptative capacity that is reflected in Anaerobic symptoms and conditions. A Parasympathetic patient shows a loss of adaptative capacity in areas specifically related to autonomic nerve imbalance.

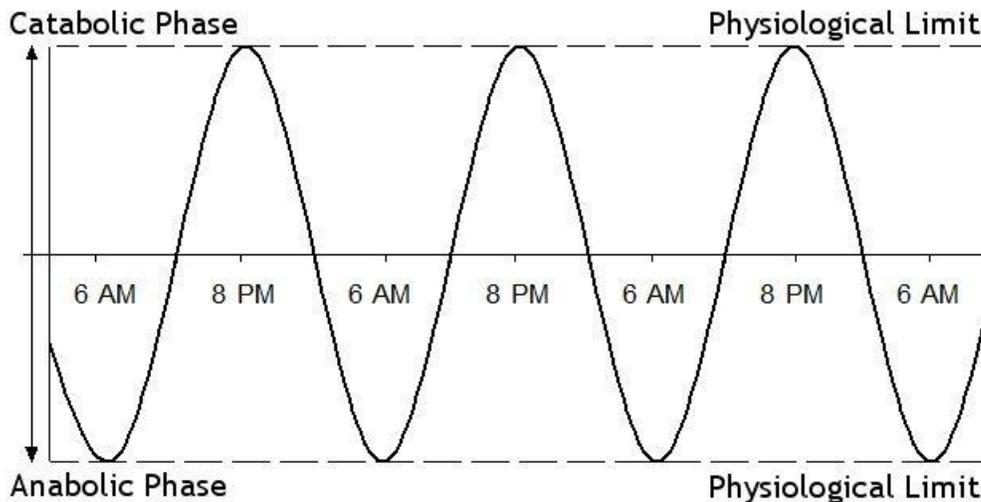
But suppose a patient is weakened, not by any particular Metabolic Imbalance, but merely by an over-all generalized decrease in vitality? This weakening could come from such things as exposure to extreme emotional stress, extreme sleep deprivation, extreme nutritional insufficiencies, etc. But --- and this is the key point --- this vitality loss is also what happens to all of us to some degree as we age.

In addition to whatever Metabolic Imbalances that may be weakening us, we also suffer an insidious loss of Vital Reserves from the ravages of aging. In association with this loss of Vital Reserves, we steadily lose adaptative capacity such that, irrespective of any Metabolic Imbalances we have, we can be pushed around by both anabolic and catabolic stressors. We can be kicked in the teeth by increased demands on either our parasympathetic or our sympathetic system. We can be overwhelmed by environmental influences that push us either acid or alkaline.

Now --- here is the critical point regarding Vital Reserves that you can use clinically. Can this drop in vital reserves be blamed on such a nebulous entity as “the aging process,” or, can we get some kind of handle on exactly what mechanism fails as Vital Reserves fade away? What has become evident in nearly 40 years of metabolic testing on thousands of patients, then 20 years of using the Diphasic Nutrition Plan, is that the loss in Vital Reserves that begins dragging patients down beginning in their mid 30’s relates to a loss of amplitude in the normal diurnal cycle.

To get a clear picture of how this diurnal cycle works, look at Figure 1. This is a graph of a healthy person’s diphasic metabolic cycle. Every 24 hours this person goes through a complete diphasic cycle consisting of a catabolic phase and an anabolic phase. The catabolic phase peaks at about 8:00 p.m. and the anabolic peaks at about 6:00 a.m. The amplitude of each phase is high, which is to say that it carries the person all the way to the physiological limit in each direction. The person represented in Figure 1 not only has Metabolic Balance (as indicated by the equal amplitude of the catabolic phase and the anabolic phase), but has high Vital Reserves associated with a high amplitude of each phase. This person has powerful adaptative capacity.

Fig 1. Balanced + High Vital Reserves = Powerful Adaptative Capacity



Focus now on the amplitude of this powerful person’s metabolic graph. Just what does it mean that this person swings through a complete catabolic phase and a complete anabolic phase? The catabolic phase represents a mobilization of forces in the body that protect against anabolic stressors. Likewise, think of the anabolic phase as a mobilization of the body’s reserves in defense against catabolic stressors.

A powerful person spends the hours from 6:00 a.m. to 8:00 p.m. in an anti-anabolic phase, which means the ability to mobilize reserves for productive activity during the daylight hours. Similarly, this person, from the hours of 8:00 p.m. to 6:00 a.m., mobilizes reserves conducive to rebuilding and recharging, in resistance against the catabolic stressors of the preceding day.

What happens with aging is that we gradually lose our Vital Reserves. This is to say that we begin failing to cycle completely from the catabolic phase of metabolism to the anabolic. There is a failure to fully manifest the diurnal cycle:

- between active and passive
- between depletion and repletion
- between high-powered energy expenditure and re-charging
- between defense against pathological hyperplasia and defense against pathological disintegration.

Suppose your patient's graph is relatively flat (low amplitude), indicating that the patient is failing to completely cycle. This patient may have nothing wrong, yet has nothing right. This patient may show many extremely abnormal tests upon NUTRI-SPEC testing, yet those abnormal tests conform to no particular pattern of Metabolic Imbalance. Why? Because, the patient is equally weak in both anabolic resistance and catabolic resistance. With no Vital Reserves, this patient gets blown away by every ill wind that blows.

Look at the essential components of your DNP. Note the use of Oxy Tonic and Complex P in the a.m. to give your patient a powerful boost out of the anabolic phase, then, the use of Oxygenic D+ and Complex S in the p.m. to protect against excess catabolism. Add in the most appropriate Immuno-Synbiotic --- plus --- the most extraordinary adaptogens available anywhere --- Adapto-Max & Oxy-Max ----- and you have invincible defense against ImmunoNeuroEndocrine Stress. -----
Healthy glycemc Control + Balanced Oxidative Metabolism + pH Balance + Electrolyte/Water Dynamics = easily maintained.

Are you (and all your patients age 33+)

FEELING "FLAT"?

Beginning today --- become a master at pumping up the amplitude of your Diurnal Cycle --- and pump up your patients, too.