NUTRI-SPEC
METABOLIC BALANCE
SPECIFIC NUTRITION
Live Stronger Longer

89 Swamp Road
Mifflintown PA 17059
800-736-4320
717-436-8988
Fax: 717-436-8551
NutriSpec@nutri-spec.net
www.nutri-spec.net

THE NUTRI-SPEC LETTER

Volume 36 Number 12

December, 2025

FIGHT or FLIGHT?
or
REST & DIGEST?

When you get it right, your patients are blessed …

… with a healthcare practitioner so impressive you will have them veritably bubbling with enthusiastic praise --- proclaiming to family and friends …

"No one does what MY Doctor does!"

Yes, your **ORTHOSTATIC CHALLENGE** ---

Simply testing a sequence of 4 Pulse Rates and 2 Blood Pressures --- gives you a wealth of information --- unparalleled by any examination your patients typically get from other doctors. Yes, yes, yes, the Sympathetic/ Parasympathetic strength and control you can give your patients will confer amazing benefits in your quest to help them …

LIVE STRONGER LONGER.

How efficiently a patient's Sympathetic/Parasympathetic System responds to changes in position from sitting to lying to standing gives you a clear picture of that individual's strength in response to **all** the physical, chemical, emotional, and nutritional challenges of life. Never lose sight of the essential truth that the Autonomic Nervous System is ---

THE ULTIMATE FIRST RESPONDER.

You are, with your Sympathetic/Parasympathetic testing, evaluating multiple aspects of that individual's ---

ADAPTATIVE CAPICITY.

As regards Adaptative Capacity, we Nutri-Spec practitioners talk in terms of ---

IMMUNO-NEURO-ENDOCRINE STRESS ---

and Sympathetic/Parasympathetic balance is the dominant force in the "N" of INE Stress. The Autonomic Nervous System is ---

THE FIRST OF THE FIRST RESPONDERS ---

in the adaptative response to any stressor --- involving either the Immune System, or, challenges to physical strength capacity, or, that demand emotional strength and control.

If your patient shows autonomic failure by failing your Orthostatic Challenge, then that patient, you can be certain, is failing in response to many sources of stress.

To illustrate: Sympathetic/Parasympathetic first responder status is evident in the defense against bacterial, viral, and fungal pathogens. It is the activation of both adrenergic and cholinergic nerves that contributes to triggering, and then controlling, the required increases in neutrophils to fight bacteria, lymphocytes to fight viruses, and eosinophils in response to allergens or mold toxins.

One fascinating and clinically relevant piece of information regarding mast cells (as indicated by your Nutri-Spec DERMOGRAPHICS Test) and the rest of the 75% of the immune system residing in the GI tract is that those cells tend to congregate around autonomic nerve endings --- both parasympathetic cholinergic nerve endings and sympathetic adrenergic and cholinergic nerve endings.

Stop and think! We are talking here about the most significant link between the "I" and the "N" of INE stress. The autonomic nervous system is at the critical crossroads between nervous system function and immune system function --- integrating the two in appropriate response to environmental stressors. Can you begin to imagine how integrating the use of your Immuno-Synbiotic with specifically administered Complex S and/or Complex P supplementation gives you a huge advantage in controlling Immuno-Neuro-Endocrine stress in your patients?

Now, carefully consider the full significance of the term "first responder," as the Sympathetic/Parasympathetic adaptative responses swing into action immediately in response to environmental stressors of virtually any type. Herein lies the beauty of your Orthostatic Challenge. Why is your test procedure such a perfect indicator of first response capacity? Here is how it works …

Maintaining an appropriate perfusion pressure to critical organs (brain and heart) requires a set of neural regulatory actions that must be promptly activated. The Autonomic Nervous System is fast-acting, and primarily reacts via mechano-receptors, and to a smaller degree via chemoreceptors. Upon standing, the sudden drop in blood pressure in the carotid sinus and the aortic arch triggers baroreceptor-mediated compensatory mechanisms within seconds --- resulting in increased Pulse Rate, plus a surge in blood pressure driven by both myocardial contractility and peripheral vasoconstriction. Ideally, orthostatic stabilization is achieved in one minute or less.

The most critical consideration regarding your Nutri-Spec orthostatic test of Sympathetic/Parasympathetic Imbalance is its immediacy – checking the Pulse Rate within one minute of lying supine and the Pulse Rate and Blood Pressure within 1 minute of standing.

During prolonged quiet standing, following the quick sympathetic response, there will be other factors such as gravitational effects further reducing central blood volume and cardiac output. The influences of increased blood viscosity (loss of the blood's electronegative colloidal property) and arteriosclerotic vascular resistance also come into play, further stressing the cardiovascular challenge. There is activation of neuroendocrine mechanisms such as the renin-angiotensin-aldosterone system, which are also dependent on the blood viscosity and vascular resistance, and which influence the Pulse Rate and Blood Pressure over a period of 10-30 minutes after standing.

But --- these factors are in the realm of Electrolyte/Water Balance more than Sympathetic/Parasympathetic Balance.

Clinics specializing in the testing of dysautonomia use the table-tilt test as their gold standard in evaluating sympathetic function. The table-tilt test is valuable in gathering information on the neuro-cardio-vascular system, but loses its specificity for Sympathetic/Parasympathetic Imbalance. For example, the table-tilt test can reveal POTS (Postural Orthostatic Tachycardia Syndrome). That is a valuable diagnosis, but again, we are talking about a lack of testing specificity because there are many factors (such as Electrolyte Imbalance) other than autonomic function involved with POTS.

So you see, even if your patient has had the most advanced and sophisticated medical diagnostic work-up, that patient has still not benefited

from the specificity of your Nutri-Spec Testing in determining just what is necessary to build greater Autonomic Adaptative Capacity.

----- And your typical patient, of course, has never had a tilt table test, but rather just the thoughtless medical exam consisting of routine Blood Pressure, Pulse Rate, and Breath Rate numbers — recorded on a chart by a nurse, and probably never even looked at by the Doctor, Physician Assistant, or Nurse Practitioner. The only time Blood Pressure and Pulse Rate are given a second thought is when they are either outrageously low or dangerously high. And even then, the typical medical practice never thinks of asking, "Why am I seeing these abnormal tests?" --- let alone, "What implications do these abnormal Blood Pressures and Pulse Rates have as regards the patient's Health Span and Life Span?"

----- Compare that negligent disregard with the quality and specificity of service you are providing for your patients with Nutri-Spec.

How much specificity? In last month's Letter, we gave you a Table illustrating the 6 types of Sympathetic/Parasympathetic Imbalance.

Your Nutri-Spec Sympathetic/Parasympathetic Imbalance Analysis guides you toward ultra-specific recommendations for each patient's individualized needs. The 6 types of Autonomic Imbalance include:

- Parasympathetic Stress
- Sympathetic Noradrenergic Insufficiency
- Parasympathetic Insufficiency
- Sympathetic Adrenergic Stress
- Sympathetic Nor-Adrenergic Stress
- Sympathetic Nor-Adrenergic Stress Failure

Identifying which of these Imbalances applies to your patient allows you to consider expanding your nutrition recommendations beyond supplementing with Complex S or Complex P alone. That Table, reproduced below, gives you a nice summary of the most common clinical findings in each of the 6 autonomic nerve disturbances.

Fight or Flight? These are your patients with an extreme Pulse Rate spike upon Orthostatic Challenge, and/or a spike or drop in Systolic Pressure, and/or a collapse in Pulse Pressure, upon standing, or, a completely unresponsive Pulse Rate.

Rest & Digest? As the Table reveals, those individuals with a juiced-up Fight or Flight response are those who cannot effectively Rest & Digest, while those with

inadequate strength to Fight or Flight may be incapable of doing much more than resting and digesting. In either case, you are seeing a deficiency of Adaptative Capacity.

No other Doctor can serve your patients so well. **LIVE STRONGER LONGER!**

Parasympathetic Stress	**Sympathetic Noradrenergic Insufficiency**	**Parasympathetic Insufficiency**	**Sympathetic Adrenergic Stress**	**Sympathetic Noradrenergic Stress**	**Sympathetic Noradrenergic Stress Failure**
Pulse Rate - -	Orthostatic Pulse Pressure failure	Pulse Rate + Orthostatic Pulse Rate +	Pulse Rate +	Pulse Rate +	Orthostatic Pulse Pressure Failure
	Pulse Rate – Orthostatic Pulse Rate +		Breath Rate +	Systolic BP + Orthostatic BP +	Orthostatic Pulse Rate +
Pupils small, light reactivity –	Pupils small, light reactivity –	Pupils large, light reactivity +	Pupils large, light reactivity +	Pupils large, light reactivity +	
Saliva + Saliva pH +		Dry Mouth & Eyes		Saliva thick Saliva pH – Dry Mouth	Vertigo Nocturnal Diuresis
	Fatigue		Cutaneous Vasoconstriction; Muscle Vasodilation	Vasoconstriction Hands Cold Pallor	Fatigue
Rapid GI Transit, Diarrhea	Post-prandial hypotension	Atonic Constipation	Slow GI Transit, Constipation	Pilomotor +	
Bronchoconstriction	(Hypothyroid?)		Fine Hand Tremor	Fine Hand Tremor	
			Hyperglycemia	Perspiration +	

Special for the month of November:

Complex S & Complex P one **FREE** for every five you purchase ---
--- and --- Immune Restore & Immune Power
Two **FREE** with every 10 you buy.