Mentoring the Mentor

Mentor goals:
- To declare what is possible and establish a commitment to that possibility
- Address personal and professional barriers limiting the ability to serve
- Evolution of vision/mission/ethics that drive success
- Create immediate action steps to apply learning and growth
- Construct the round table of applied trophologists

Mentoring the mentor:
- Who are the mentors? - Practitioners
- Who are we mentoring? - Patients and GAP
- What’s the purpose? - Optimized life
- How does it work? - Whatever you learn you teach someone else (anyone else)
- Who’s is included? - Self selection, you pick yourself
Mentoring the Mentor:

- Each participant attends monthly teleconferences (1 hour in duration, 4th Thursday of month) creating a round table discussion/exploration of the dynamics and details of a nutrition-based wholistic practice.

- Each participant chooses a colleague in his/her world becoming the notes and information - no information squandering.

- Issues/problems/questions are considered a learning process for everyone, although individual remain anonymous.

- All questions, comments, case studies to be directed through email to SP rep who will compile and include in next teleconference (must be submitted 10 days prior).

Inquiry:

Inquiring minds long for the truth, seek it, strive to solve the problems set by life, try to penetrate to the essence of things and phenomena, and into themselves... Socrates’ words, ‘know thyself’ remain an imperative for all those who seek true knowledge and being.

G. I. Gurdjieff

Bankruptcy:

- Majority of bankruptcy is filed by middle class.
- Resulting from credit card debt unable to be completed.
- Credit card debt is secondary to health-related expenses occurring with people who are barely making ends meet and break their backs with unexpected events.
- And the technology doesn’t even work, but the money has been spent.
- We have a health care problem!
Slide 7

**Foundational Therapies**

- Basic strategic approaches are common for all conditions – use the six pillars of health.
- Prepare with strategy and handouts for typical presentations – cancer, autoimmune (MS, asthma, thyroiditis, Lupus, RA, alopecia, ALS, sclerosing cholangitis, etc.).

Slide 8

**Autoimmune disease**

- Down regulate the immune system with the six pillars (Drenamin, Rehmannia Complex, Licorice, etc.).
- Employ a low antigen diet (avoid milk, soy, wheat, corn) to reduce inflammation.
- Use low glycemic food lifestyle to reduce cortisol and adrenal stress.
- Balance endocrine system to promote normal adrenal and immune function.
- Treat target tissue with PMG.
- Promote healthy membranes with EFA’s and Chlorophyll Complex.
- Explain 3 theories of autoimmunity:
  - Molecular mimicry – eg vaccine
  - Dual signal hypothesis – cytokines mediate both events
  - Unknown origin – immune dysregulation.

Slide 9

**Autoimmune Insights**

- Estrogen appears to push the immune system in the direction of pro-inflammation Th1 pathways, except in pregnancy when cortisol is high acting as a SERM (Selective Estrogen Receptor Modulator) and progesterone is high having an anti-estrogen effect.
- Estrogen intermediates (16 OH estrogens) go up in SLE and RA and down in pregnancy due to decreased Phase II detox activity.
- Some studies show that the timing of oral contraceptives is influential in the later onset of RA.
- DHEA and Cortisol are essential to quench the immune ‘fires’ and thus adrenal stress causes amplification of the inflammatory pathways.
Autoimmune triggers
- Inflammation acts as a systemic trigger to autoimmunity
- Exercise and diet act to reduce inflammation
- Other inflammatory triggers are infections, gut dysbiosis, toxins, allergens, trauma
- Cytokines (interferon, interleukins, tumor necrosis factor, etc.) and eicosanoids (prostaglandins, prostacyclins, leukotrienes, thromboxanes) are the messenger molecules that up or down regulate.
- Maladaptive shift toward inflammation occurs in the face of high glycemic diets, food allergens, inflammatory fats, and in the absence of omega 3 fatty acids, etc.

Discovery
Stand still. The trees ahead and the bushes beside you are not lost. Wherever you are is called Here, and you must treat it as a powerful stranger, must ask permission to know it and be known.

David Wagoner

Cause
- Intelligent Intervention (Interruption of cycle)
- First Level of Response: Adaptation
- Second Level of Response: Depletion
- Third Level of Response: Imbalance
- Symptoms / Disease
- Intelligent Intervention
- Impotent Intervention
- Frustrated treadmill of trying to control effects

Upstream Medicine
Genotype to Phenotype

Investigators from Karolinska Institute, Sweden reported in 2002 on 44,788 pairs of twins – study showed identical twin do not experience cancer at the same rate – the study reported that 1.0% of identical twins do not experience cancer at the same rate – the study reported that "Inherited genetic factors make a minor contribution to susceptibility to most types of neoplasms," indicating that the environment has the principal role in causing sporadic cancer.

Roger Williams in 1950 wrote a paper "The Concept of Genotrophic Disease" (Lancet) advancing the concept that a number of diseases whose origins were not understood at that time could be associated not with malnutrition, but with under-nutrition based on the individual's unique genetic needs. He postulated that heart disease, cancer, diabetes, arthritis, schizophrenia and addiction could be explained genotrophic way that under-nutrition would result in suboptimal metabolisms within susceptible individuals resulting in chronic illness over decades of imbalance.

Medicine did not embrace that idea, but 50 years later with the Human Genome Project revealing how macro and micro nutrients influence gene expression science has rediscovered Williams' ideas, who predicted a transition in medicine from a meta-science largely empirical to a predictive science based on unified mechanisms of disease.

Dietary Reference Intake (DRI)

Ames et al in 2002 in landmark paper reported "as many as one third of mutations in a gene result in the corresponding enzyme having an increased Michaelis constant, or Km (decreased binding affinity), for a coenzyme resulting in a lower rate of reaction" – this means some people carry unique polymorphisms that are critical in determining the outcome of their health and administration of higher that DRI vitamins and minerals can restore activity to near-normal or even normal levels.

HIs conclusion is "nutritional interventions to improve health are likely to be a major benefit in the genomic era".

Genetic uniqueness may cause some individuals to require 100 times more of a particular vitamin, mineral, or accessory nutrient than another individual in good health.

Now we're talking! What's the RDA again and why is it relevant.

Boldness has Genius in it

Can you determine clinical response in your approach, or is it just the high points and gross symptoms that catch all the attention?

Can you document the progress to enroll people in their own possibility of realized potential?

21st century doctors will need to understand how to assess patient's genotypes, how to personalize treatments for their individual needs, configure interventions to improve lifestyle and environment to minimize age-related chronic progression.
Slide 16

**A Clinical Study: If you try you'll find the way!**

- Ruth presented with pulmonary condition, end stage fibrosis, multiple meds including 80 mg Prednisone.
- Began 11/04 with endocrine support, Symplex F., BCSO, Hypothalmex, EFA, SSO, ionic calcium, Congaplex, probiotics – reacted within 3 days. DC'd all products and began incrementalizing over the next 2 months.
- Discovered allergy to milk – discovered meds to control airway were made on a milk culture.
- Chronic immune depression and burdens – each new product resulted in healing crises.
- Use Healing Process Peeling the Onion handout attachment to create chronic strategy.
- 9th visit showed allergy to milk & wheat – off prednisone and stopped 4 other meds.
- Significant energy enhancement and lifestyle recovery – lung condition in the rearview mirror – arthritis has become the dominant issue.
- The work never ends (neither does the healing).

Slide 17

**A Clinical Study: Autoimmune**

- Yvonne first attended 08/04 – lupus onset '95, presenting stomach disorder, multiple joint pains, night sweats, bruising, fatigue, IBS, Raynaud's, foot numbness.
- Cataplex AC (8), Symplex F (6), Hypothalmex (2), BCSO (2), SSO (6), Inositol (3), L-Glutamine (3), Calcifood (2), AF Betafood (12), Choline (6).
- Within three months no joint pains, off all medications (3), training for marathon.
- Ran 2 marathons within three weeks – came down with severe viral flu – exacerbated the autoimmune condition – frightened her like original onset in '95 – returned finally to drugs – required another three months to quiet things down.
- Use autoimmune handout attachment to create chronic strategy.

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**A Clinical Study: Auto-Immune**

- Charlie (56 years old) retired police officer presented 10/26/02 with diagnosis of Myasthenia Gravis with chronic severe respiratory infection and reflux both secondary to long-term prednisone use, low energy, slow start, loss of taste, hair loss, blepharptosis, cramps and aches in lower extremities.
- Recorded extensive case history, Calcium cuff test 110 mm, Ragland's reclining 156/96 (66) standing 128/75 (82), Muscle testing exam, determined to begin Endocrine Pillar – Symplex M (3-3), BCSO (1-1), Essential Fatty Acid blend; Bio-terrain Pillar – Calcifood (1Tbsp), L-Glutamine (1.5 g); Circulatory Pillar – Cardioplus (3-3); Immune Pillar – Cataplex AC (6-6), Sesame Oil (3-3), Allerplex (7-7), Broncafect (2-2).
- Returned in one month reporting no dry eyes, recovery of taste, loss of eye puffiness, less neck stiffness, reflux gone (meds stopped), cramps & aches gone, hair loss gone, depression and worry gone, energy level up.
- Full of hope and renewed in his work.
Slide 19

Charlie continued

- Throughout the course of next five years achieved multiple successes including reversal of CAD by 30% in 3 months obviating the need for a angiogram, complete consistent control of respiratory infections with no use of antibiotics since commencement.
- Finally one month ago reported from neurologist complete remission of MG due to chronic repair of autoimmune factors especially cell membrane repair.

Slide 20

A Clinical Study: if you try you’ll find the way!

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Trophology

The study of that which promotes growth. It is derived from the Latin word Trophos, which means growth. Royal Lee combined the words Applied Trophology to refer to the study and application of nutritional principles which promote growth in specific tissues, organs and systems. The new term for this is 'trophorestorative'. All nutrients and some herbs are trophic in their nature.

One of the principle drivers of this is the Protomorphogen (PMG) which was first extracted and identified by Lee. The PMG is a protein-mineral complex which is primarily similar in all mammalian life forms. These PMG’s are theorized to act as growth limiting and growth directing substances in and around the cell.

The ability to stimulate cellular and organ repair and renewal in specific tissue targets is unique to nutritional approaches...
**Slide 22**

**Trophology**

- The discovery of the physiological mechanism of the automatic regulation of growth and repair
- Initial "histamine reaction" indicates accuracy and effectiveness of therapy
- PMG is a protein/mineral complex that can act as a decoy to the natural tissue antibodies, thus reducing the catabolic load of a tissue
- Use of PMG is clinically observed within two weeks of onset of therapy

**Slide 23**

**Trophology**

- PMGs have been nicknamed "nuclear vitamins" because they activate and support the nuclear DNA/RNA repair mechanisms
- Tissue response requires vitamin/mineral supply as well as PMG to repair target tissue
- Always start with PMG and general nutrition before employing herbal stimulants/depressants or hormone precursors or HRT

**Slide 24**

**Determining Food Allergies**

- Blood type sensitivities
- Most food allergies are delayed sensitivities
- ELISA Act lymphocyte response assay
- Elimination is the most accurate and labor intensive – 2 week elimination then reintroduce and watch for 4 days for reactions
- Basic 4 allergies that most complicate healing process – wheat (gluten), corn, soy, milk (casein)
- Additionally suspect chocolate, prunes, tomatoes, beef
Slide 25

**Food Allergies – Now & Later**

<table>
<thead>
<tr>
<th>Immediate reactions</th>
<th>Delayed reactions over 3 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emesis</td>
<td>Nausea, cramps, diarrhea</td>
</tr>
<tr>
<td>Headache</td>
<td>Cataracts, pheugia (glaucoma)</td>
</tr>
<tr>
<td>Mood changes, irritability</td>
<td>Fever</td>
</tr>
<tr>
<td>Rash, hives</td>
<td>Eczema</td>
</tr>
<tr>
<td>Loss mental acuity</td>
<td>Elevated C-reactive protein, SED rate, AA:EA ratio</td>
</tr>
</tbody>
</table>

Slide 26

**Allergic Events schematic**

Slide 27

**Carbs & Hormones**

- Catabolic side
- Anabolic side

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Anabolic Adaptation

- Corticosteroids
- T3, T4
- Spinal Catabolism
- Spinal anabolic
- Sex hormones
- Growth hormones


Slide 29

Catabolic shift

- Corticosteroids
- T3, T4
- Spinal Catabolism
- Spinal anabolic
- Sex hormones
- Growth hormones


Slide 30

Insulin is the pivot -

- If you can control the insulin you can control aging.
- Starch has the greatest impact on insulin due to increased amylase production as we age – polysaccharides break down into simpler sugars faster.
- High insulin causes high Cortisol.
- Starch always creates low blood sugar functionally or pathology.

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**Slide 31**

PHASE II FOOD PLAN FOR BALANCING BODY CHEMISTRY

- MEAT
- FISH
- FOWL
- EGGS
- FRUITS
- VEGETABLES
- **(No Limit on Serving Size)**
- VEGETABLES
- 3% or less carbs
- Asparagus
- Bamboo Shoots
- Bean Sprouts
- Beet Greens
- Bok Choy Greens
- Broccoli
- Cabbages
- Cauliflower
- Celery
- Chards
- Chicory
- Collard Greens
- Cucumber
- Endive
- Escarole
- Garlic
- Kate
- Kolrabi
- Lettuces
- Mushrooms
- Mustard Greens
- Parsley
- Radishes
- Raw Cob Corn
- Salad Greens
- Sauerkraut
- Spinach
- String Beans
- Summer Squashes
- Turnip Greens
- Watercress
- Yellow Squash
- Zucchini

- **VEGETABLES**
- 6% or less carbs
- Bell Peppers
- Bok Choy Stems
- Chives
- Eggplant
- Green Beans
- Green Onions
- Okra
- Olives
- Pickles
- Pimento
- Rhubarb
- Sweet Potatoes
- Tomatoes
- Water Chestnuts
- Yams

- **VEGETABLES**
- 12-21% carbs
- On Limited Basis
- (Only 2-3 X/ wk)
- Celeriac
- Chickpeas
- Cooked Corn
- Grains, Sprouted
- Horseradish
- Jerus. Artichokes
- Kidney Beans
- Lima Beans
- Lentils
- Parsnips
- Peas
- Popcorn
- Potatoes
- Seeds, Sprouted
- Soybeans
- Sunflower Seeds

- **MISCELLANEOUS**
- In Limited Amounts
- Butter, Raw
- Caviar
- Cottage Cheese, Raw
- Dressing - Oil / Cider Vinegar only
- Jerky
- Kefir, Raw (liquid yogurt)
- Milk, Raw
- Nuts, Raw (except Peanuts)
- Oils - Vegetable, Olive (no Canola) preferably cold-pressed

- **VEGETABLES**
- 7-9% carbs
- Acorn Squash
- Artichokes
- Avocado
- Beets
- Brussel Sprouts
- Butternut Squash
- Carrots
- Jicama
- Leeks
- Onion
- Pumpkin
- Rutabagas
- Turnips
- Winter Squashes

- **Fruits**
- In Limited Quantity
- On Limited Basis
- (Snacks only)
- Apples
- Berries
- Grapes
- Papaya
- Pears
- Prunes, Fresh

- **BEVERAGES**
- Beef Tea
- Bouillon - Beef, Chicken (Decaffeinated) Teas
- Filtered or Spring Water
- Red Wine only (3 glasses max)

- **DESSERT**
- Plain Gelatin only

\[\text{FOODS EATEN CLOSEST TO THEIR RAW STATE HAVE THE BEST DIGESTIVE ENZYME ABILITY.}\]

\[\text{TAKE FLUIDS MORE THAN ONE HOUR BEFORE OR MORE THAN TWO HOURS AFTER MEALS.}\]

\[\text{LIMIT FLUID INTAKE WITH MEALS TO NO MORE THAN 4 OZ}\]

\[\text{NO PROCESSED GRAINS, WHITE FLOUR, SUGAR, SUGAR SUBSTITUTES.}\]

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**Slide 32**

**Insight**

Our way of life is related to our way of death

The Framingham Study, Harvard University

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**Slide 33**

**Membrane Physiology**

- Majority of membrane is comprised of EFA's
- Trans fatty acids (hydrogenated-added) displace healthy EFA's from membrane construction and subsequently reduce membrane surface area by 70%, in turn reducing cellular respiration by 70%
- When Cellular and Nuclear membranes become irregular they begin to leak genetic material into the blood stream which is assayed downstream by the liver provoking the formation of NTA's (natural tissue antibodies)
- Employ Linum/B6 (3), Tuna Omega (2), Black Currant Seed Oil (2), Sesame Seed Oil (3), Cataplex F Tablets (3), Chlorophyll (2) to promote healthy EFA replenishment
- Add Olive Oil and butter to the diet
- Discontinue all hydrogenated seed oil

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**EFA Supplementation**

- Linseed oil is 630 mg. organic, minimally processed flaxseed oil and B6 contribution alpha linolenic acid which may be converted to EPA and DHA in the body to support membranes, hair, nails, vision, brain.
- Tuna is 1200 mg. of tuna oil contributing 300 mg. of DHA and 60 mg. of EPA.
- Cataplex F Tablets vs. Perles differ in that the perles are iodine free, both contributing alpha linolenic acid from a flaxseed oil source.
- Black Currant Seed Oil is a source of omega 6 fatty acids contributing 320 mg. of BCSO and producing 47 mg. of Gamma-Linolenic Acid which converts to a hormone-like substance called prostaglandin E1 (PGE1) helping to maintain blood flow, fat metabolism, and fluid balance.
- Sesame Seed Oil is 385 mg. promoting hemopoietic activity and liver/immune functions.

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**EFA Research Study**

Research with prison and US offenders suggests nutritional deficiencies may play a key role in aggressive behavior.

“We are suffering from a widespread disease of deficiency. Just as Vitamin C deficiency causes scurvy, deficiency in the essential fats that brain needs and the nutrients needed to metabolize those fats is causing a host of mental problems from depression to aggression. The pandemic of violence in western societies may be related to what we eat or fail to eat. Junk food may only be making us sick, but mad and bad too.”

Published in 2002 the study in a prison showed those consuming the extra nutrients committed 37% fewer serious offences involving violence, and 26% less offences overall. Those on the placebo showed no change in their behavior. Once the study was over the incidence of offences went up by the same amount.

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**5-Immune Burdens**

- Hidden metabolic stress/inflammation compromising the immune system affecting immune defenses and adrenals.
- Intestinal (Candida, etc.), Thymus, adrenals, SSO (Stress), Adrenal, etc., immune system depression, etc.
- Intestinal, Lyme, Mycoplasma, HIV, etc., Wernicke-Korsakoff.
- Denial, malnutrition, etc. Outpatient protocols.
Slide 37

**#5 Core Physiologic Principal**

- Immune burdens
  - Increased immune and inflammatory responses
  - Bone marrow fatigue/calcium depletion
  - Enhanced IDRS protection
- Immune depression
  - Increased cavitated infections / toxic accumulations
  - Unburden immune system
  - Decreased protection from abnormal cell activity
  - Cleansing infection / infestation /toxicity
  - Disease diagnosis – chronic progression
- Drugs & Surgery
  - Bone marrow repletion – immune liberation

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**Immune Defense – 5 levels**

- A healthy Immune Defense/ Repair System (IDRS) equals ample capacity to neutralize foreign items (translate foreignness to friendliness) resulting in no delayed allergies or hypersensitivities.

- Five lines of defense:
  1. Mucins – effective polysaccharide traps of toxins, pathogens, immunogens (secretive if you are foreign, you are included).
  2. Secretory IgA (sIgA) – synthesizes complex protective protein.
  3. Probiotic Microflora – 2-24 billion mixed flora (secretes an enzyme that degrade toxins, and produce nutrient).
  4. Mucosal permeability barrier – excludes large molecular weight foreign substances (pathogens, antigens, etc.).
  5. Dendritic cells, including macrophages, fibroblasts, proteoglycans endothelial cells, to engulf foreign invaders and cell debris.

- Gut lining promotion with Cataplex AC (10), Gastrofiber (6) – soluble fiber, Lact Enz (4) – probiotic, Zymex (6) Zymex II (6) Garlic MediHerb (4) – infestations, Chlorophyll (2) – thickening gut lining.

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**Immune Defense – 5 levels**

- Healthy immune function protects
- Five lines of defense:
  1. Mucins – Trappers
  2. Secretory IgA (sIgA) – Binders
  3. Probiotic Microflora – Metabolizers
  4. Mucosal permeability barrier – Excluders
  5. Dendritic Macrophages – Engulfers
- Gut lining promotion with Cataplex AC (10), Gastrofiber (6) – soluble fiber, Lact Enz (4) – probiotic, Zymex (6) Zymex II (6) Garlic MediHerb (4) – infestations, Chlorophyll (2) – thickening gut lining.
Slide 40

**Immune mechanisms - schematic**

Nuclear Membrane  
Cytoplasm  
Cell Membrane  
Nuclear genetic code  
Gene  
Activation  
Foreignness  
Tolerance mechanisms moderating acquired immune activation  
Reactor mediators Activate acquired immune responses

Slide 41

**Protocol – Immune Pillar**

- General Immune Up-regulation:
  - Sesame Oil (6)
  - Perles Immuplex (6)
  - Cyruta Plus (6)
  - Echinacea Premium (4)

- Infection (Acute or Chronic):
  - Thymex (10)
  - Cataplex AC (12)
  - Congalex (14)
  - Allerplex (14)
  - Broncafect (6)
  - Albaplex (6)
  - Kidney Arginex (6)
  - Kidney Cat’s Claw Complex (4)
  - Golden Seal (4)
  - Burdock Complex (4)
  - InfFighter (100 Drops)

- Infestation parasites:
  - Zymex II (6)
  - Multizyme (4)
  - LactEnz (4)
  - Wormwood (4)

- Bone Marrow Depletion:
  - Arginex (6)
  - Astragulus (4)

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**7 Pillars of Healing**

- Endocrine/Hormonal
- Glycemic Management
- pH Bioterrain
- Inflammatory status
- Immune burdens
- Circulatory Status
- Complete Trophic Restorative Cycles
Slide 43

7 Pillars of Healing

The possibility of human physiological genius

Genetic physiological genius

Endocrine/Hormonal – Disruption & Depression

Glycemic Management – Insulin/Cortisol Dysregulation

pH Bioterrain – Net Acid Excess

Inflammatory status – Cumulative Repair Deficit

Immune burden – Toxicity, Infection & Infestation

Circulatory Status – Arterial, Venous & Lymphatic Competence

Complete Tropho-Restorative Cycles – Uninterrupted Processes of Repair, Fortification & Synchrony

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Foundation

Give me a place to stand on and I can move the world

Archimedes
Visit after visit – Start Monday

- Explain autoimmunity to people so that they understand it as a functional developmental process instead of a mysterious attack.
- Give the Autoimmune handout to encourage a therapeutic rationale.
- Employ specific protocols for any known or suspected autoimmune syndrome.
- Reinforce yourself and the patient with how much understanding of the underlying issues you can concern yourself with – through each understanding inflate people from despair to hope and potency to try.
- Understand autoimmunity as a mysterious curse in the world, and people are empowered with understanding.
- Prepare for the slow process of retiring autoimmune activity, and for the long-term results that as a result mean as a protected healing environment.
- Understand autoimmunity is a mysterious curse in the world, and people are empowered with understanding.
- Confront bankruptcy at its source – unending health expenses for management/cure of autoimmune conditions.

Give generously
As you have received