Mentoring the Mentor

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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 to convey the notes and information – no information squandering
- Issues/problems/questions are considered a learning process for everyone, although individual’s 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)
Eternal truth -
Wisdom arises through the simple act of giving someone or something your full attention. Attention is primordial intelligence, consciousness itself. It joins the perceiver and the perceived in a unifying field of awareness. It is the healer of separation.

Eckhart Tolle

7 Pillars of Healing
7 Unified Mechanisms of Health

- Endocrine/Hormonal
- Glycemic Management
- pH Bioterrain
- Inflammatory status
- Immune burdens
- Circulatory Status
- Digestive Potency
7 Pillars of Healing

- **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
- **Digestive Potency** – Fuel absorption, waste removal, Immune modulation

Foundation

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

Archimedes
2 - Glycemic Management

- Phase II diet limiting glycemic index
- Phase I diet amplifies metabolic modulation
- Prevent insulin/cortisol spikes
- Eat protein 3 times each day
- 40/30/30 CHO/protein/fat
- Starches cause sugar cravings
- Resolve food cravings with protein and fat
- Increase cyclic AMP, promote glycolysis
Mentoring the Mentors

Glycemic balance

Introduction glucose – source in starch, alcohol, sugars

Increased blood glucose

Hunger – Sugar cravings

Insulin up-regulation

Cells absorb sugar – store as triglycerides

Adaptation – Insulin Resistance

Anabolic weight/fat gain

Increased energy/stamina/productivity/independence

#2 Core Physiologic Principal

Increased satiety

Hypoglycemia – blood sugar too low

Stress – Increased Cortisol

Glycogen reserve depletion

Food dependency / fatigue

Mitochondria proliferate

Adrenal / Pancreas stress

Glycemic dysregulation

Growth hormones

Carbs & Hormones

Mentoring the Mentors

Anabolic Adaptation

Catabolic shift

America is facing an epidemic

The U.S. is the fattest nation in the world.

The average adult gains 7 lbs. in December during the holidays.

64.5% of Americans are overweight or obese. Source: JAMA. 2002;288:1723

Obesity is the second largest preventable cause of death in the U.S.! (Smoking #1.) Source: JAMA 1996; 276:1907-1950.
**CONTINUED REPORT**

**LABORATORY CORPORATION OF AMERICA**

**LABCORP HOUSTON**

**PAGE 2**

**2/13/01**

**2237 NORTH GREEKEN**

**HOUSTON, TX 77040 (713-856-8280)**

**PATIENT NAME**: Dr. Stuart White 5/27/2010

**ACCESSION**: 044-596-0337-0

**REGISTRATION**: 9200784432

**REPORTED**: 15-FEB-2001

**RECEIVED**: 13-FEB-2001 9:50

**SEX, AGE, DOB**: M, 53, 25-JUL-1947

**ROOM**: 432-69-859777

** PRIMARY LAB**: HD SEQUENCES: 418

**PHYS/PHRN**: BRENTON G

**CLIENT NAME**: GARY N. BREWTON, M.D.

**CLIENT ID**: 42108322

**LOCATION**: **STON**

**HOUSTON TX 77098-0000**

**TEST REQUEST**: CBC WITH DIFFERENTIAL/PLATLET/COMP. METABOLIC PANEL (14)/LIPID PANEL;

**HGB/HCT/PLT/PLAT/ESR/ELISA/PROTEIN, QUANT.**

**ADDITIONAL INFORMATION**: 184428082977

**REFERENCE RANGE**

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<th>ABNORMAL RESULTS</th>
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<td></td>
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This test is intended to be used as an independent risk factor for vascular disease and is NOT for the diagnosis of folate or vitamin B12 deficiency. Labcorp has available the Megaloblastic Anemia Profile, Serum for that purpose.
Normal CHO Consumption

¬ Sanity dictates that we consume CHO’s with lower glycemic indices
¬ Americans eat a high CHO diet, we recommend a normal CHO diet, not low
¬ There are no essential CHO’s
¬ Energy increases, body sculpting ensues, weight reduction of fat only, lean muscle mass increases, food cravings recede, insulin resistance reverses – What’s to argue over?
Fructose as metabolic load

Beyond starch the only other metabolic burden is a simple sugar called fructose, especially amplified in our diet as high fructose corn syrup.

Just as with starch if the triglycerides exceed 80 and belly fat (abdominal pannus) is elaborate it is obvious that the glycemic index of this simple sugar (135) is so excessive that it amplifies blood glucose levels too quickly and promotes hyperinsulinemia and subsequent anabolic adipose development.

Dr. Richard Johnson (professor University of Colorado, where he runs the kidney division and is in charge of transplantation and research in blood pressure) describes all this in his book “The Sugar Fix”.

Links to major illness

In addition to lipoid degeneration major conditions have been attributed to fructose physiology – only animals fed fructose develop obesity, insulin resistance, fatty liver, high triglycerides, inflammation, vascular disease, hypertension, diabetes, kidney disease.

Fructose has a very unique metabolic pathway that results in the formation of uric acid as it is processed – research shows levels above 5.5 directly contribute to gout, hypertension, obesity, kidney disease.
Assessing fructose overload

- If body composition fat percentage exceeds 20% in men and 24% in women, and if high glycemic dietary starch is confirmed to be eliminated the inference is that fructose is burdening the metabolism.
- As well in addition to triglycerides above 80 finding uric acid above 5.5 is indicative of fructose overload – optimal values should be between 3-5.5.
- Uric acid has both an antioxidant and pro-oxidant nature – so levels too low leave cells exposed to oxidative stress, but levels above 5.5 increase oxidative stress.
- What if uric acid really describes liver efficiency?

What does it mean clinically?

- If a person is plateaued in their evolution toward lean body state we must consider fructose overload.
- This can be done by comparing and contrasting the triglycerides and uric acid to infer the ingestion and metabolic load of too much fructose.
- This also takes into account reactive hypoglycemia trends in some more severe than others.
- We begin by keeping the fructose daily consumption below 25 grams.
- One can of soda will exceed the daily limit.
Fructose burden – 15-25 grams

It is possible that this is the single factor in the SAD that is robbing Americans of their birthright to health and happiness.

As clinicians it is time for us to take our patients as far as they wish to find their perfect health – we can assess this and move people beyond that phase II shift all the way to remarkable states of physiology.

2 out of 3 are overweight, 1 out of 3 are obese – it has become clear that fructose is the single most important factor in this epidemic.

Assessing Fructose Burden - Fruit Fructose Content
Seek to limit daily consumption of fructose to 25 grams per day to avoid fatty degeneration.

<table>
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<tr>
<th>Fruit</th>
<th>Serving</th>
<th>Grams Fructose</th>
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<tbody>
<tr>
<td>Limes</td>
<td></td>
<td>0</td>
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<tr>
<td>Lemons</td>
<td></td>
<td>0.6</td>
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<tr>
<td>Cranberries</td>
<td>1 cup</td>
<td>0.7</td>
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<tr>
<td>Passion Fruit</td>
<td>One</td>
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<tr>
<td>Prunes</td>
<td>One</td>
<td>1.2</td>
</tr>
<tr>
<td>Apricots</td>
<td>One</td>
<td>1.3</td>
</tr>
<tr>
<td>Guavas</td>
<td>Two</td>
<td>2.2</td>
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<tr>
<td>Dates (Deglet)</td>
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<td>2.6</td>
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<tr>
<td>Cantaloupes</td>
<td>1/8</td>
<td>2.8</td>
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<tr>
<td>Raspberries</td>
<td>1 cup</td>
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<tr>
<td>Kiwis</td>
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<tr>
<td>Blackberries</td>
<td>1 cup</td>
<td>3.5</td>
</tr>
<tr>
<td>Star fruit</td>
<td>One</td>
<td>3.6</td>
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<tr>
<td>Cherries</td>
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<tr>
<td>Strawberries</td>
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<tr>
<td>Pineapples</td>
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<tr>
<td>Boysenberries</td>
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<tr>
<td>Tangerines/Mandarins</td>
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<tr>
<td>Nectarines</td>
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<tr>
<td>Peaches</td>
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<td>Oranges</td>
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<tr>
<td>Papayas</td>
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<tr>
<td>Honeydews</td>
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<tr>
<td>Bananas</td>
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<tr>
<td>Blueberries</td>
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<tr>
<td>Dates (Medjool)</td>
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<tr>
<td>Apples</td>
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<tr>
<td>Persimmons</td>
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<tr>
<td>Watermelons</td>
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<td>Pears</td>
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<tr>
<td>Raisins</td>
<td>1/4 cup</td>
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<tr>
<td>Grapes (green or red)</td>
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<tr>
<td>Mangos</td>
<td>Half</td>
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<tr>
<td>Apricots (dried)</td>
<td>1 cup</td>
<td>16.4</td>
</tr>
<tr>
<td>Figs (dried)</td>
<td>1 cup</td>
<td>23.0</td>
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</table>
Fructose sources

- Honey is high in fructose so beware
- Dried fruits are twice to three times higher than raw fruit – most severe are dried figs or apricots
- Juices can be very concentrated and lack some of the adjacent antioxidant and vitamin quality that assists in handling the fructose – dilution can help

Turbo charged fructose

- Glucose consumed with fructose accelerates the absorption of fructose
- Beware of fructose mixed with other sweeteners as it may accelerate the speed of the fructose arriving in the blood
- With these new studies fructose becomes the number one issue with children’s development involving attention and learning disorders and tendencies toward glycemic dysregulation
- As well geriatric management must take into account this pro-inflammatory dynamic
Uric Acid Trigger - Beer

- The yeast used to make beer increases the levels of uric acid – important news to gout conditions and results in beer belly syndrome
- We have watched people disfigure their bodies with certain lifestyle choices – now we have the biochemistry to explain why it happens

Alas – What to do?

- Severe elimination of fructose for 2 weeks reboots the system and breaks the metabolic lock – weight loss will continue
- Sugar activates its own pathways – the more sugar the more sensitive and the more anabolic – by cutting sugar over a period of time you can reduce the hyperactive metabolic system that has developed
- This is the next step in achieving ‘your’ perfect body
- Replacement of sweeteners with stevia or pure glucose(dextrose)
- Dextrose is only 70% as sweet as sucrose so more will be used to achieve the same level of taste
Protocol – Glycemic Pillar

❖ General Glycemic Regulation:
  Phase I/II Diet
  Gymnemma (6) minimal dose dependant effects receptors
  Protefood (6)
  Whey Pro Complete (2Tbsp)

❖ Adrenal / Cortisol Regulation:
  Drenamin (6)
  Adrenal Complex (2)
  Protefood (6)
  Nutrimere (4)

❖ Pancreas Support:
  Pancreatrophin (6)
  Paraplex (6)
  Cataplex GTF (6)
  Zinc Liver Chelate / Chezyn (6)

❖ Glycogen Reserve (Liver):
  AF Betafood (14)
  Livaplex (6)

❖ Yeast Overgrowth Control:
  Gut Flora Complex (4)
  Prebiotic Inulin (1 tsp)
Joseph lets physiology work -

Presented 02/07 age 69 with chronic lymphoma first diagnosed in 04, receiving CSF chemo - injected spinal taps that began to leak and create severe crown headaches, oncologist would not allow anything other than calcium for 6 months

Symptoms included sore throats, laxative dependent constipation, eczema, leg fatigue, nocturnal urination 3/night, insomnia, low energy, afternoon low, loss of memory and mentation, 222 lbs, 6'0", experimenting with 6th round of chemo and using Cipro

2nd visit reported insomnia gone, sore throat gone, eczema reduced, memory & mentation improved, loss of 10 lbs

After 6 months cancer continued to progress unchecked so he finally quit chemo and told me to go for it

08/07 began phase II diet, identified wheat (gluten) & milk (casein) intolerance, initiated extensive nutrient regimen including antioxidant and enzyme therapy

7th visit reported reduced eczema, mentation improved, energy improved, loss of 19 lbs

07/08 reported 160 lbs (total weight loss of 62 lbs), eczema gone, left wrist pain gone, energy level good, working full time job now 72 years old, cancer undetectable 3 repeat imagings, in remission for 6 months

05/09 still in remission, still in full time work, 164 lbs, mild libido increase, referred his wife in so she can stay alive with him – he is not going to die anymore!

Daniel – Who'd have thought? Who'd have thought? Who'd have thought? Who'd have thought?

Presented 07/08 for high BP, 64 years old

Presented with tinnitus, R & L ear creases, hearing loss, swollen tongue, tearing eyes, puffy eyes, dark circles, neck stiffness, sweaty hands and feet, nocturnal urination 2 - 3/night, night sweats, 6 pm low, 5'6", 222 lbs
Glycemic Management – How to steward transformation

- Step One: Phase II Diet, Whey Pro Complete (2 Tbsn), L-Glutamine (1.5 g)
- Step Two: Phase I Diet, fruit elimination, 6 meals per day, Protefood (6), Nutrimere (4)
- Step Three: Stimulant Elimination, Food Allergy removal
- Step Four: Thyroid Support, Barnes Thyroid Temperature Monitoring, Iodine Patch Testing, Prolamine Iodine (1-6)
- Step Five: Insulin Receptor Sensitivity Recovery, Gymnema (6) minimal dose, Zinc Liver Chelate (6), Chezyn (6)
- Step Six: Adrenal Balance, Drenamin (6), Withania Complex (4), Eleuthero (6), Adrenal Complex (2), Adreno Distress Guard (4) – Perque
- Step Seven: Assessment of fructose burden, Limit fructose intake to 25 grams /day

Absolute starch elimination must be present throughout this process or each increment will be invalidated – only go to whatever step achieves 4 to 10 lbs per month weight loss

Calorie restriction – Life Extension

- Phase II diet is in fact a form of calorie restriction and appetite reduction resulting in reduced insulin levels and activation of more basic survival mechanisms, including lipolysis to internally maintain blood sugar
- All researcher studying aging agree that reduced calorie intake by 20-40% extends lifespan by up to 50%
- No other known intervention has such a consistent and profound effect
Compressing morbidity

- Not only does calorie restriction extend life but also reduces morbidity by activating stress responses that are hard-wired into the gene code.
- These stress responses activate biochemistry that is designed to increase functionality and promote survival.
- The activation of these survival mechanisms also act to promote wellness, if not only activated or survival.
- In other words, it is good to live somewhat inside our survival mechanisms, as away of life, and this reduce morbidity, disrepair and decline.
- Can we promote these mechanisms biochemically?

Hormesis

- A term originally coined by toxicologists to describe a biphasic dose-response curve wherein an agent has a stimulatory effect at low doses and a toxic effect at high dose.
- Now this term has been adopted by medicine to portray the beneficial adaptive responses of cells to moderate stress.
- In other words, moderate stress promotes health, wellbeing, and mental and physical performance.
- So gain Nietche as accurate when he said, “What does not kill you makes you strong”
**Hormesis – Some known mechanisms**

- In response to stress the body calls up defense molecules – once present these molecules not only effect the perceived threat, but also increase resistance to other threats and repair existing damage.
- HSP (Heat Shock Proteins) are produced to protect and chaperone other proteins by binding to them and shielding them from attack.
- SIRT1 (Sirtuin 1) is a bodyguard that activates multiple genes to produce antioxidants and cell membrane stabilizers.
- Growth factors are generated to promote repair.
- Cellular kinases are produced to promote motility.

**Adaptogens & Hormesis**

- Adaptogens are herbs and nutrients that promote stress responses to help the body better adapt to stress.
- Many phytochemicals that are found beneficial are in fact the plant’s responses against diseases, pests and grazing.
- Resveretrol has been proven to be a potent sirtuin activator.
- Panax Ginseng and Milk Thistle reduce insulin resistance and increase DHEAS (primary marker of adrenals vitality).
- Echinacea increased heat shock proteins and immune potency.
- Gingko reduces oxidative damage to DNA in numerous studies and acts antioxidant and anti-inflammatory.
New Product Alert – Read All About It!

- **HerbaVital** released April, 2010 is a unique combination of factors to reduce the physiologic decline known as aging, but also acts as a hormetric influence to up-regulate stress responsibility and therefore survival status. This is cocktail of daily herbal constituents that can universally support the declining stress response that is so essential to wellness and vitality. It is a strategy in a formula for daily minimizing of the underlying process of aging. This product takes the assessment out of the picture for the clinician and addresses the common background issues at work universally in the patient.

- **HerbaVital:**
  - Japanese Knot Weed root extract 100:1 80 mg providing 36 mg of natural resveretrol
  - Milk Thistle seed 5:1 50 mg providing 48 mg of silybin
  - Korean Ginseng root 5:1 50 mg
  - Masson Pine bark 100:1 50 mg providing 37.5 mg proanthocyanidins
  - Ginkgo Leaf 50:1 30 mg

New Product Alert – Read All About It!

- **Cellular Vitality** released March, 2010 is a formula designed to enhance and invigorate cellular health and repair mechanisms, so it also acts on a macroscopic level to promote repair and cleansing and vitality. Reading the ingredients help us to expect clinical outcomes, and although this formula is new to the scene a functional practitioner may understand what vectors of physiology will be influenced. In general this as another anti aging product that can reduce the decline of multiple systems over time. So clinicians using this product have observed response in skin quality, energy levels, and stress adaptation.

- **Cellular Vitality:**
  - Ribonucleic Acid providing triphosphates and DNA synthesis
  - B Vitamins (1,2,3,6,8,12, etc) assisting in stress response and homocysteine management
  - Berry Seeds providing antioxidants
  - Bromelain to reducing platelet clumping and promote vascular permeability
  - Coenzyme Q10 for mitochondrial function
  - Cordyceps a mushroom powder for kidney, heart and lung support
  - American Ginseng an adaptogen to provide adrenal and immune modulation
Approach to wisdom

Be patient toward all that is unsolved in your heart and try to love the questions themselves like locked rooms or books that are written in a foreign tongue. The point is to live everything. Live the question now. Perhaps you will then gradually, without noticing it, live your way some distant day into the answers …

Maria Rainer Rilke

Visit after visit — Start today

- See each patient for the quality of life attitudes/issues they reveal
- Teach every patient the principles of calorie restriction and stress response up-regulation and prepare them with anti-aging concepts to maximize their lifespan and wellspan
- Employ the principles of the seven pillars as a way of seeing the human in the process of manifestation - Application of pillars is sequential and at the discretion of the doctor – always start with caring for the chief complaint, the pillars that relate to that issue, and the deemed physiological priority (eg – immune)
- Connect the dots between body composition and fructose dietary burden
- Document, then declare success
- Be a practitioner who is always developing the patient beyond their request
- Change outcomes, stop disease progression, reveal the inherent healing potential by using principles and products that express The Law (the way it was made to work)
- Use HerbaVital (1/day) and Cellular Vitality (2/day) to reduce aging an address waist thickening as indication of stress maladaptation
The greatest use of your time

Think New Thoughts

Change the world
It wants to