

# THE UPLINK

*Merging Contemporary Chiropractic Neurology and Nutritional Biochemistry in the Tradition of Applied Kinesiology*

Issue No. 19

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## **EXCESS NUTRIENTS CAUSE BACK PAIN: CALCIUM**

The good news is that more and more people are taking nutritional supplements. The bad news is that many people are unwittingly overdosing themselves into problems, which many times include seemingly unrelated musculoskeletal symptoms! In Issue #18 of *THE UPLINK*, we discussed vitamin E excess. In Issue #19 we will discuss low back pain (and other pains) from too much calcium intake.

Recurrent or non-responsive low back pain, neck pain, shoulder pain, and other musculoskeletal pain occurs in a significant number of people (especially women) who supplement with excess calcium.

## **MOTHER, APPLE PIE, AND CALCIUM**

To question the wisdom that all women after a certain age need supplementary calcium rings like heresy in many circles. Yet it is clear that there are very few substances which are good for everyone. Our awareness of biochemical individuality and genetic uniqueness makes it clear that not everyone should do everything the same as everyone else.

## **CALCIUM AND THE PARATHYROIDS**

Calcium levels in the blood are maintained via several important physiological mechanisms including the parathyroid glands (which also regulate phosphorus levels.) Since parathyroid hormone increases blood calcium levels, parathyroid activity increases when serum calcium levels are low and decreases when serum calcium is high. Hence, when a person *over-consumes calcium* (especially when it is out of balance with phosphorus, magnesium, and possibly other minerals) there is a tendency towards increased serum calcium levels which *inhibits parathyroid activity*.

## **NECK AND SHOULDER PAIN**

As was demonstrated by Dr. Goodheart in 1980, the parathyroids are related to the levator scapula muscle which attaches to the upper four cervical transverse processes and to the superior angle of the scapula. Dr. Goodheart also taught us that the parathyroid and levator scapula are associated with the lung meridian. Excess calcium will often result in parathyroid inhibition and hence, inhibition of the levator scapula. This results in neck problems (including a tight upper trapezius), pain around the superior angle of the scapula or other scapular and shoulder areas. These problems are often chronic in light of continuing excess calcium intake.

If inhibited, treat the levator scapula by origin-insertion technique, Chapman's NL reflex (located in the belly of each teres minor) or other procedure. Then perform an oral challenge with the patient's calcium product and retest the levator scapula. It will usually become inhibited and TL will be positive to one or both Chapman's NL reflex areas with the calcium in the mouth. TL to these NLs with oral calcium will also result in a weakening of any other indicator muscle. Treat the NL by injury recall technique while the calcium is held in the mouth.

## **CALCIUM AND THE LOW BACK**

The lung meridian is a yin meridian and is paired with the yang large intestine meridian. Imbalances in one of these meridians may be compensated for in the other. Frequently, excess calcium intake results in a compensation to the parathyroid / levator scap / lung meridian stress which creates problems (recurrent subluxations) at the large intestine associated areas of the spine which are located at L-4 and L-5. This causes low back pain and may also contribute to chronic lower extremity (knee, ankle) pain.

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In these patients, lumbar subluxation challenge will be negated by TL to the levator scapula/PTH Chapman's NL reflex(es). Oral challenge with the patient's calcium will cause positive TL to these reflexes which must be corrected by IRT.

Careful monitoring of the patient's calcium intake must take place. Levels and types of calcium must be titrated to the optimum dosages. Many patients require a combination of raw bone derived calcium and ionizable calcium (such as calcium citrate or calcium lactate.) It usually requires several weeks or months to find this optimum balance. Magnesium levels must be considered as well as phosphorus.

■ **FIRST COME – FIRST SERVED:** Dr. Schmitt is presenting a series of MASTER CLASSES on “The *LINKS* Between the Nervous System and the Body Chemistry” in Chapel Hill. The title of each session is below. It is expected that anyone attending a Master Class is familiar with Dr. Schmitt's work including the topics in all of his books (See “This Issue's Special) as well as those presented in his audio-video-notes presentations. Additional details about classes and topics or information on group hotel rates may be received by calling or faxing our office. (See next page.)

These Master Classes are taught in the training room of The Center for Innovative Care (Dr. Schmitt's office.) Space is limited and attendance at Master Classes is limited to 20 doctors per session on a first come- first served basis. See Seminar Schedule.

- “Beginning Examination & Treatment Procedures – Blowing Away the Smokescreen”
- Visceral Assessment and Treatment Techniques
- Nutritional Chem 1 – There *Is* a *System* to Body Chemistry
- Nutritional Chem 2 – “The *System* of Body Chemistry–Pt. 2
- No-Stuff Stuff (What to do When You Forget Your Test Kit)
- Advanced Emotional Stress Reduction Techniques

■ **ONE OF THE DANGERS** of relying on clinical studies alone is that research is the starting place for practice, not the end point. The research about nutritional substances, for example, gives us no understanding of how a nutrient fits into a patient's overall health pattern. It is also interesting to consider that clinical studies of patients apply to the overall group, and the next patient that comes into your office may well be the one who falls at the outer limits or even outside the bell shaped curve of responses. That is often the case as is described relative to calcium supplementation in this issue and vitamin E in Issue #18.

For these reasons and others, it is important to treat each patient as an individual, and to have an open mind about the range of therapeutic possibilities which may be required in each case. The individual interactive approach provided by functional neurological assessment and neuro metabolic assessment addresses these issues and is by far the most valuable tool we have in clinical practice today. Once again, research studies should be the starting place for our approach, not the end point.

■ **NEW BASIC 100 HOUR AK SYLLABUS IN NC!** Dr. Schmitt has personally designed this SPECIAL 100 hour basic AK course (ICAK approval pending) as an introduction to using muscle testing as functional neurological and neurochemical assessment. The course begins with a 3 day session on April 27-29, 2001 at the NC Chiropractic Association Spring Conference in Atlantic Beach and continues with seven 12 hour weekend sessions. Each session will focus on specific major topics so that the doctor may return to practice armed with new tools for particular problem areas. On each weekend Dr. Schmitt will teach up-to-date techniques for assessment and treatment of a major structural area (**S**) and a major nutritional-chemical problem topic (**C**). The appropriate muscle tests will be taught each session relative to the structural area topic. The session-by-session major (**S**) and (**C**) topics are:

- 1: **S:** Hands-On Pain Relief / Introduction, History of AK  
**C:** Controlling Inflammation - Essential Fatty Acids
- 2: **S:** Hip and Low Back  
**C:** Relieving Fatigue – Part 1
- 3: **S:** Neck (and Cranium)  
**C:** Relieving Fatigue – Part 2
- 4: **S:** Shoulder  
**C:** Digestive System
- 5: **S:** Knee  
**C:** Adrenal Stress Disorder / Emotional Stress Overload

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6: **S:** Foot and Ankle

**C:** Food Hypersensitivities / Liver Detoxication

7: **S:** Elbow

**C:** Carbohydrate Intolerance / Stopping Degeneration

8: **S:** Wrist and Hand / TMJ

**C:** Common Glandular Dysfunctions

Contact the NC Chiropractic Association (See Seminar Schedule) for additional information regarding this unique opportunity to learn basic AK from Dr. Schmitt's forward looking perspective.

■ **SKI WITH WALLY IN 2001:**

1. Lech and Zurs, Austria, January 21-26 (US Departure on Jan. 20<sup>th</sup>) Topic: "You Know It's There But You Can't Find It (Simple Procedures for Hidden Problems)"

2. Steamboat Springs, Colorado: March 8th, 9th, and 10th. THE 7TH ANNUAL "SKI WITH WALLY" SEMINAR. Topic: "The Effects of Stress on the Female and the Male" – a 20<sup>th</sup> anniversary update of Dr. Schmitt's classic book: *Common Glandular Dysfunctions in the General Practice*. See contact person on seminar schedule for further details.