

# THE UPLINK

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

Issue No.36

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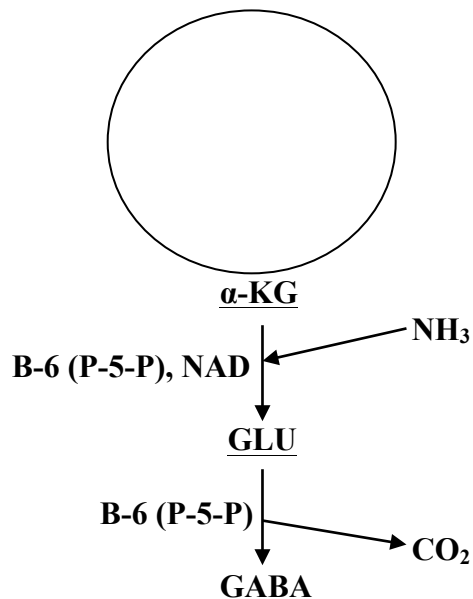
Spring, 2006

## 1/3<sup>rd</sup> OF BRAIN CELLS

It is said that the neurotransmitter (NT) gamma-aminobutyric acid (GABA) is the most important inhibitory NT in the brain. Up to one-third of brain cells are affected by GABA. Drugs that create a GABA effect (GABAergic drugs) are among the most common that our patients are taking and include tranquilizers, sleeping pills, muscle relaxants, and anti-seizure medications.

In Issue #35 of *THE UPLINK* we discussed the citric acid cycle (CAC), the nutrients required for its function, and the fact that heavy metals and immune system chemicals block the CAC. This knowledge is the basis for understanding GABA synthesis since GABA is produced in a 2-step process directly from the CAC that requires B-6 and niacinamide (NAD).

## CITRIC ACID CYCLE:



Alpha-ketoglutaric acid ( $\alpha$ -KG) from the CAC takes on an ammonia group to become glutamic acid (GLU) using P-5-P and NAD. Again using P-5-P, GLU has a carbon dioxide group removed (i.e., is decarboxylated) to become GABA. Therefore, for GABA to be produced, the body must have adequate

supplies of all of the B vitamins and minerals for the CAC as well as B-6 in its coenzyme P-5-P form. It also must have an adequate supply of ammonia. (See *THE UPLINK* Issue #27.)

## LOW GABA SYMPTOMS

Knowing that a faulty CAC is related to low energy and low GABA helps us make sense out of many patients we see. It also provides the basis for therapy aimed at the cause of these patients' chemical imbalances (i.e., CAC nutrients and B-6) rather than merely addressing their symptoms with tranquilizers, sleep medications, and related GABAergic drugs.

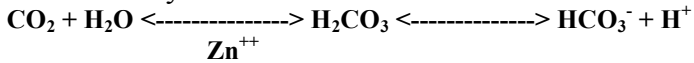
Low GABA symptoms include sleep difficulties, muscle tension, and anxiety. Hyperventilation causes panic attacks that are often treated in emergency rooms by having the patient breathe into a paper bag. Sound familiar? Low firing GABAergic neurons are also implicated in seizures and certain tremors.

Many patients under stress complain of both exhaustion and anxiety or other mental symptoms. Some patients shake or tremble when they are at the end of their ropes. These can all be from low GABA.

Patients who respond to GABAergic drugs are patients with poor diets, heavy metals, and/or allergies. Their faulty CACs are unable to provide adequate  $\alpha$ -KG for conversion into GABA. The necessity of CAC activity for GABA synthesis is one reason that B vitamins have been reported as useful in so many diverse symptoms.

■ **CAC & CRANIAL FAULTS:** Carbon dioxide is an essential substance for the production of cerebrospinal fluid (CSF.) Dr. Goodheart taught us years ago that zinc is necessary for the enzyme carbonic anhydrase, which combines water and carbon dioxide to form carbonic acid which then dissociates into hydrogen ions and bicarbonate ions necessary for CSF synthesis. *Inadequate zinc OR inadequate carbon dioxide from decreased CAC function* can both cause recurrent cranial faults.

**Carbonic  
Anhydrase**



■ **GABAERGIC DRUGS NOTES FREE ON-LINE:** Visit [www.theuplink.com](http://www.theuplink.com) and look under “Guides” for a printable version of the various GABAergic drugs and their uses. A copy of the CAC pathways will also be found there. Also see **Quintessential Applications: A(K) Clinical Protocol**” Item 12 and Appendix p 7-8.

■ **I’M GIVING YOU ANOTHER CHANCE:** Fewer doctors than we expected took advantage of last issue’s “*This Issue’s Special Offer*”. So we are repeating the same Special Offer again this issue: the audio CDs of Dr. Schmitt’s 2005 ICAK paper entitled “**The Neurological Rationale for a Comprehensive Clinical Protocol Using Applied Kinesiology Techniques**”. Several doctors have told us that the CDs are so chock full of valuable information that they have enjoyed listening to them *over and over again*.

You will be fascinated by how the intricacies of our bodies fit together in a systematic way when looked at from the perspective of the neurology and biochemistry. In spite of the basic sciences orientation, these CDs are not too complicated. On the contrary, they correlate and explain much knowledge that you already possess, but they reveal interconnections that you may have never before seen. If you start to listen to them and you don’t like them, you can send them back and we will refund the purchase price less shipping costs. So one more time: see *This Issue’s Special Offer* below.

■ **“THE MOST IMPORTANT NEW TECHNIQUE IN AK IN 15 YEARS”- AK BIOFEEDBACK:** Phil Maffetone has developed the most remarkable approach to treating muscle dysfunction, both pathological and functional. He calls it Applied Kinesiology Biofeedback (AKBF). And it is so simple. My first experience using AKBF on a patient was spectacular to say the least:

*For 14 years, a 40 year old woman with chronic bilateral hip arthritis had been unable to lift either lower limb off the table, in both supine and prone positions. After one AKBF treatment, she attained full ranges of motion – in extension from the prone position, and a full 90 degrees of flexion in the supine position! The response has persisted for five months as of this writing.*

With Phil’s blessings, I taught AKBF at the “Ski With Wally” seminar “Beyond IRT” in March, 2006. Responses at the seminar as well as those reported later by doctors who used AKBF in their practices attested to the importance of this technique. AKBF is performed in the *QA Clinical Protocol* after Step #32, that is, at the end of the protocol after all else is corrected. AKBF will be taught

again in Wilmington, NC in August, 2006. (See top of next column.)

■ **“BEYOND IRT” IN WILMINGTON, NC:** The North Carolina Chiropractic Association is sponsoring Dr. Schmitt in Wilmington on August 5-6, 2006. Dr. Schmitt will explain the underlying neurological patterns that allow IRT injuries to occur, and rarely, recur. Demonstrations and workshops will teach how injury patterns are affected by the central nervous system and autonomic functions. This will be accompanied by how to use this knowledge on a daily basis to correct both routine and difficult spinal and limb problems.

*AKBF (see above) will be taught as well.* Although future presentations of AKBF are expected, this is the only scheduled presentation at the moment.

■ **ABCDs OF QUINTESSENTIAL APPLICATIONS:** The ABCDs of the **QA** learning experience include:

**A:** Audio CDs of the **QA** thought process. (See above.)

**B:** Book: “**Quintessential Applications: A(K) Clinical Protocol**”

**C:** Course - **QA** in Philadelphia - through Jan, 2007.

**D:** DVDs of “*Critical Concepts for Effective Care*”

Go to [www.quintessentialapplications.com](http://www.quintessentialapplications.com) for an overview of this complete, up-to-date learning experience combining AK with chiropractic neurology and nutritional biochemistry. And now the **QA** seminar is available on DVDs. See below...

■ **QUINTESSENTIAL APPLICATIONS DVDs:** The Philadelphia **QA** course is being professionally recorded with 2 cameras and top notch graphics. Dr. Schmitt, assisted by Dr. McCord, is continuing to teach the 15 session program monthly. This new course is organized around clinical application using the *QA Clinical Protocol*. If you missed some early sessions and would like to attend some of the later sessions, you may do so. Watching the DVDs of the session or sessions that you missed will help you catch up prior to attending.

During each session, several people are treated following the entire accumulated protocol to simulate actual use of the *QA Clinical Protocol* in practice.

Keep an eye on [www.theuplink.com](http://www.theuplink.com) for video clips from the **QA** seminar series. These will be added to the web site in the near future.

■ **IMAGINE...** You refer a patient to another AK doctor who provides the same comprehensive care. **QA** provides, for the first time, this opportunity. Imagine...

***THIS ISSUE'S SPECIAL OFFER!***

***AGAIN!***

**“The Neurological Rationale for a Comprehensive  
Clinical Protocol Using Applied Kinesiology  
Techniques.”**

Audio recording of Dr. Schmitt's paper (with  
commentary) on the thought processes behind  
**Quintessential Applications: A(K) Clinical Protocol**

**\$75.00** (Normally \$95)

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Offer ends June 12, 2006

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