

# THE UPLINK

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

Issue No.37

© Walter H. Schmitt, DC, DIBAK, DABCN

Fall, 2006

## **HEAVY METALS IN THE QA PROTOCOL**

When present, heavy metal toxicity will undo our best efforts faster than anything except the patient consuming allergens or trans fats. When applying the *QA Protocol*, we have observed an increase in patients with heavy metal toxicity, often previously undetected. Heavy metals are considered a “chemical sensitivity” of sorts. As such, the lower sternum “immune area” will TL accompanied by associated weakness of the bilateral pectoralis minor muscles. We will find this in Steps 9, 10, & 11 (Switching, TMJ, and Cranial screening, respectively.) Recall that about 80% of cranial and TMJ problems are secondary to immune system involvement including chemical sensitivities. As mentioned above, heavy metal toxicities fall under this category.

## **HEAVY METALS AND THE SALIVARY (PAROTID & SUBMANDIBULAR) GLANDS**

Toxic levels of heavy metals often affect the salivary glands (in particular, the submandibular and parotid glands) although any organ may be subject to the ill effects of the metals. The parotid glands will not TL in the clear, but will only TL to make a strong muscle weak with the heavy metal culprit challenge. Treatment is IRT to the salivary glands with the heavy metal or its homeopathic (6x or 12x preferred.) Correct the salivary glands and any other circuits with IRT. Check especially Chapman’s reflexes for the parathyroid glands, kidneys, liver, and brain.

### **QA STEPS 9, 10, & 11**

Step 9 in the *QA Protocol* involves “switching” which is usually related to cranial and/or TMJ faults (Steps 10 & 11.) Let’s review the screening procedures from Steps 10 & 11.

From **QA Step 10: TL to TMJ Strengthens a Weak Muscle (and/or) TMJ TL with Neck in Extension Weakens Strong Muscle.**

From **QA Step 11: Identify Any Weak Muscle: Patient Imagines the Muscle Test To Be Performed If Weak Muscle Strengthens – Cranial Fault Correction Needed.** (This is “Pre-test Imaging.”) In both Steps 10 and 11, a right-sided TMJ or cranial fault is associated with the Thymus *or the Lower*

*Sternum...* and a left-sided TMJ or cranial fault is associated with the Spleen *or the Lower Sternum...*

## **LOWER STERNUM & PECTORALIS MINOR**

When TL to the Lower Sternum blocks the TMJ or Cranial indicator, this identifies the presence of a “chemical sensitivity.” There will be a bilateral weakness of the pectoralis minor muscles. If the chemical is a non-heavy metal substance, the pec minors will respond to molybdenum, selenium, iron and/or essential fatty acids. One of these substances (or possibly another antioxidant like vitamin E or quercetin) would be expected to strengthen the weak pec minors. Challenge will be with the offender, usually an aldehyde, as in *QA Protocol* Step 7.

If the offender is a heavy metal, then the pectoralis minor muscles will respond to one or more anti-heavy metal substances. This can be essential minerals such as zinc (see next page), herbs, and/or a number of other detoxifying substances including DMSA (2,3-dimercaptosuccinic acid which is available as the product Captomer by Thorne Research - [www.thorne.com](http://www.thorne.com)) and Metal-Free, a unique metal detoxifying product produced as an alternative to intravenous chelation therapy by BodyHealth ([www.metal-free.com](http://www.metal-free.com)).

Laboratory diagnosis can be confusing since different types of tests can yield different, even conflicting results. Hair analysis is easiest to perform. Urine tests, especially following an oral challenge with DMSA, can uncover toxic metals not shown in the hair. A toxic level in *any* test deserves attention.

## **HEAVY METALS UNCOUPLE THE CITRIC ACID CYCLE**

Sulfur binding heavy metals (Hg, Cd, As, Pb, Ni) bind to sulfur groups throughout the body often inactivating the molecule to which they attach. This is also seen in some cases of other heavy metal toxicities such as copper excess.

Sulfur binding to lipoic acid makes it unavailable for its CAC functions and results in a truncated or uncoupled CAC. This leads to inadequate CAC production of NADH and FADH<sub>2</sub>, and ultimately decreased ATP production (assessed in *QA Protocol* Step 12.) See *THE UPLINK* Issues #35 & #36.

www.drwallyschmitt.com

That is one way that heavy metal toxicity causes low energy and fatigue. In the *QA Protocol* we check for heavy metals when the bilateral pectoralis minor is found during Steps 9, 10, & 11, prior to Step 12.

■ **A BOOK I WISH THAT I HAD WRITTEN:** Dr. Bob Blaich has written a terrific book for your waiting room, for your family members, and for your patients. *"Your Inner Pharmacy: Taking Back Our Wellness"* is available at Barnes & Noble, Borders, Amazon.com and other sources. I travel on planes a lot and the person in the next seat often asks me about my professional life. When I read Bob's book, much of it sounded exactly like the words that I have used so many times myself. Bob has captured what AK and natural health care are all about and has explained it fully. Everyone talks about a "new paradigm" in healing, but their concepts are vague and philosophical. Bob has brought the realities of how and why we care for patients to the written word in a most understandable manner. You MUST get this book!

■ **QA IN MILAN, ITALY:** The **QA** Seminar series is being taught in Milan, Italy in a compressed format of seven sessions of 3 days each. Dr. Kerry McCord and Dr. Schmitt are alternating teaching duties. The classes are taught in English (i.e., no interpreter.) See Schedule.

■ **SKI IN 2007 #1: ITALIAN ALPS.** Join Drs. Walter Schmitt and Andy Specht in Courmayeur, Italy from January 21-28. The 12-hour seminar will be taught Monday through Thursday after skiing. Dr. Specht will teach "Clinical Kinesiology Gems" focusing on muscles associated with common spinal and nutritional problems. Dr. Schmitt will teach "Speeding Up The *QA Protocol*."

■ **SKI IN 2007 #2: TAOS, NM:** The 6<sup>th</sup> Annual **WAT** Ski Seminar (presented by Drs. Wally Schmitt, Andy Specht, and Tom Rogowskey) will be held February 15-17, 2007 at the Alpine Village Suites in Taos Ski Village. Hotel space and seminar space are very limited. Contact the hotel at 800-576-2666 or see [www.alpine-suites.com](http://www.alpine-suites.com) and mention Dr. Rogowskey's group for a special rate.

This year's seminar is entitled "*Whiplash: Essential Techniques for Rapid Recovery.*" A comprehensive clinical approach will be presented with each doctor contributing from his own unique clinical experience

■ **SKI 2007 #3: "SKI WITH WALLY" BACK IN SNOWMASS:** March 8, 9, & 10, 2007 are the dates for the 13<sup>th</sup> Annual "Ski With Wally" Seminar. Once again the seminar will be at the popular Stonebridge Inn and our block of guaranteed rooms is almost totally gone. Call Claudia Rabin-Manning TODAY at (800) 937-3878 to

insure that there are accommodations for you at this year's seminar. Snowmass has added some lifts including a 6-seater chair lift from just below the hotel.

The topic will be "*What to Do When You Can't Find a Weak Muscle.*" You know the patient has a problem, but the expected muscle weakness(es) are not present. Learning how to identify these hidden muscle weaknesses in an orderly fashion using the **Quintessential Applications Protocol** will help to explain many things you see every day in practice.

■ **DID YOU EVER WONDER WHY ZINC** seems to be related to just about every heavy metal treatment plan? The more zinc we consume, the more the body is stimulated to produce a protein called metallothionein (MT). MT detoxifies mercury and heavy metals by binding to them before they can cause harm. MT acts like a bus that picks up zinc (and other metals including the toxic ones) and carries them to their appropriate destinations. The more zinc intake, the more MT, the more extra seats on the bus to carry toxic metals to where they can be processed rather than being deposited in the tissues and disrupting functions.

■ **A RASH OF LEAD TOXIC PATIENTS** has shown up in our practice over the past several years, especially in older patients. Everyone asked, "Where did the lead come from?" I had no answer until I heard Dr. Herbert Needleman interviewed on Dr. Jeff Bland's monthly audio series Functional Medicine Update. Dr. Needleman's early research was instrumental in getting lead removed from gasoline. Dr. Needleman reported that many of us absorbed lead from years of breathing fumes of leaded gasoline. Lead is stored in bone. Now, at later stages in life, when bone metabolism is shifting, the lead is being released from bones into the blood and creating lead toxic symptoms. That explains it!

■ **DO YOU HAVE A DISCONNECT** between your basic sciences training and your clinical practice? Most clinicians do. See and hear Dr. Schmitt and Dr. Kerry McCord discuss this and other topics in video clips from the Philadelphia **Quintessential Applications** course. **DVD VIDEO CLIPS** are now on [www.theuplink.com](http://www.theuplink.com). Look on home page at the bottom of the far left hand (blue) column under "Lists."

See also [www.quintessentialapplications.com](http://www.quintessentialapplications.com).

**PROFESSIONALLY RECORDED DVDs OF**

**"Quintessential Applications"**

**Seminar Series**

**Sessions 1 – 10 Now Available**

**\$325.00 per session**

*Includes Shipping & Handling*