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# **THE UPLINK**

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

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## **ADRENAL CHALLENGE TECHNIQUE (ACT)**

In this issue of *THE UPLINK* we discuss how to find many otherwise hidden adrenal problems, and moreover, how to identify whether we need to increase adrenal activity or decrease adrenal stress.

## **A (VERY) LITTLE NEUROENDOCRINOLOGY**

Nociceptors are stimulated by noxious stimuli which often, but not necessarily, result in pain. The effects of nociception on the central nervous system include pathways which impact the hypothalamus. These connections provide for the autonomic (sympathetic “fight or flee” response) and endocrine effects (increased adrenal cortisol output) following injury. As you know, the hypothalamus releases corticotrophin releasing factor (CRF). CRF stimulates the pituitary to make adrenocorticotrophic hormone (ACTH) which stimulates the adrenal cortex to make the glucocorticoid, cortisol, and to a lesser extent, sex steroids and mineralocorticoids.

By applying these neuro-endocrine pathways, a challenge procedure has been developed which identifies many otherwise hidden adrenal problems as well as guides us how to treat the patient.

## **PINCH THE PATIENT**

Pinching the patient will bombard the nervous system with nociception. Pinch (within the patient’s tolerance) several areas of the patient’s body surface as if pinching a tennis ball with your thumb and fingers. If the patient feels the pinch, it means that the nociception reached the cerebral cortex, and presumably, if it got that far, it also activated the hypothalamus along the way. The hypothalamus will activate the pituitary and (it appears) descending pathways to the adrenal glands and their associated muscles (sartorius, gracilis, posterior tibialis, gastrocnemius, and soleus.) When this pinch challenge is positive, all the adrenal related muscles will show an immediate, but temporary inhibition.

When the ACT challenge is positive, you may TL to the adrenal Chapman’s reflexes and the pituitary Chapman’s reflex (at the glabella) to see which of these negates the pinch induced weakness.

## **TEST WITH PITUITARY TISSUE**

Next test with pituitary tissue. If oral pituitary tissue weakens the adrenal muscles, it is very likely that the adrenal reserve is so low that they will be depleted by any further stimulation. Make sure to check these patients for DHEA in addition to other adrenal nutrients listed below.

If pituitary tissue (and/or pituitary TL) blocks the pinch challenge, this suggests that the pituitary is being suppressed by negative feedback from hyperadrenal activity. There will be an offending substance affecting (stressing) the adrenals. This must be treated by IRT to the adrenal NLs with the offender in the mouth. See *THE UPLINK* Issue #4.

## **PROCEDURE**

1. Sartorius, gracilis, posterior tibialis, etc. are all strong in the clear or with TL to NLs.
2. Inducing nociception (e.g., pinching the patient) causes weakness of only adrenal-related muscles.
3. Nociception induced weakness negated by either TL to adrenal NLs or pituitary NL (at glabella.)
4. Test pituitary tissue:
  - a) If it weakens adrenal muscles - problem is diminished adrenal reserve.
  - b) If it blocks the challenge - problem is excess adrenal function affecting the pituitary. Challenge adrenal NLs with offender(s) and treat by IRT.
  - c) If it has no effect - Test adrenal nutrients.
5. Test adrenal nutrients and related substances for blocking pinch challenge weakness. Include these:

- a) DHEA (dehydroepiandrosterone) (See Issue 5)
  - b) Adrenal protomorphogen extract
  - c) Whole adrenal concentrate
  - d) Vitamin C (possibly buffered C)
  - e) Pantothenic acid
  - f) Wheat germ oil
6. If pituitary tissue weakened or had no effect, treat adrenal NLs by rubbing.
  7. If pituitary tissue blocked the nociceptor challenge, treat adrenal NLs with offender by IRT.
  8. Supplement with nutrients as indicated.
  9. Perform salivary adrenal stress profile with DHEA (especially if DHEA tested positive.)

■ **ALTERNATE GRACILIS TEST (BEARDALL):** We have found great value in using the alternate gracilis test developed by the late Alan Beardall, D.C. This test may be found in Beardall's original writings on Clinical Kinesiology. It is also included on page 324 of *Applied Kinesiology Synopsis 2<sup>nd</sup>* edition by Dave Walther, D.C. which came out in 2000. If you don't have the 2<sup>nd</sup> edition of this book, you should get it. It is one of the textbooks for the 100 hour syllabus and even if you have the 1<sup>st</sup> edition, it is really worthwhile to upgrade to the new edition. Contact Dave's company, Systems DC at (800) 221-6262 or his web site: <http://systemsdc.com>.

**NEWLY Available from AKSP, LLC**

**Audio tapes of:**

***"SUPPLEMENTS EVERY MEDICINE CABINET SHOULD CONTAIN"***

A one-day seminar taught by Dr. Schmitt  
in Los Angeles in November, 2000

**\$55 includes shipping**

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("The Health Detective" radio show interview)

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■ **"SUPPLEMENTS EVERY MEDICINE CABINET SHOULD CONTAIN"** is the title of a one-day seminar which Dr. Schmitt taught in the Los Angeles area in November, 2000. The topics discussed were based on the last chapter of his book *Compiled Notes on Clinical Nutritional Products* which is entitled, "Vitamins Every Medicine Cabinet Should Contain." This chapter is in generic terms. However, at the request of those who organized the seminar, Dr. Schmitt highlighted primarily Standard Process products in this presentation. Audio tapes of this seminar are available through AKSP, LLC.

■ **"VITAMINS EVERY MEDICINE CABINET SHOULD CONTAIN"** is the title of a guest interview of Dr. Schmitt by Dr. Toby Watkinson on the nationally broadcast radio show "The Health Detective" in 1999. We are now making the audio tape of this program available. It is a lively interview which your family and patients (and hopefully you also) will enjoy. Quantity discounts are available for this tape should you wish to sell or give it to your patients.

■ **"NO-STUFF STUFF"** or **"WHAT TO DO WHEN YOU FORGET YOUR TEST KIT"** is the title of the next Master Class in Chapel Hill on January 12-13, 2002. This seminar, taught only once previously, might also be entitled "Structural Patterns of Chemical Imbalances." It includes many quick screening techniques which save time when searching for various chemical patterns. See Seminar Schedule for other 2002 Master Class dates and topics.

■ **OVER 100 PEOPLE ATTENDED** Sessions 1 of the Special Basic 100 Hour AK syllabus developed by Dr. Schmitt that was held in Lombard, IL on October 6-7, 2001. This course has been approved by ICAK as an official basic 100 hour syllabus. Registrations at both the NC and Illinois courses have come from all over the United States and Canada. The sponsor of the Chicago area series, the National AK Club, has been able to arrange for the first sessions (and hopefully the entire course) to be taught at the convenient campus of the National University of Health Sciences (formerly National College of Chiropractic.) Each session contains "AK Home Runs" and lots of hands-on workshopping. See Issue #19 for listings of topics, session-by-session. See

seminar schedule for all dates. Contact: NUHS AK Club, P.O. Box 3611, Glen Ellyn, IL 60138 (630) 889-6702, e-mail: [willak4u@yahoo.com](mailto:willak4u@yahoo.com), web site: <http://nuhs-ak-club.tripod.com>