

In-Office Functional Testing

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Many doctors utilize in-office functional testing with conventional lab tests to identify physiologic processes before DISEASE is detectable. In-office testing allows physicians to refine the process and check progress to know when to start, to monitor and if their therapy is successful, when to stop.

Neurolingual taste testing is an in-office procedure based on the neurological connection of taste receptors in the mouth and the hypothalamus. There are other muscle testing techniques based on the electrical or magnetic influences that a nutrient has upon the system, but taste testing involves a hard wiring neurological connection.

One of the pioneers of in-office functional testing was Dr. Frank Chapman. Dr. Chapman was an osteopath during the early 1900s. He spent his whole career studying the relationship of certain reflex points he called neurolymphatic reflexes to specific organ function. His findings were published in 1937 in a book by Charles Owens



called "An Endocrine Interpretation of Chapman's Reflexes."

Chapman found that certain tender areas or reflexes corresponded to organ function. He called them neurolymphatic reflexes. Stimulation or palpation at a reflex point increased the corresponding organ's function. Also, as the organ system recovered, the tenderness associated with the corresponding reflex was reduced.

Let me give you a few examples.

Someone with a liver problem like hepatitis

would have tenderness in the 6th intercostal area on the right.

Someone with stomach problems would have tenderness in the 6th intercostal area on the left.

Pancreas patients displayed tenderness in the 7th intercostal area on the left.

He discovered these points from patients in the hospital with documented diseases and palpated them to find relationships. His whole therapy revolved around identifying

the points and manually rubbing where he found tenderness, until the tenderness reduced or went away. Chapman found when he rubbed those points, patients would get functional improvement to the corresponding organs.

In the last 40 years Dr. George Goodheart and others have found these points to be valuable to stimulate the health and function of the corresponding organ. In fact, Dr. Goodheart discovered the thymus reflex based on Dr. Chapman's work.

Giving credit to Dr. Chapman, the reflex for the thymus is under the right armpit near the 5th intercostal space which is 4-5 inches directly under the arm depending on the size of the patient.

The Chapman reflex for the spleen is the 7th intercostal space on the left side approximately 6-7 inches under the arm pit.

Dr. Chapman found that as he rubbed, the tenderness would go away. And as the tenderness would go away; often the intensity of the symptoms would go away as well. His whole therapy revolved around identifying the points and manually rubbing where he found tenderness, until the tenderness reduced or went away.

Dr. Goodheart took Dr. Chapman's work a step further. Once tender reflexes were discovered, Dr. Goodheart looked for nutrients that would nullify the tenderness. He had the patient taste a nutrient that corresponded to the gland to see if the Chapman reflex would diminish as well. Once the nutrient was found that would lessen the tenderness in the reflex he would use it therapeutically. In other words, he would use the dysfunctional physiology point to identify nutrients that abort the tenderness. After identifying the nutrient, he stimulated or rubbed the points as Dr. Chapman did once an organ is discovered.

One of the classes of nutrients that have been overlooked in recent years is glandulars. Glandular extracts supply RNA/DNA for repair as well as the exact ratio of micronutrients needed for repair. We are all familiar with the use of Armour thyroid but forget that other organs can be supported in the same way.

I like to use glands produced by Biotics Research Corporation for a few reasons. When appropriate, they use glandular tissues procured from animals one to three days old when they are in the height of their anabolic growth. As we age our thymus gland degenerates, involutes or gets smaller, both in size and function. Other organs age as well.

Beyond the anabolic growth factors, newborn animals have had minimal exposure to environmental toxins. Also, atrophy or tissue degeneration of the gland is absent in a young animal. The fatty infiltration and the accumulation of oxidative waste products, something we call lipofuscin, isn't observed in tissues from newborn calves.

Biotics has been working with neonatal glands for over 30 years. They process the glands "in house" and because the amount of fat in the gland is so small, they can use mild solvents from food extracts to remove it. Older animals have more fat in their glands and harsh solvents like hexane are often used to de-fat the glands. It's the fat that causes rancidity and makes the gland smell creating spoilage.

Adding neurolingual testing to traditional blood testing and then using optimal health values has come a long way. Reflexes have been discovered by other doctors as well. I know it takes time to do this type of testing but consider it, at least for your challenging patients. Individualized nutrition, based on effective laboratory and in-office testing is the coming trend. Patients see and ultimately feel the benefit.

Thanks for reading this week's edition of the Tuesday Minute. I'll see you next Tuesday.