

LIST OF THE FUNCTIONAL COMPLAINTS AND PHYSICAL CHANGES
OF THE IONIC CALCIUM DEFICIENCY SYNDROME

PLEASE NOTE:

The clinical findings marked with an astrix "*" are those which either the patient most commonly complains of or are most frequently found on physical examination.

The reader MUST realize that this table represents the entire list of the functional and physical findings which can arise for reason of the deficiency state. This syndrome which arises for reason of the direct effect of ionic calcium deficiency on tissues is only most rarely elicited in entirety. The presence of even only two or three of the more common findings, such as those marked with an astrix, "*", may be taken as positive evidence of the existance of the deficiency to a degree sufficient to also initiate autonomic stimulation of the adaptive function of one or more organ or tissues or of the cell, which is genetic mutant change. These functions may be broken down to create "mal-adaptive" disease. The mutant will give rise to malignancy.

For example the presence in Crohn's disease, rheumatoid arthritis, hypertension, chronic asthma, or cancer, of tenderness of skeletal muscle on pressure, the myoedemic nodule on percussion, a coated tongue, and an acid salivary pH is sufficient to incriminate these diseases as the product of an associated adaptive function attempting biochemical compensation for the ionic calcium deficiency state, or as a malignancy which arose from a mutant which was "tailor made" to survive and thrive in the melieu of deficiency.

SYSTEM INVOLVED	COMPLAINTS OR FUNCTIONAL STIGMA	SIGNS OR PHYSICAL FINDINGS	
TOTAL BODY	Chronic fatigue* cold intolerance	Fatigued appearance Pallor, cold hands ACID SALIVARY PH *	X
SKELETAL MUSCLE	Nocturnal calf cramps* Diurnal acheing and cramping of calves, thighs, chest, neck*, back* muscles.	Increased myotatic irritability 1) gross spasm 2) MYOEDEMA* 3) PAIN ON PALPATION of soleus*,trapezius*.	X

PLEASE NOTE:

THESE ARE THE MOST IMPORTANT PHYSICAL FINDINGS OF THE DEFICIENCY SYNDROME. THEIR PRESENCE EVEN IN AN ONLY MINOR SYMPTOMATIC PERSON CONSTITUTES WARNING THAT THE DEFICIENCY IS OF CONCENTRATION AS ADEQUATE TO EXCITE ORGAN ADAPTION TO THE DEFICIENCY WHICH HAS THE POTENTIAL OF CREATING "MAL-ADAPTIVE DISEASE".



DIAGRAMS SHOWING THE RELATIONSHIP OF CHRONIC DEFICIENCY OF CALCIUM WHICH HAS BEEN RENDERED BIOLOGICALLY ACTIVE BY THE D VITAMINS, TO THE COMPLAINTS AND PHYSICAL SIGNS OF A DEFICIENCY SYNDROME, INCLUDING ACIDITY OF SALIVA, TO ORGAN RELATED DISEASES, AND TO CELL RELATED CANCER.

DIAGRAM #1:

THE
DIRECT
NON-
ADAPTING
EFFECTS
ON TISSUES
CREATING
COMPLAINTS
AND SIGNS

with or
without

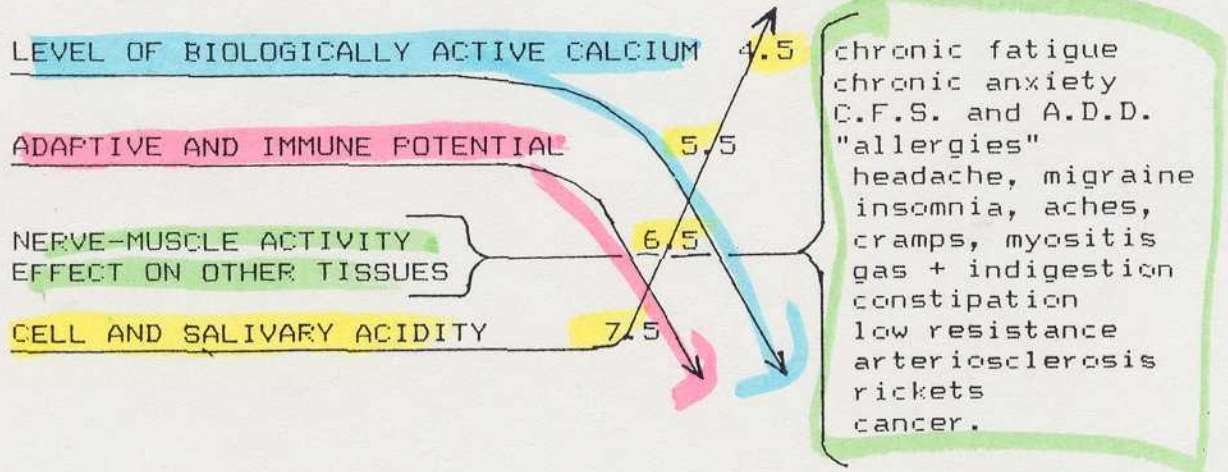
THE
DIRECT
ADAPTING
EFFECT
ON CELLS
CREATING
MALIGNANT
MUTATION

with or
without

DIAGRAM #2

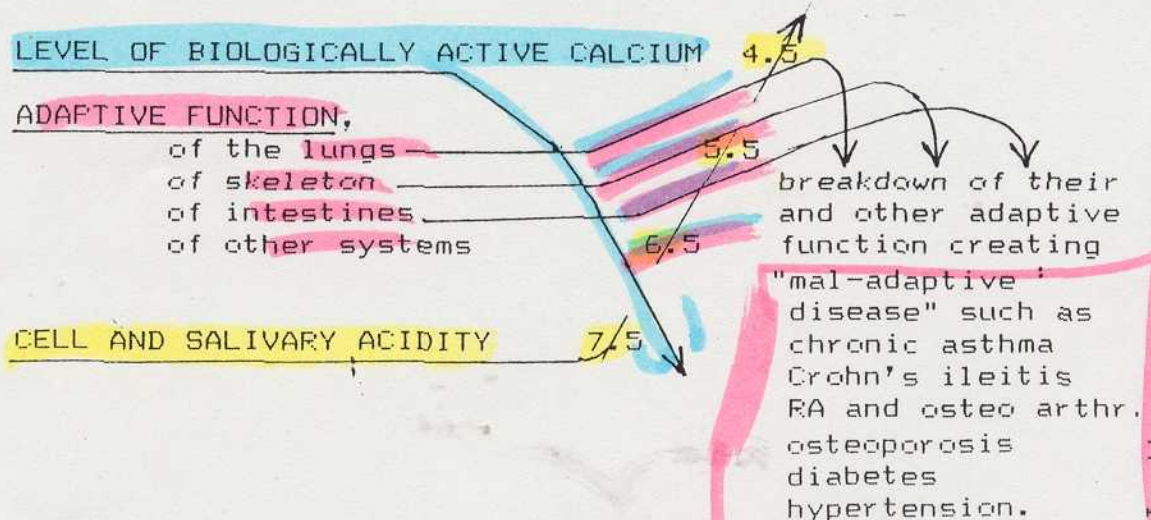
THE
INDIRECT
AUTONOMIC
EFFECT
ON ORGANS
WITH
ADAPTIVE
FUNCTION
CREATING
"MAL-ADAPTIVE"
ORGAN
DISEASE

The direct effect of "cell energy starvation" creating:
i) C.N.S. symptoms of central and peripheral anxiety-tension
ii) skeletal and smooth muscle spastic complaints,
iii) alteration in secretory tissue function, and
iv) physical signs of muscle, finger nails and tongue..



While the following diseases represent the breakdown of adaption of organs to the deficiency, cancer represents mutation maladaptation of a single cell to the same deficiency.

Through autonomic control the deficiency may excite the ancillary adaptive function of one or more organs to increase total body acidity thus facilitating the hyper-ionization of cellular calcium and effecting biochemical compensation for the deficiency and the starvation. Those functions may break down to create a disease and the influence of the acidifying functions will be reflected on the pH of saliva.



COMPLAINTS and PHYSICAL SIGNS + or - CANCER + or - DISEASES

In the same patient:

ADAPTIVE AND NON ADAPTIVE IONIC CALCIUM DEFICIENCY DISEASES

The ionic calcium deficiency diseases are of two major types, the "direct" arising for reason of the direct influence which deficiency of the ion has on muscle, nerve and other tissues, and the "indirect" which arise because of adaptive autonomic nervous stimulation of an organ. In the latter instance disease arises because the asymptomatic adaptive function attempting biochemical compensation for the deficiency state was broken down by the persisting deficiency that exhausted the function, and because of the added direct effect of the deficiency on the secretory, nerve and muscle tissues of the adapting organ.

Other factors, such as genetic change, other deficiencies and excesses and a combination of these factors may play an important secondary role in the excitation of these diseases. Therefore, these many other different factors may dictate which tissue or organ is to be affected by the underlying deficiency to produce a variety of deficiency diseases. Moreover, the treatment of one of these secondary factors may induce moderate resolution of the disease in many cases while the primary cause of ionic calcium deficiency is untreated. Despite such resolution one must not ignore the indications of the existence of an underlying ionic calcium deficiency state.

NOTE!
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(1) THE "DIRECT" ADAPTIVE DISEASES

<u>DISEASE</u>	<u>ORGAN</u>	<u>PRIMARY FUNCTION</u>	<u>ADAPTIVE FUNCTION</u>
(A) OF MUTATION			
cancer	a cell	varied function	adaptive mutation

(2) THE "DIRECT" NON ADAPTIVE DISEASES

<u>DISEASE</u>	<u>ORGAN</u>	<u>PRIMARY FUNCTION</u>	<u>ADAPTIVE FUNCTION</u>
(A) THE SPASTIC TUBE AND VESSEL DISEASES			
constipation	colon	fecal storage	none
enuresis	bladder	urine storage	"
dysmenorrhea	uterus	reproduction	"
migraine	cerebral artery	cerebral circulation	"
(B) THE SKELETAL MUSCLE DISEASES			
chronic myositis	muscle	motion	"

QUESTIONABLE!

(C) BRAIN AND NERVE TISSUE DEGENERATIONS

Alzheimer's	cortex	mental function	none " "
Parkinson's	lenticular	coordination	
Lou Gherigs	nerve tract	stimuli conduct	

(D) FUNCTIONAL DEFECTS OF THE ABOVE

hyperactivity, learning disability, anxiety, depression, anti social behavior, drug addiction none

(E) THE IMMUNE PLUS ADAPTIVE SYSTEMS

AIDS	internal secretory tissue	immunity plus adaption	"
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(3) THE "INDIRECT" ADAPTIVE DISEASES

<u>DISEASE</u>	<u>ORGAN</u>	<u>PRIMARY FUNCTION</u>	<u>ADAPTIVE FUNCTION</u>
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(A) THE SPASTIC TUBE AND VESSEL DISEASES

peptic ulceration	stomach	digestion	Increased HCl secretion lowering of systemic pH
forms of ileitis-colitis	ileum and colon	"	Incr'd production + rapid passage of alkaline int. secretions. Lowering of systemic pH
chronic asthma	bronchial tubes	respiration	Retention of CO ₂ with lowering of systemic pH
coronary artery thrombosis	heart	coronary circulation	control of cardiac circl'n and cardiac plus total body function
hyper-tension	systemic arteries	systemic circulation	Hydrostatic kinetic energy transduced to chemical change of Ca ⁺⁺ ionization

(B) THE METABOLIC DISEASES

diabetes	pancreas and target cells	CHO metab-olism	Prod'n of organic acids ionization of Ca ⁺⁺ by lowering of systemic pH
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(C) THE SKELETAL DISEASES

osteo arthritis rheumatoid arth. osteoporosis	bone	support	Slow or rapid calcium loss by by hormone or enzyme action
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