
Diabetes, Extreme Fatigue, Recent Loss of Vision, Digestive Problems, Recurrent Sinus Infections

Patient DM 5586, a 59 year old female, presented on 9/11/97

All natural therapy, no drugs were used!!!

January 14, 1998: 4 months on the program

- **Hemoglobin A1C reduced from 13.7 down to 6.3**
- **Glucose dropped from 353 down to 99.**
- **Triglycerides dropped from 633 down to 207.**
- She was very adamant about not doing any medical treatment or therapy.
- She had to stick very carefully to the natural program we designed.
- **Vision almost back to normal**
- Sinus infections are gone
- Digestion is normal.
- Energy is greatly increased.

****I must recommend that if you are diabetic you have to test yourself regularly. If you are taking insulin, you cannot just suddenly stop taking it.**

One thing is very important. If you have not taken insulin, even if your glucose and hemoglobin A1C are very high, it is my experience that you have a much better chance of not needing insulin if you are willing to do what it takes. Once you start taking insulin, your body changes and it is more difficult to get you well than if you have never taken it.

FIRST REPORT

PATIENT: DM

DATE OF BLOOD TEST: 9/11/97

DATE OF ANALYSIS: 9/12/97

SEX: Female

WEIGHT: 180

AGE: 59

BLOODTYPE: B

Presenting symptoms: Symptoms of fatigue; very high glucose in the urine, traces of ketones and leukocytes in the urine.

Tests Performed: Comprehensive 52-point Blood Test; Tissue Mineral Analysis (Hair Analysis); Urinalysis

Test Findings: High Glucose, High Hemoglobin A1C, High Ferritin, High Cholesterol, High Triglycerides, Low Thyroid, High ESR.

This analysis and the recommendations are not for the purpose of treating or curing disease, i.e.: cancer, hepatitis, arthritis, diabetes, M.S., heart disease, etc. The purpose for this nutrition and lifestyle program is to create an optimum environment in which your body can heal and cure itself by eliminating foods and toxins which adversely affect the body and to provide nutrients that the body may lack.

Concerning the actual blood test results: There is a clinical and a homeostatic range. The clinical range is a wide range and test values outside of this range indicate a disease process. The homeostatic range is a more normal or healthy range and test values need to be within this range for one to have optimum health.

The coronary risk assessment is above average at 6.83. This is concerning the total cholesterol which is high at 205 and the HDL cholesterol which is low at 30. The coronary risk is determined by taking the total cholesterol and dividing it by the HDL. I recommend a coronary risk value below 4 to avoid cardiovascular problems. The total cholesterol is determined by adding the HDL, LDL, and VLDL cholesterol's together. The HDL cholesterol is the good type of cholesterol to have as it tends to keep the arteries clear. It would be good if this value were high. Recent studies have shown a correlation between a high HDL level and longevity. Unfortunately, the first sign for a high cardiovascular risk is sudden death. So, you can be feeling well and still have a severe cardiovascular risk. I recommend Chromium at 1,200mcg/day.

Further cardiovascular considerations: platelet counts of this magnitude have shown an increased risk for cardiac disease with two times the risk for coronary thrombus. The platelets tend to clump together to form blood clots. For a high platelet count, I recommend Vitamin E at 800I.U./day.

The T4, T3, and T7 indicates a low functioning thyroid. This means your metabolism is going to be slow. The thyroid gland controls your basal metabolic rate. This is the rate at which your body heals and repairs itself. It also, determines how fast chemical reactions occur in the body. With a low-functioning thyroid, your immune system is going to be low, your digestion is going to be slow and your energy level will be low. It is difficult to have a good cholesterol level with a low thyroid. Basically, it is impossible to be healthy and have good energy with a low-functioning thyroid. Large amounts of cauliflower, sauer kraut and asparagus do lower thyroid function. So, do not eat these foods everyday. Interestingly, most cancers are seen in people with a low-functioning thyroid. For this, I am going to recommend Tyrosine at 1,500mg/day.

The hemoglobin A1C is at 13.7. The range is 3.4 - 6.1. The glucose is at 353 and this needs to be below 100. This means you are diabetic. Some doctors will put you on insulin, but I believe if you follow this program that in just a couple of weeks this should come down. Also, follow the diabetic diet and utilize Vitamin C at 4,000mg/day, Zinc at 50mg/day, and Magnesium at 400mg/day. Most of the other nutrients I already recommended will help this problem too. Your triglycerides are high and this is commonly seen in patients with Diabetes.

The ferritin level is high at 260. Ferritin will put extra stress on the liver, heart, lungs, and kidneys. I recommend reducing red meat intake and to donate blood next week to help get the ferritin out of the system.

Dietary Recommendations:

Below is a list of foods and items to be strictly avoided and those that are strongly recommended to avoid. **READ YOUR LABELS!!** Read labels as if your life depended on it. You would be surprised what is put in some of the popular pre-packaged foods on the market. Later in the report, you will find exchanges for these foods and helpful hints on implementing your new lifestyle.

Absolutely/Permanently Avoid:

1. Artificial Sweeteners (aspartame; saccharin; etc)
2. Processed Meats (nitrate/nitrite foods; bologna; wieners; any luncheon meat w/additives or preservatives)
3. MSG
4. All Canned Foods and Drinks

Strongly Recommended to Avoid:

1. Caffeinated and De-Caffeinated Products
2. Fried Foods
3. Sodas
4. Hydrogenated Fats (margarine, most pre-packaged foods and dressings, etc)
5. Refined Carbohydrates (processed foods: white sugar, white flour, "unbleached or unbrominated" foods; corn syrup; "enriched" foods, etc)
6. Dairy Products (anything made with Cow's milk)
7. Alcohol
8. Preservatives, additives, artificial colors, FD&C colors and dyes
9. Commercial Meats (any meat with antibiotics, steroids, and other preservatives)

Diabetic Recommendations:

(these recommendations are for you diabetic condition and should be followed closely)

1. Avoid all fruit juices.
2. Eat only one fruit and at least four fresh vegetables.
3. Eat a snack every hour and a half to two hours. (Eat by the clock. This is going to help take stress off your liver and help to maintain your glucose at a good level so it doesn't fluctuate so greatly.)
4. The snack should be 4 to 5 bites of a complex carbohydrate, protein or foods that have good fats in them such as: whole grain bread, sunflower seeds, pumpkin seeds, nuts, carrots or even a piece of chicken would be fine to eat.
5. Do this for at least the next two months or until your re-evaluation.

Exercise at least 40 minutes a day. I realize at first that you may not have the energy to do that. If you can only exercise 10 minutes twice a day or three times a day, start slow and build yourself up. I would also like you to do a muscle building exercise (step exercise) 10 minutes a day. Drink 8-10 twelve ounce glasses of water per day.

This is a serious problem that needs to be taken care of. I recommend another urinalysis next Friday. This is an easy test to see the glucose level.

A word of caution - anytime you make drastic changes in diet, vitamin intake, or exercise, realize that you, may feel somewhat worse before you feel better. It doesn't happen often, but as your body detoxifies, you may feel worse if it occurs too fast. If you do feel worse, don't panic, it will pass in probably 2-3 days. If this problem does occur, I recommend that you take half of what I recommend for three days and slowly over two weeks progress to taking the complete program.

DM, everything that I have recommended is very important and many of these things work together to get you healthier. It is important that you follow the program exactly as I have outlined so that you can get the expected results. Following the diet may not be easy, but if you don't make the dietary changes, you will not get the expected results. Likewise, if you don't take the vitamins, or only take part of them, again you will not see the expected results. Basically, if you don't make these changes, how can you expect to see results? I would rather you not do the program than only do part of it. I know that it is hard, but it is only for a short time. I have helped a lot of people with some very serious problems. The purpose of this analysis is to benefit you. This is for your well being, so please do the program exactly how I have recommended so that you will achieve the best results.

Attached is a list of vitamins that have been carefully selected for your specific problems. I recommend these vitamins because they are of the highest quality. The years of experience in my practice have shown these vitamins, along with your dietary changes, to be the best in helping you achieve the necessary improvements as indicated by your blood test results.

Please keep this report for future reference and bring it with you to your next evaluation.

If we can be of any further assistance to you or your family please do not hesitate to ask. You can contact our office or online at www.Bk2Health.com.

This program is designed for a period of two months. At the end of this time a retest is desired to determine progress made. A retest on the glucose level is indicated in two weeks.

Yours in good health,

Van D. Merkle, D.C., D.A.C.B.N., C.C.N.
VDM/lm

Test Description	Current Result	Current Rating	Prior Result	Delta	Homeostatic		Clinical		Units
Date	09/11/97								
Glucose	353.00	HI	0.00		85.00	- 100.00	65.00	- 110.00	mg/dl
Hemoglobin A1C(Gly-Hgh)	13.70	HI	0.00		4.00	- 5.40	3.40	- 6.10	%
Uric Acid	3.40	lo	0.00		4.00	- 6.00	2.50	- 8.00	mg/dl
Blood Urea Nitrogen (BUN)	14.00	Opt	0.00		13.00	- 18.00	10.00	- 20.00	mg/dl
Creatinine	0.60	Opt	0.00		0.60	- 1.00	0.50	- 1.50	mg/dl
BUN / Creatinine Ratio	23.33	HI	0.00		13.00	- 17.00	7.50	- 18.50	ratio
Sodium	131.00	LO	0.00		140.00	- 144.00	138.00	- 146.00	meq/dl
Potassium	5.20	hi	0.00		4.00	- 4.60	3.50	- 5.50	meq/dl
Chloride	93.00	LO	0.00		100.00	- 106.00	96.00	- 110.00	meq/dl
Magnesium	1.80	lo	0.00		2.20	- 2.60	1.70	- 2.40	mg/dl
Calcium	9.30	lo	0.00		9.70	- 10.10	8.60	- 10.70	mg/dl
Phosphorus	4.30	hi	0.00		3.40	- 4.00	2.40	- 4.60	mg/dl
Calcium / Albumin Ratio	2.35	Opt	#DIV/0!		2.20	- 2.50	2.03	- 2.71	ratio
Usable Calcium	9.30	Opt	0.00		7.90	- 10.10	7.00	- 10.11	
Calcium-Phosphorus Index	46.23	HI	0.00		30.00	- 40.00	20.00	- 40.20	ratio
Total Protein	7.20	Opt	0.00		7.10	- 7.60	6.00	- 8.00	gm/dl
Albumin	3.95	lo	0.00		4.00	- 4.50	3.50	- 5.00	gm/dl
Globulin	3.10	Opt	0.00		2.80	- 3.50	1.90	- 3.70	gm/dl
A / G Ratio	1.27	Opt	0.00		1.20	- 1.60	1.10	- 2.30	ratio
Total Bilirubin	0.80	hi	0.00		0.50	- 0.70	0.20	- 1.00	mg/dl
Alkaline Phospatase	112.00	hi	0.00		60.00	- 80.00	41.00	- 138.00	mu/ml
LDH	133.00	Opt	0.00		120.00	- 160.00	100.00	- 225.00	mu/ml
SGOT (AST)	14.00	lo	0.00		18.00	- 26.00	0.00	- 40.00	mu/ml
SGPT (ALT)	21.00	Opt	0.00		18.00	- 26.00	0.00	- 47.00	mu/ml
GGT	36.00	Opt	0.00		1.00	- 36.00	0.00	- 65.00	mu/ml
Serium Iron	119.64	Opt	0.00		85.00	- 120.00	50.00	- 180.00	mcg/dl
Ferritin	260.00	hi	0.00		25.00	- 225.00	10.00	- 325.00	ng/ml
Cholesterol	205.00	HI	0.00		150.00	- 180.00	140.00	- 200.00	mg/dl
Triglyceride	633.00	HI	0.00		80.00	- 115.00	10.00	- 195.00	mg/dl
HDL Cholesterol	30.00	LO	0.00		55.00	- 120.00	35.00	- 55.00	mg/dl
Total Cholesterol / HDL Ratio	6.80	HI	0.00		0.00	- 4.00	0.00	- 5.00	ratio
T4	6.70	lo	0.00		7.00	- 9.00	5.50	- 13.00	mcg/dl
T3	30.00	LO	0.00		36.00	- 40.00	32.00	- 43.00	%
T7	2.01	LO	0.00		2.60	- 3.60	2.10	- 4.70	
White Blood Count	6.90	Opt	0.00		5.00	- 8.00	4.80	- 10.80	k/cumm
Red Blood Count	4.85	Opt	0.00		4.50	- 5.50	4.50	- 5.50	m/cumm
Hemoglobin	14.20	Opt	0.00		14.00	- 15.00	12.00	- 16.00	gm/dl
Hematocrit	41.80	Opt	0.00		40.00	- 47.00	37.00	- 47.00	%
MCV	86.00	Opt	0.00		85.00	- 97.00	82.00	- 99.00	cu.m
MCH	29.30	Opt	0.00		27.00	- 31.00	27.50	- 32.50	pg
MCHC	34.00	Opt	0.00		32.00	- 34.00	32.00	- 36.00	%
Platelets	271.00	hi	0.00		175.00	- 250.00	150.00	- 450.00	k/cumm
Polys (SEGS-PMNS)	59.00	Opt	0.00		55.00	- 65.00	50.00	- 70.00	%
Lymphocytes	29.00	Opt	0.00		25.00	- 40.00	20.00	- 40.00	%
Monocytes	6.00	Opt	0.00		3.00	- 7.00	1.00	- 8.50	%
Eosinophils	5.00	hi	0.00		0.00	- 4.00	1.00	- 5.00	%
Basophils	1.00	hi	0.00		0.00	- 0.00	0.00	- 1.00	%
Erythrocytes Sed Rate ESR	14.00	HI	0.00		0.00	- 8.00	0.00	- 9.00	mm/HR
CRP C-Reactive Protein	0.00		0.00		0.00	- 0.00	0.49	- 0.51	mg /L
Creatine Kinase	28.00	LO	0.00		67.50	- 103.50	54.00	- 186.00	u/l

Personal Vitamin and Supplement Program for DM 5586					
Vitamin or Supplement	Dosage Per Unit	AM	Noon	PM	Bed
Vitamin C (Ascocid 1000)	1000 mg.	2	1	1	
Chromium Picolinate w/ boron	200 mcg.	2	2	2	
Vitamin E-400 w/ selenium	400 I.U.	1		1	
Magnesium Glycinate	100 mg.	2	1	1	
Tyrosine	500 mg.	1	1	1	
Zinc	50 mg.	1			

*NOTE: TO SEE A COMPLETE LIST OF NUTRIENTS IN EACH SUPPLEMENT, GO TO THE *VITAMIN LIST*
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END OF FIRST REPORT

SECOND REPORT

PATIENT: DM

DATE OF BLOOD TEST: 11/11/97

DATE OF ANALYSIS: 11/14/97

DATE OF PREVIOUS TFST(S): 9/11/97

SEX: Female

WEIGHT: 180

AGE: 60

BLOOD TYPE: B

Presenting Symptoms: fatigue; very high glucose in the urine; traces of ketones and leukocytes in urine.

Previous Test Findings: High Glucose; High Hemoglobin A1C; High Ferritin; High Cholesterol; High Triglycerides; Low Thyroid; High ESR

Current Test Findings: High Glucose; High Hemoglobin A1C; Low Thyroid; Inflammatory Process or Infection

This analysis and the recommendations are not for the purpose of treating or curing disease, i.e.: cancer, hepatitis, arthritis, diabetes, M.S., heart disease, etc. The purpose for this nutrition and lifestyle program is to create an optimum environment in which your body can heal and repair itself by eliminating foods and toxins which adversely affect the body and to provide nutrients that the body may lack.

Good Job, DM!! Your glucose has gone from 353 down to 232. Your Hemoglobin A1C was at 13.70 and is now at 9.70. Very good improvement. You are not out of the woods yet. This is still a serious problem. But, you are headed in the right direction.

I see many other areas of improvement. In fact, I see 17 values are better and only 10 are worse. The ones that are worse are associated with that infection you appear to be having. Your sed rate is quite high at 57 and your white blood count is a little high. For this, I want you to take Vitamin C at 4000mg/day, Beta Carotene at 100,000IU/day, Garlic at 6/day, and Echinacea in a product called Herbal Defense at 6/day (take this for 2 weeks and off for 2 weeks and back on for 2 weeks).

Your thyroid is still low. I want you to continue with Tyrosine but increase it to 2000mg/day. Continue with your Chromium Picolinate at 6/day, Vitamin E at 800IU/day, Zinc at 50mg/day, and Magnesium at 400mg/day. I would like for you to take one other vitamin. It is called Vandyl Sulfate and take this at 200mg/day. This is also, very good for diabetes.

When you come in, I would like for you to do another Urinalysis. I want to see if you are still spilling any glucose in the urine. But, I can see that you have made some good progress. I would hope that you are feeling better as well. Keep up the good work!!

Please keep this report for future reference.

A re-test of the glucose, hemoglobin A1C, and sed rate is desired in 2 months.

If we can be of any further assistance to you or your family please do not hesitate to ask. You can contact our office or online at www.Bk2Health.com.

Test Description	Current Result	Current Rating	Prior Result	Delta	Homeostatic		Clinical		Units
Date	11/11/97								
Glucose	232.00	HI	0.00		85.00	- 100.00	65.00	- 110.00	mg/dl
Hemoglobin A1C(Gly-Hgh)	9.70	HI	0.00		4.00	- 5.40	3.40	- 6.10	%
Uric Acid	4.90	Opt	0.00		4.00	- 6.00	2.50	- 8.00	mg/dl
Blood Urea Nitrogen (BUN)	16.00	Opt	0.00		13.00	- 18.00	10.00	- 20.00	mg/dl
Creatinine	0.70	Opt	0.00		0.60	- 1.00	0.50	- 1.50	mg/dl
BUN / Creatinine Ratio	22.86	HI	0.00		13.00	- 17.00	7.50	- 18.50	ratio
Sodium	138.00	lo	0.00		140.00	- 144.00	138.00	- 146.00	meq/dl
Potassium	4.50	Opt	0.00		4.00	- 4.60	3.50	- 5.50	meq/dl
Chloride	98.00	lo	0.00		100.00	- 106.00	96.00	- 110.00	meq/dl
Magnesium	2.10	lo	0.00		2.20	- 2.60	1.70	- 2.40	mg/dl
Calcium	9.60	lo	0.00		9.70	- 10.10	8.60	- 10.70	mg/dl
Phosphorus	4.80	HI	0.00		3.40	- 4.00	2.40	- 4.60	mg/dl
Calcium / Albumin Ratio	2.43	Opt	#DIV/0!		2.20	- 2.50	2.03	- 2.71	ratio
Usable Calcium	9.60	Opt	0.00		7.90	- 10.10	7.00	- 10.11	
Calcium-Phosphorus Index	57.60	HI	0.00		30.00	- 40.00	20.00	- 40.20	ratio
Total Protein	7.60	Opt	0.00		7.10	- 7.60	6.00	- 8.00	gm/dl
Albumin	3.95	lo	0.00		4.00	- 4.50	3.50	- 5.00	gm/dl
Globulin	3.50	Opt	0.00		2.80	- 3.50	1.90	- 3.70	gm/dl
A / G Ratio	1.13	lo	0.00		1.20	- 1.60	1.10	- 2.30	ratio
Total Bilirubin	0.60	Opt	0.00		0.50	- 0.70	0.20	- 1.00	mg/dl
Alkaline Phospatase	104.00	hi	0.00		60.00	- 80.00	41.00	- 138.00	mu/ml
LDH	116.00	lo	0.00		120.00	- 160.00	100.00	- 225.00	mu/ml
SGOT (AST)	10.00	lo	0.00		18.00	- 26.00	0.00	- 40.00	mu/ml
SGPT (ALT)	15.00	lo	0.00		18.00	- 26.00	0.00	- 47.00	mu/ml
GGT	23.00	Opt	0.00		1.00	- 36.00	0.00	- 65.00	mu/ml
Serium Iron	55.57	lo	0.00		85.00	- 120.00	50.00	- 180.00	mcg/dl
Ferritin	161.00	Opt	0.00		25.00	- 225.00	10.00	- 325.00	ng/ml
Cholesterol	175.00	Opt	0.00		150.00	- 180.00	140.00	- 200.00	mg/dl
Triglyceride	250.00	HI	0.00		80.00	- 115.00	10.00	- 195.00	mg/dl
HDL Cholesterol	26.00	LO	0.00		55.00	- 120.00	35.00	- 55.00	mg/dl
LDL Cholesterol	96.00	Opt	0.00		50.00	- 110.00	65.00	- 130.00	mg/dl
VLDL	50.00	HI	0.00		5.00	- 20.00	5.00	- 40.00	mg/dl
Total Cholesterol / HDL Ratio	6.60	HI	0.00		0.00	- 4.00	0.00	- 5.00	ratio
T4	9.30	hi	0.00		7.00	- 9.00	5.50	- 13.00	mcg/dl
T3	30.00	LO	0.00		36.00	- 40.00	32.00	- 43.00	%
T7	2.79	Opt	0.00		2.60	- 3.60	2.10	- 4.70	
White Blood Count	8.60	hi	0.00		5.00	- 8.00	4.80	- 10.80	k/cumm
Red Blood Count	4.54	Opt	0.00		4.50	- 5.50	4.50	- 5.50	m/cumm
Hemoglobin	13.00	lo	0.00		14.00	- 15.00	12.00	- 16.00	gm/dl
Hematocrit	39.10	lo	0.00		40.00	- 47.00	37.00	- 47.00	%
MCV	86.00	Opt	0.00		85.00	- 97.00	82.00	- 99.00	cu.m
MCH	28.60	Opt	0.00		27.00	- 31.00	27.50	- 32.50	pg
MCHC	33.20	Opt	0.00		32.00	- 34.00	32.00	- 36.00	%
Platelets	303.00	hi	0.00		175.00	- 250.00	150.00	- 450.00	k/cumm
Polys (SEGS-PMNS)	54.00	lo	0.00		55.00	- 65.00	50.00	- 70.00	%
Lymphocytes	33.00	Opt	0.00		25.00	- 40.00	20.00	- 40.00	%
Monocytes	7.00	Opt	0.00		3.00	- 7.00	1.00	- 8.50	%
Eosinophils	5.00	hi	0.00		0.00	- 4.00	1.00	- 5.00	%
Basophils	1.00	hi	0.00		0.00	- 0.00	0.00	- 1.00	%
Erythrocytes Sed Rate ESR	57.00	HI	0.00		0.00	- 8.00	0.00	- 9.00	mm/HR
CRP C-Reactive Protein	0.00		0.00		0.00	- 0.00	0.49	- 0.51	mg /L
Creatine Kinase	35.00	LO	0.00		67.50	- 103.50	54.00	- 186.00	u/l

Personal Vitamin and Supplement Program for DM 5586					
Vitamin or Supplement	Dosage Per Unit	AM	Noon	PM	Bed
Beta Carotene (A-Caro)	25000 I.U.	2		2	
Vitamin C (Ascocid 1000)	1000 mg.	2		2	
Chromium Picolinate w/ boron	200 mcg.	2	2	2	
Vitamin E-400 w/ selenium	400 I.U.	1		1	
Garlic	345 mg.	2	2	2	
Herbal Defense Complex	1	2	2	2	
Magnesium Glycinate	100 mg.	2		2	
Tyrosine	500 mg.	2		2	
Vandyl Sulfate	50 mg.	2		2	
Zinc	50 mg.	1			

*NOTE: TO SEE A COMPLETE LIST OF NUTRIENTS IN EACH SUPPLEMENT, GO TO THE *VITAMIN LIST*.

END OF SECOND REPORT

THIRD REPORT

PATIENT: DM

DATE OF BLOOD TEST: 3/12/98

DATE OF ANALYSIS: 3/19/98'

DATE .OF PREVIOUS TEST(S): 9/11/97; 11/11/97; 1/14/98

SEX: Female

WEIGHT: 180

AGE: 60

BLOOD TYPE: B

Current Presenting Symptoms: fatigue; very high glucose in urine; traces of ketones and leukocytes in urine.

Previous Test Findings: High Glucose; High Hemoglobin A1C.

Current Test Findings: High Hemoglobin A1C; High Glucose; High Cholesterol; High ESR; Low Red Blood Count.

This analysis and the recommendations are not for the purpose of treating or curing disease, i.e.: cancer, hepatitis, arthritis, diabetes, M.S., heart disease, etc. The purpose for this nutrition and lifestyle program is to create an optimum environment in which your body can heal and repair itself by eliminating foods and toxins which adversely affect the body and to provide nutrients that the body may lack.

Good Job, DM!! This is tremendous. I see your Hemoglobin A1C is down to 6.8!! Your cholesterol is at 220. However, I'm not too worried about this. Your HDL cholesterol is low at 34. We do need to raise this up. The Chromium, exercise and lots of vegetables will help with that.

Your ESR is still right at 13. Your body is still fighting an infection. Overall, I am really pleased with this blood work. Especially, your glucose and hemoglobin A1C. I would say keep doing what you are doing. The vitamins and diet are working. Continue with your Vitamin C, Beta Carotene, Garlic, Tyrosine, Chromium, Vitamin E, Zinc, Magnesium, and Vandyl Sulfate as before.

Please keep this report for future reference. A re-test is desired in 6 months. If we can be of any further assistance to you or your family please do not hesitate to ask. You can contact our office or online at www.Bk2Health.com.

Yours in good health,

Van D. Merkle, D.C., D.A.C.B.N., C.C.N.
VDM/tcm

Test Description	Current Result	Current Rating	Prior Result	Delta	Homeostatic		Clinical		Units
Date	03/12/98								
Glucose	140.00	HI	0.00		85.00	- 100.00	65.00	- 110.00	mg/dl
Hemoglobin A1C(Gly-Hgh)	6.80	HI	0.00		4.00	- 5.40	3.40	- 6.10	%
Uric Acid	4.90	Opt	0.00		4.00	- 6.00	2.50	- 8.00	mg/dl
Blood Urea Nitrogen (BUN)	7.00	LO	0.00		13.00	- 18.00	10.00	- 20.00	mg/dl
Creatinine	0.50	lo	0.00		0.60	- 1.00	0.50	- 1.50	mg/dl
BUN / Creatinine Ratio	14.00	Opt	0.00		13.00	- 17.00	7.50	- 18.50	ratio
Sodium	142.00	Opt	0.00		140.00	- 144.00	138.00	- 146.00	meq/dl
Potassium	4.00	Opt	0.00		4.00	- 4.60	3.50	- 5.50	meq/dl
Chloride	107.00	hi	0.00		100.00	- 106.00	96.00	- 110.00	meq/dl
Magnesium	1.90	lo	0.00		2.20	- 2.60	1.70	- 2.40	mg/dl
Calcium	9.10	lo	0.00		9.70	- 10.10	8.60	- 10.70	mg/dl
Phosphorus	3.40	Opt	0.00		3.40	- 4.00	2.40	- 4.60	mg/dl
Calcium / Albumin Ratio	2.22	Opt	#DIV/0!		2.20	- 2.50	2.03	- 2.71	ratio
Usable Calcium	8.50	Opt	0.00		7.90	- 10.10	7.00	- 10.11	
Calcium-Phosphorus Index	28.90	lo	0.00		30.00	- 40.00	20.00	- 40.20	ratio
Total Protein	7.20	Opt	0.00		7.10	- 7.60	6.00	- 8.00	gm/dl
Albumin	4.10	Opt	0.00		4.00	- 4.50	3.50	- 5.00	gm/dl
Globulin	3.10	Opt	0.00		2.80	- 3.50	1.90	- 3.70	gm/dl
A / G Ratio	1.32	Opt	0.00		1.20	- 1.60	1.10	- 2.30	ratio
Total Bilirubin	0.60	Opt	0.00		0.50	- 0.70	0.20	- 1.00	mg/dl
Alkaline Phospatase	76.00	Opt	0.00		60.00	- 80.00	41.00	- 138.00	mu/ml
LDH	123.00	Opt	0.00		120.00	- 160.00	100.00	- 225.00	mu/ml
SGOT (AST)	11.00	lo	0.00		18.00	- 26.00	0.00	- 40.00	mu/ml
SGPT (ALT)	11.00	lo	0.00		18.00	- 26.00	0.00	- 47.00	mu/ml
GGT	19.00	Opt	0.00		1.00	- 36.00	0.00	- 65.00	mu/ml
Serium Iron	89.00	Opt	0.00		85.00	- 120.00	50.00	- 180.00	mcg/dl
Ferritin	194.00	Opt	0.00		25.00	- 225.00	10.00	- 325.00	ng/ml
Cholesterol	220.00	HI	0.00		150.00	- 180.00	140.00	- 200.00	mg/dl
Triglyceride	184.00	hi	0.00		80.00	- 115.00	10.00	- 195.00	mg/dl
HDL Cholesterol	34.00	LO	0.00		55.00	- 120.00	35.00	- 55.00	mg/dl
LDL Cholesterol	149.00	HI	0.00		50.00	- 110.00	65.00	- 130.00	mg/dl
VLDL	36.00	hi	0.00		5.00	- 20.00	5.00	- 40.00	mg/dl
Total Cholesterol / HDL Ratio	6.40	HI	0.00		0.00	- 4.00	0.00	- 5.00	ratio
T4	10.10	hi	0.00		7.00	- 9.00	5.50	- 13.00	mcg/dl
T3	34.93	lo	0.00		36.00	- 40.00	32.00	- 43.00	%
T7	3.53	Opt	0.00		2.60	- 3.60	2.10	- 4.70	
White Blood Count	6.80	Opt	0.00		5.00	- 8.00	4.80	- 10.80	k/cumm
Red Blood Count	4.27	LO	0.00		4.50	- 5.50	4.50	- 5.50	m/cumm
Hemoglobin	12.40	lo	0.00		14.00	- 15.00	12.00	- 16.00	gm/dl
Hematocrit	36.00	LO	0.00		40.00	- 47.00	37.00	- 47.00	%
MCV	84.00	lo	0.00		85.00	- 97.00	82.00	- 99.00	cu.m
MCH	29.10	Opt	0.00		27.00	- 31.00	27.50	- 32.50	pg
MCHC	34.60	hi	0.00		32.00	- 34.00	32.00	- 36.00	%
Platelets	298.00	hi	0.00		175.00	- 250.00	150.00	- 450.00	k/cumm
Polys (SEGS-PMNS)	53.00	lo	0.00		55.00	- 65.00	50.00	- 70.00	%
Lymphocytes	35.00	Opt	0.00		25.00	- 40.00	20.00	- 40.00	%
Monocytes	8.00	hi	0.00		3.00	- 7.00	1.00	- 8.50	%
Eosinophils	4.00	Opt	0.00		0.00	- 4.00	1.00	- 5.00	%
Basophils	0.00		0.00		0.00	- 0.00	0.00	- 1.00	%
Erythrocytes Sed Rate ESR	13.00	HI	0.00		0.00	- 8.00	0.00	- 9.00	mm/HR
CRP C-Reactive Protein	0.00		0.00		0.00	- 0.00	0.49	- 0.51	mg /L
Creatine Kinase	38.00	LO	0.00		67.50	- 103.50	54.00	- 186.00	u/l

Personal Vitamin and Supplement Program

for DM 5586

Vitamin or Supplement	Dosage Per Unit	AM	Noon	PM	Bed
Beta Carotene (A-Caro)	25000 I.U.	2		2	
Vitamin C (Ascocid 1000)	1000 mg.	2		2	
Chromium Picolinate w/ boron	200 mcg.	2	2	2	
Vitamin E-400 w/ selenium	400 I.U.	1		1	
Garlic	345 mg.	2	2	2	
Herbal Defense Complex	1	2	2	2	
Magnesium Glycinate	100 mg.	2		2	
Tyrosine	500 mg.	2		2	
Vandyl Sulfate	50 mg.	2		2	
Zinc	50 mg.	1			

*NOTE: TO SEE A COMPLETE LIST OF NUTRIENTS IN EACH SUPPLEMENT, GO TO THE *VITAMIN LIST*.

END OF REPORT

FOURTH REPORT

PATIENT: DM

DATE OF BLOOD TEST: 9/23/98

DATE OF ANALYSIS: 10/2/98

DATE OF PREVIOUS TEST(S): 9/11/97, 11/11/97; 1/14/98; 3/12/98

SEX: Female

WEIGHT: 180

AGE: 60

BLOOD TYPE: B

Presenting Symptoms: fatigue; very high glucose in urine; traces of ketones and leukocytes in urine.

Previous Test Findings: High Hemoglobin A1C; High Glucose; High Cholesterol; High ESR; Low Red Blood Count

Current Test Findings: Normal Glucose; Mildly High Hemoglobin A1C; Low HDL; Low Liver Function

This analysis and the recommendations are not for the purpose of treating or curing disease, i.e.: cancer, hepatitis, arthritis, diabetes, M.S., heart disease, etc. The purpose for this nutrition and lifestyle program is to create an optimum environment in which your body can heal and repair itself by eliminating foods and toxins which adversely affect the body and to provide nutrients that the body may lack.

Very, very good job, DM! Your glucose is back to normal. Your hemoglobin A1C dropped from 6.8 down to 6.3. Do you remember how high your glucose and hemoglobin A1C was on your first test in September of '97? Your glucose was 353 and your hemoglobin A1C was 13.7. Your triglycerides were 633 and you were in bad shape. Your triglycerides are now 207.

Many of your minerals are better. The infection that you had before as indicated by your sed rate is now back to normal.

Your hemoglobin A1C is still a little bit high and will always be of concern. Keep doing what you are doing. You are headed on the right track.

Your liver enzymes are low (SGOT and SGPT). Take B Complex at 2/day.

Your thyroid function is still low. Continue with Tyrosine but increase it to 5/day.

Your cholesterol is still high. Continue with Garlic at 4/day, Beta-Carotene at 4/day and Vitamin C at 4/day.

Reduce your Zinc to once every 3 days. Take Vitamin E w/selenium at 2/day, Chromium at 6/day, Vandyl Sulfate at 2/day, Magnesium at 4/day,

Overall, DM you pretty much know what you should eat. Please keep this report for future reference. A re-test is desired in 8 months.

Test Description	Current Result	Current Rating	Prior Result	Delta	Homeostatic	Clinical	Units
Date	09/23/98						
Glucose	99.00	Opt	0.00		85.00 - 100.00	65.00 - 110.00	mg/dl
Hemoglobin A1C(Gly-Hgh)	6.30	HI	0.00		4.00 - 5.40	3.40 - 6.10	%
Uric Acid	5.40	Opt	0.00		4.00 - 6.00	2.50 - 8.00	mg/dl
Blood Urea Nitrogen (BUN)	16.00	Opt	0.00		13.00 - 18.00	10.00 - 20.00	mg/dl
Creatinine	0.70	Opt	0.00		0.60 - 1.00	0.50 - 1.50	mg/dl
BUN / Creatinine Ratio	22.86	HI	0.00		13.00 - 17.00	7.50 - 18.50	ratio
Sodium	141.00	Opt	0.00		140.00 - 144.00	138.00 - 146.00	meq/dl
Potassium	4.60	Opt	0.00		4.00 - 4.60	3.50 - 5.50	meq/dl
Chloride	104.00	Opt	0.00		100.00 - 106.00	96.00 - 110.00	meq/dl
Magnesium	2.20	Opt	0.00		2.20 - 2.60	1.70 - 2.40	mg/dl
Calcium	9.50	lo	0.00		9.70 - 10.10	8.60 - 10.70	mg/dl
Phosphorus	5.10	HI	0.00		3.40 - 4.00	2.40 - 4.60	mg/dl
Calcium / Albumin Ratio	2.32	Opt	#DIV/0!		2.20 - 2.50	2.03 - 2.71	ratio
Usable Calcium	9.50	Opt	0.00		7.90 - 10.10	7.00 - 10.11	
Calcium-Phosphorus Index	65.03	HI	0.00		30.00 - 40.00	20.00 - 40.20	ratio
Total Protein	7.10	Opt	0.00		7.10 - 7.60	6.00 - 8.00	gm/dl
Albumin	4.10	Opt	0.00		4.00 - 4.50	3.50 - 5.00	gm/dl
Globulin	3.00	Opt	0.00		2.80 - 3.50	1.90 - 3.70	gm/dl
A / G Ratio	1.37	Opt	0.00		1.20 - 1.60	1.10 - 2.30	ratio
Total Bilirubin	0.50	Opt	0.00		0.50 - 0.70	0.20 - 1.00	mg/dl
Alkaline Phospatase	85.00	hi	0.00		60.00 - 80.00	41.00 - 138.00	mu/ml
LDH	110.00	lo	0.00		120.00 - 160.00	100.00 - 225.00	mu/ml
SGOT (AST)	9.00	lo	0.00		18.00 - 26.00	0.00 - 40.00	mu/ml
SGPT (ALT)	9.00	lo	0.00		18.00 - 26.00	0.00 - 47.00	mu/ml
GGT	20.00	Opt	0.00		1.00 - 36.00	0.00 - 65.00	mu/ml
Serium Iron	69.96	lo	0.00		85.00 - 120.00	50.00 - 180.00	mccg/dl
Ferritin	142.00	Opt	0.00		25.00 - 225.00	10.00 - 325.00	ng/ml
Cholesterol	211.00	HI	0.00		150.00 - 180.00	140.00 - 200.00	mg/dl
Triglyceride	207.00	HI	0.00		80.00 - 115.00	10.00 - 195.00	mg/dl
HDL Cholesterol	34.00	LO	0.00		55.00 - 120.00	35.00 - 55.00	mg/dl
LDL Cholesterol	135.00	HI	0.00		50.00 - 110.00	65.00 - 130.00	mg/dl
VLDL	41.00	HI	0.00		5.00 - 20.00	5.00 - 40.00	mg/dl
Total Cholesterol / HDL Ratio	6.20	HI	0.00		0.00 - 4.00	0.00 - 5.00	ratio
T4	9.30	hi	0.00		7.00 - 9.00	5.50 - 13.00	mccg/dl
T3	33.17	lo	0.00		36.00 - 40.00	32.00 - 43.00	%
T7	3.08	Opt	0.00		2.60 - 3.60	2.10 - 4.70	
White Blood Count	7.00	Opt	0.00		5.00 - 8.00	4.80 - 10.80	k/cumm
Red Blood Count	4.50	Opt	0.00		4.50 - 5.50	4.50 - 5.50	m/cumm
Hemoglobin	12.90	lo	0.00		14.00 - 15.00	12.00 - 16.00	gm/dl
Hematocrit	39.10	lo	0.00		40.00 - 47.00	37.00 - 47.00	%
MCV	87.00	Opt	0.00		85.00 - 97.00	82.00 - 99.00	cu.m
MCH	28.80	Opt	0.00		27.00 - 31.00	27.50 - 32.50	pg
MCHC	33.10	Opt	0.00		32.00 - 34.00	32.00 - 36.00	%
Platelets	287.00	hi	0.00		175.00 - 250.00	150.00 - 450.00	k/cumm
Polys (SEGS-PMNS)	52.00	lo	0.00		55.00 - 65.00	50.00 - 70.00	%
Lymphocytes	38.00	Opt	0.00		25.00 - 40.00	20.00 - 40.00	%
Monocytes	6.00	Opt	0.00		3.00 - 7.00	1.00 - 8.50	%
Eosinophils	3.00	Opt	0.00		0.00 - 4.00	1.00 - 5.00	%
Basophils	1.00	hi	0.00		0.00 - 0.00	0.00 - 1.00	%
Erythrocytes Sed Rate ESR	7.00	Opt	0.00		0.00 - 8.00	0.00 - 9.00	mm/HR
CRP C-Reactive Protein	0.00		0.00		0.00 - 0.00	0.49 - 0.51	mg /L
Creatine Kinase	41.00	LO	0.00		67.50 - 103.50	54.00 - 186.00	u/l

HAIR ANALYSIS

The measurement of hair element levels is a screening test for physiological excess, deficiency, or maldistribution. Hair element analysis is not a diagnostic test of element function, and hair element levels (either high or low) are not always indicative of pathology. This is **because hair levels of some elements can be influenced by many factors such as shampoo, swimming pool and spa water, and hair treatments.**

Because of pollution, industry, and other environmental factors, there is no way you can totally eliminate your exposure to some of these toxic elements. However, there are things we can do daily to limit our exposure to these toxic elements and therefore lessening the total burden on your body. **Below you'll find that we've highlighted the most common sources of each toxic element with which you are being overexposed.**

HIGH BISMUTH

Bismuth is a major player in the metallurgical industry. Many industries are using bismuth instead of lead because lead is so toxic. Bismuth is nontoxic in ordinary amounts, but prolonged exposure or excessive use may lead to toxicity. It is a basic ingredient in a range of fusible alloys; an additive to aluminum, steel, and cast iron to improve machinability; and widely used to support dyes and moulds.

Bismuth has been used in health care for centuries. Slightly soluble mineral salts are used in antacids such as Pepto-Bismol. Bacterial properties of bismuth salts are used to treat skin injuries and infection. The medical profession used bismuth castings to shield vital organs during radiation therapy.

Symptoms of toxicity are: mental confusion, memory loss, lack of coordination, slurred speech, joint pain, muscle twitching and spasms, foul breath, blue/black gum line and malaise.

Sources of Bismuth are: **antiacids, glass, ceramics, optical lenses, synthetic pearls, cosmetic formulations where they impart pearlescence to lipstick, nail polish and eye shadow.**

HIGH MERCURY

Mercury (Hg) is a toxic element for humans and animals. Hair mercury level is an accurate indicator of mercury body burden. Mercury can cause hyperactivity, mental and emotional changes, neuromuscular disorders [Alzheimer's and Parkinson's], loss of appetite, etc. A considerable variance in the sensitivity of different individuals to mercury has been observed, with some exhibiting symptoms at 3 to 5 ppm. Even very low levels of mercury have been found to suppress biological selenium activity. After dental amalgams are used, elevated hair mercury may be observed for six months to over a year. Hair mercury has been found to correlate with acute myocardial infarction where on average a 1 ppm mercury was found to correlate with a 9 percent increase in AMI risk.

Symptoms of contamination: Chronic fatigue; depression; poor memory and cognitive function; emotional instability; peripheral numbness or tingling; decreased senses of touch, hearing or vision; hypersensitivity and allergies; persistent infections including chronic yeast overgrowth; compromised immune function; cardiovascular disease

Other sources of mercury are: large fish, pesticide residues, mercurial fungicides on seed grains, dental fillings, coal burning, calomel (mercurous chloride), interior paints, pharmaceuticals, and water.

To help get these heavy metals out of your system, which is very important, I want you to take Chlorella at 2 per day. Your magnesium and selenium, are both very important in getting these metals through the kidneys. Chlorella and cilantro have the unique ability to actually get these heavy metals out of brain, liver, heart, and lung tissue. I recommend adding fresh cilantro to the diet. Cilantro is an herb that you can find in most supermarkets. You can chop it up and add it to salads, sauces, etc. Since we are constantly being exposed to heavy metals in our society, I do recommend that even after you are feeling better that you continue with the Chlorella.

Most of your other nutrient elements are out of balance. For this, take a good multiple vitamin (we use one called Ultra Preventive III) at 2/day.

DM, notice your total toxic representation is quite high. I'm not sure where you are getting all of this mercury. The bismuth exposure in women is usually due to lipstick. You might talk to Vicki about some natural lipsticks that we recommend in the office. She'll be able to tell you how to get them. You can see that most of your minerals are low but that your calcium and magnesium are high. This is commonly associated with osteoporosis. When you dump minerals like these, your body isn't utilizing them properly. Continue with the other vitamins that I've recommended.

Please keep this report for future reference. Do another hair analysis in 1 year. Do another blood test by May '99.



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HAIR MULTIELEMENT ANALYSIS REPORT

517

LAB. NO.: 98327-0156 ACCT.: 22044
PATIENT: AGE: 61 SEX: F
DOCTOR: Van D. Merkle, DC
OFFICE:

Elements Regarded As Toxic

TOXIC ELEMENTS	PATIENT LEVEL (parts per million)	HIGH		
		ONE STANDARD DEVIATION ABOVE MEAN	TWO STANDARD DEVIATIONS ABOVE MEAN	MORE THAN TWO STANDARD DEVIATIONS ABOVE MEAN
Aluminum	2	***	9	
Antimony	0.007	*	.15	
Arsenic	0.024	***	.15	
Beryllium	<dl .002		.03	
Bismuth	0.653	*****	.3	*****
Cadmium	0.049	***	.25	
Lead	0.2	*	4.0	
Mercury	1.23	*****	1.5	
Nickel	0.15	***	0.7	
Platinum	0.002	**	.02	
Silver	0.07	***	0.4	
Thallium	<dl .001		.05	
Thorium	<dl .001		.01	
Tin	0.1	**	0.8	
Uranium	0.036	***	.2	

SAMPLE SIZE: 0.19 g
SAMPLE TYPE: head hair
DATE SAMPLED: 11/19/1998
DATE IN: 11/23/98
DATE OUT: 11/24/98
OFFICE CODE: 2-1
ICP-MS analyzed
RACE: caucasian
HAIR COLOR:
HAIR PREPS:

SHAMPOO: ION

Ratios

	PATIENT RATIO	EXPECTED RANGE
CA/MG	4.3	5- 15
CA/P	6.8	2.5- 6.5
MG/K	34.0	1.5- 6.0
NA/K	3.7	1.5- 4.0
ZN/CU	20.5	5- 11
ZN/CD	>999	>800

TOTAL TOXIC REPRESENTATION *****

Elements Regarded As Nutrients

NUTRIENT ELEMENT	PATIENT LEVEL (parts per million)	REFERENCE RANGE					NUMERICAL VALUE OF REFERENCE RANGE
		LOW	ONE STANDARD DEVIATION (STD) BELOW	MEAN	ONE STANDARD DEVIATION (STD) ABOVE	HIGH	
Calcium	1545			*****			350- 860
Magnesium	356			*****			40- 110
Sodium	16	*****		*****			18- 87
Potassium	4	*****		*****			8- 38
Copper	10	*****		*****			13- 35
Zinc	211			*****			125- 155
Iron	8			*****			6- 15
Manganese	0.10	*****		*****			0.30- 0.75
Chromium	0.42			*****			0.35- 0.80
Cobalt	0.008	*****		*****			0.020- 0.045
Vanadium	0.014			*****			0.009- 0.080
Molybdenum	0.028			*****			0.030- 0.080
Boron	0.04	*****		*****			0.80- 2.80
Iodine	0.1	*****		*****			0.3- 1.2
Lithium	0.014			*****			0.010- 0.040
Phosphorus	227			*****			144- 216
Selenium	1.207			*****			0.950- 1.700
Strontium	10.39			*****			1.00- 7.60
Sulfur	50259			***			48000- 52500

Other Elements

ELEMENT	PATIENT LEVEL	EXPECTED RANGE	ONE STANDARD DEVIATION HIGH	TWO STANDARD DEVIATIONS HIGH
Barium	3.02	0.40- 2.50	*****	
Germanium	0.003	0.003- 0.028		
Rubidium	0.008	0.020- 0.150		
Titanium	0.307	0.100- 0.700		
Zirconium	0.175	0.020- 0.500		

COMMENTS:

LABORATORY DIRECTOR: James T. Hicks, MD, Ph.D., FCAP • CLIA ID NO. 14D0646470 • MEDICARE PROVIDER NO. 148453 • TAX ID NO. (FEIN) 93-0941625

dl=detection limit, n/a=currently not available, qns=quantity not sufficient

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Personal Vitamin and Supplement Program					
For DM 5586					
Vitamin or Supplement	Dosage Per Unit	AM	Noon	PM	Bed
B12 (12-Resin-K)	1000 mcg.				
Beta Carotene (A-Caro)	25000 I.U.	2		2	
Vitamin C (Ascocid 1000)	1000 mg.	2		2	
Chlorella	335 mg.	1		1	
Chromium Picolinate w/ boron	200 mcg.	2	2	2	
Vitamin E-400 w/ selenium	400 I.U.	1		1	
B-Complex (Exstress Super)	50 mg.	1		1	
Garlic	345 mg.	2		2	
Magnesium Glycinate	100 mg.	2		2	
Tyrosine	500 mg.	2	1	2	
Ultra Preventive III (Multiple)	1	1		1	
Vandyl Sulfate	50 mg.	1		1	
Zinc	50 mg.	1			

DOCTORS COMMENTS:

DM first came into our office in December of 1996. She had heard some things about my nutritional work and she wanted to do a hair analysis. That was basically all she wanted done which against my recommendation. After being on a program to take care of what the hair analysis had revealed, she didn't make any significant progress. She continued to feel worse and in September of 1997 she presented to our office feeling extreme fatigue and she had to change the prescription on her glasses several times in just the last few months. In fact, her vision was so bad she had difficulty driving and reading was just about impossible. She also noticed her urine was different. Before she left our office we did a urinalysis and found extremely high levels of glucose in the urine. We immediately sent her off for a blood test. You can see on the first blood test how severe her glucose, hemoglobin A1C and triglycerides were. You can follow her progress with the reports that follow her initial report.

The main thing about this patient was that she recognized that she had a problem. She was very determined and adamant against doing any medical treatment so she had to stick very carefully to the program that we had designed. When you are diabetic, you have to test yourself regularly. You can't just stop your medication. One thing is very important. If you have not taken insulin, even if your glucose and hemoglobin A1C are very high, it is my experience that you have a much better chance of not needing insulin if you are willing to do what it takes. Once you start taking insulin, your body changes and it is more difficult to get you well than if you have never taken it.

END OF REPORT