
**Liver Disease, Diverticulitis, Hard Coughing with Phlegm Every Morning, Vomits Everyday with Phlegm, Chest Gets Tight, Deep Depression, Headaches, Dizziness, Gained 50 lbs. in the Last Five Years, Frequent Urination, Decreasing Energy,
Reflux About 1-2 Hours After Eating**

Patient: LL 7995, a 51 year old woman, presented on 12/19/98:

Within the last two months on the program:

- Is no longer taking any prescriptions (was on five prescription drugs)
- Feels much better
- Is no longer vomiting
- Liver function is improving
- Weight Loss: 16 lbs.
- Improved sinuses, less headaches
- Energy is improved

FIRST REPORT

PATIENT: LL

DATE OF BLOOD TEST: 12/9/98

DATE OF ANALYSIS: 12/22/98

SEX: F

WEIGHT: 206

AGE: 51

BLOOD TYPE: B

Presenting symptoms: Hard coughing with phlegm every morning; every day vomits with thick phlegm; her chest gets tight; is tired all the time; medications make her tired; has had deep depression; is sensitive to smells; clears her throat a lot due to the mucous; gets 2-3 headaches a week; gets dizziness from her coughing spells and from not eating; had a bronchial infection and a urinary tract infection this year and was on antibiotics once; has frequent urination due to the medication; had a gall bladder removed in '76; has gained 50 lbs. in the last five years; has lost weight before, will lose weight and then gain it back; energy is decreasing and is worse than it was five years ago; notices that she coughs more when eating white sugar; may be lactose intolerant because she gets diarrhea when drinking milk; has been drinking soy milk for one month; does get diarrhea or constipation; has about one bowel movement a day; has a lot of gas and bloating; has reflux 1-2 hrs. after eating; takes long naps and sleeps about ten hours a night, will wake up about 1time; does cough at night; drinks one cup of coffee a day, one cup of green tea a day and drinks 1-2 diet Cokes a week; was on the birth control pill for nine months years ago but got terrible headaches; had a partial hysterectomy in '82; has never had menopausal symptoms.

Tests Performed: Blood test, Hair Analysis, EKG, and Spirometer

Medications: Premarin; Hydrochlorothiazide (for blood pressure) since Nov. '98; Was on Prinivil before that for one year; Nasacort once a day; Pulmicort twice a day; Some Vitamins (C, E, Zinc, Calcium, Magnesium and B12)

Side Effects of Medications: Premarin (for menopause) contraindicated in pregnancies, known or suspected cancer; thrombophlebitis; increased risk of cancer; increased gallbladder disease; increased cardiovascular disease; increased heart disease; elevated blood pressure; hypercalcemia; birth defects; breast tenderness; gastrointestinal nausea; vomiting; abdominal cramps; bloating; skin disease; loss of scalp hair; headaches; migraines; dizziness; mental depression; increased weight; reduced carbohydrate tolerance; edema; decreased libido.

Hydrochlorothiazide (beta blocker) (contraindicated in heart problems specifically congestive heart failure) tachycardia; used cautiously in kidney disease; liver disease; dizziness; vertigo; drowsiness; lethargy; headaches; nightmares; diarrhea; digestive disorders; nausea; vomiting; constipation; blurred vision; sweating; impotence; fatigue; depression; mental confusion; headaches.

Prinivil (used for hypertension and blood pressure) edema of the face and extremities; anaphylactic reactions; hypotension; should not be used by pregnant women; may cause birth defects; heart failure; chest pain; chills; hepatitis; pancreatitis; gastritis; constipation; bone marrow depression, arthritis; ataxia; tremors; memory impairment; irritability; nervousness; lung involvement; blurred vision; renal failure.

Test Findings: Normal Lung Function; Borderline EKG; Tendency toward Diabetes; Low Minerals; High Sed Rate; Mild Anemia; Low Thyroid

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. Test values outside the clinical range are indicated by either a "HI" or "LO" sign to the left of the results column. The homeostatic range is a more normal or healthy range and test values need to be within range for one to have optimum health. Test values outside the homeostatic range are indicated by either a "H*" or "L*" sign to the left of the results column.

The coronary risk assessment is average at 3.39. This is concerning the total cholesterol, which is a little high at 207, and the HDL cholesterol, which is high at 61. 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. The LDL cholesterol is a bad type of cholesterol to have as it tends to plug the arteries up. It would be good if this value were low. Your LDL cholesterol is high at 132. Your VLDL cholesterol - close to the bottom of the page is a little high at 23. This is the very worst type of cholesterol to have and I like to see that value below 20. To help lower the total cholesterol, I recommend GLA at 2/day and Garlic at 2/day.

You have a low T3. This indicates a low 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, digestion is going to be slow and energy is going to be low. It is difficult to have a good cholesterol level with a low thyroid. Large amounts of cauliflower, sauer kraut (cabbage), and asparagus do lower thyroid function. So, do not eat these foods everyday. A couple of times per week would be sufficient. Interestingly, most cancers are seen in people with a low thyroid. For this, I am going to recommend Energenics at 6/day.

You are quite low in potassium, which can effect the heart. I would like you to take Potassium at 2/day. In fact, your other minerals are quite low. These are very important for heart function. Take 3/day of Magnesium, B6 at 2/day (which helps with the utilization of Magnesium), Vitamin D at 2/day, and Calcium at 3/day.

You have a high hemoglobin A1C (diabetic indicator). You are not diabetic yet, but you are definitely headed in that direction. I want you to take Chromium Picolinate at 3/day, Vanadyl Sulfate at 2/day and follow the special diet later in this report.

You have a high sed rate. This indicates a localized or systemic inflammatory pathology. It is difficult to tell where the infection because it does not appear to be that severe. I would like you to take Vitamin C at 3/day and Beta-Carotene at 2/day. The Garlic that we have recommended should help as well.

You have a low lymphocyte count and high monocyte count and high polys. This is probably indicative of the infection as well. It could also be an allergy. I would like you to be sure to avoid all dairy products. This should also help with your breathing. The dairy products usually create a lot of mucous. I understand that you have stopped drinking milk and use soy. Let's see how this works in a few more weeks.

To help with your digestion, I would like to have you take HCL Pepsin at 2/meal and Bromelain at 8/day. This Bromelain should help not only your digestion, but also should loosen up the mucous you have.

Your EKG shows a borderline and potential abnormal EKG. You had a heart rate of 76 on one test and 87 on the other. These are both too high. They should be closer to 60. The indicated T wave abnormality correlates with your low minerals, which could also effect the ventricular rate or your supraventricular rhythm. I expect to see a nice improvement on this when we get your minerals in balance.

Your lung function test showed that you are at 109% of average, which is excellent. This is based on people of your age, sex, race, height, and weight. You have almost a 10% greater lung capacity than an average person in your category. This is very good!

Dietary Considerations:

Below is a list of foods and items that are strongly recommended to avoid. **READ YOUR INGREDIENT LABELS!!** Later in the report, you will find exchanges for these foods and helpful hints on implementing these new lifestyle habits.

1. Artificial Sweeteners (aspartame; saccharin; etc)
2. Processed Meats (nitrate/nitrite foods (pork); bologna; wieners; any luncheon meat w/ additives or preservatives)
3. MSG (monosodium glutamate) (found in many dressings, sauces and Chinese foods)
4. All Canned Foods and Drinks
5. Microwave Cooking (because of radiation)
6. Fried Foods
7. Hydrogenated Fats (margarine, most pre-packaged foods and dressings, "Olestra" products, etc)
8. Refined Carbohydrates (processed foods: white sugar, white flour, "unbleached or unbrominated" foods; corn syrup; "enriched" foods, etc)
9. Preservatives, additives, artificial colors, FD&C colors and dyes
10. Commercial Meats: Look for meat that is labeled "No Hormones, No Steroids, No Antibiotics, etc"
11. Shellfish and Bottom-dwellers (crab, shrimp, lobster, oyster, catfish, etc.)
12. Dairy Products (cottage cheese, yogurt, cheese, butter, sour cream, etc.) (anything with cow's milk)
13. Coffee (regular & chemically decaffeinated), Liquor (distilled), All sodas, Tea (black decaf & black regular)

Hypoglycemic Recommendations:

(these are for your hypoglycemic 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 clean water per day. I recommend using reverse osmosis for your drinking and cooking water.

LL, it is easy to see why you don't feel well. You have some serious problems developing. At this time I don't want you to stop any medications. I want you to continue what you are doing and let your body build up and get stronger. As you do, you may find that you will no longer need this medication. If you want some alternatives to hormone replacement, let us know. There are some good natural alternatives to Premarin. I would recommend that you try Remifemin at 3/day. I think that if you will follow this program, we should see some improvement in just a few weeks.

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.

LL, 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 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 of your blood and another EKG is desired to determine progress made. A hair analysis is indicated as soon as possible.

Yours in good health,

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

Test Description	Current Result	Current Rating	Prior Result	Delta	Homeostatic		Clinical		Units
Date	12/09/98								
Ferritin	97.50	Opt	0.00		31.30	- 134.30	14.00	- 179.00	ng/ml
Sodium	138.00	lo	0.00		140.00	- 144.00	138.00	- 146.00	meq/dl
Potassium	3.40	LO	0.00		4.00	- 4.60	3.50	- 5.50	meq/dl
Magnesium	1.70	lo	0.00		2.20	- 2.60	1.70	- 2.40	mg/dl
Chloride	97.00	lo	0.00		100.00	- 106.00	96.00	- 110.00	meq/dl
Blood Urea Nitrogen (BUN)	11.00	lo	0.00		13.00	- 18.00	10.00	- 20.00	mg/dl
Creatinine	0.80	Opt	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
Uric Acid	6.00	Opt	0.00		4.00	- 6.00	2.50	- 8.00	mg/dl
Calcium	8.30	LO	0.00		9.70	- 10.10	8.60	- 10.70	mg/dl
Phosphorus	2.80	lo	0.00		3.40	- 4.00	2.40	- 4.60	mg/dl
Glucose	97.00	Opt	0.00		85.00	- 100.00	65.00	- 110.00	mg/dl
Hemoglobin A1C(Gly-Hgh)	6.70	HI	0.00		4.00	- 5.40	3.40	- 6.10	%
LDH	164.00	hi	0.00		120.00	- 160.00	100.00	- 225.00	mu/ml
SGOT (AST)	15.00	lo	0.00		18.00	- 26.00	0.00	- 40.00	mu/ml
SGPT (ALT)	18.00	Opt	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
Total Bilirubin	0.50	Opt	0.00		0.50	- 0.70	0.20	- 1.00	mg/dl
Alkaline Phospatase	60.00	Opt	0.00		60.00	- 80.00	41.00	- 138.00	mu/ml
Total Protein	7.40	Opt	0.00		7.10	- 7.60	6.00	- 8.00	gm/dl
Albumin	4.70	hi	0.00		4.00	- 4.50	3.50	- 5.00	gm/dl
Globulin	2.70	lo	0.00		2.80	- 3.50	1.90	- 3.70	gm/dl
A / G Ratio	1.70	hi	0.00		1.20	- 1.60	1.10	- 2.30	ratio
Cholesterol	207.00	HI	0.00		150.00	- 180.00	140.00	- 200.00	mg/dl
HDL Cholesterol	61.00	Opt	0.00		55.00	- 120.00	35.00	- 55.00	mg/dl
LDL Cholesterol	132.00	HI	0.00		50.00	- 110.00	65.00	- 130.00	mg/dl
VLDL	23.00	hi	0.00		5.00	- 20.00	5.00	- 40.00	mg/dl
Triglyceride	116.00	hi	0.00		80.00	- 115.00	10.00	- 195.00	mg/dl
T4	10.90	hi	0.00		5.40	- 9.69	4.70	- 11.40	mcg/dl
T3	27.80	Opt	0.00		27.60	- 33.06	24.00	- 38.90	%
T7	9.59	Opt	0.00		5.80	- 11.80	3.60	- 14.00	
TSH	0.00		0.00		2.50	- 4.20	0.35	- 5.50	mIU/l
Serium Iron	73.00	lo	0.00		85.00	- 120.00	50.00	- 180.00	mcg/dl
Red Blood Count	4.70	Opt	0.00		4.50	- 5.50	4.50	- 5.50	m/cumm
Hemoglobin	13.30	lo	0.00		14.00	- 15.00	12.00	- 16.00	gm/dl
Hematocrit	38.70	lo	0.00		40.00	- 47.00	37.00	- 47.00	%
MCV	82.30	lo	0.00		85.00	- 97.00	82.00	- 99.00	cu.m
MCH	28.40	Opt	0.00		27.00	- 31.00	27.50	- 32.50	pg
MCHC	34.50	hi	0.00		32.00	- 34.00	32.00	- 36.00	%
Platelets	223.00	Opt	0.00		175.00	- 250.00	150.00	- 450.00	k/cumm
White Blood Count	7.50	Opt	0.00		5.00	- 8.00	4.80	- 10.80	k/cumm
Polys (SEGS-PMNS)	66.00	hi	0.00		55.00	- 65.00	50.00	- 70.00	%
Lymphocytes	22.60	lo	0.00		25.00	- 40.00	20.00	- 40.00	%
Monocytes	8.50	hi	0.00		3.00	- 7.00	1.00	- 8.50	%
Eosinophils	2.10	Opt	0.00		0.00	- 4.00	1.00	- 5.00	%
Basophils	0.80	hi	0.00		0.00	- 0.00	0.00	- 1.00	%
CRP C-Reactive Protein	0.95	HI	0.00		0.00	- 0.00	0.49	- 0.51	mg /L
Creatine Kinase	70.00	Opt	0.00		50.00	- 150.00	26.00	- 174.00	u/l
Erythrocytes Sed Rate ESR	20.00	HI	0.00		0.00	- 8.00	0.00	- 9.00	mm/HR
Total Cholesterol / HDL Ratio	3.39	Opt	0.00		0.00	- 4.00	0.00	- 5.00	ratio

Personal Vitamin and Supplement Program for LL 7995					
Vitamin or Supplement	Dosage Per Unit	AM	Noon	PM	Bed
Beta Carotene (A-Caro)	25000 I.U.	1		1	
Vitamin C (Ascocid 1000)	1000 mg.	1	1	1	
HCL Pepsin (Betaine Plus)	650 mg.	2	2	2	
Bromelain (Bromagest)	500 mg.	2	2	2	2
Chromium Picolinate w/ boron	200 mcg.	1	1	1	
Vitamin D (D-Natural 5)	5000 I.U.	1		1	
Energenics	1	2	2	2	
Garlic	345 mg.	1		1	
Magnesium Glycinate	100 mg.	1	1	1	
Calcium (MCHC)	250 mg.	1	1	1	
B6 (Neuro-K-500)	500 mg.	1		1	
Potassium	99 mg.	1		1	
Remifemin	1	1	1	1	
GLA (Ultralinic)	240 mg.				2
Vandyl Sulfate	50 mg.	1		1	

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

END OF FIRST REPORT

SECOND REPORT HAIR ANALYSIS

PATIENT: LL

DATE HAIR SAMPLED: 1/11/99

DATE OF ANALYSIS: 1/28/99

SEX: F

WEIGHT: 206

AGE: 51

BLOOD TYPE: B

Presenting Symptoms: Hard coughing with phlegm every morning; just about every day vomits with thick phlegm; her chest gets tight; is tired all the time; medications make her tired; has had deep depression; is sensitive to smells; clears her throat a lot due to the mucous; gets 2-3 headaches a week; gets dizziness from her coughing spells and from not eating; had a bronchial infection and a urinary tract infection this year and was on antibiotics once; has frequent urination due to the medication; had a gall bladder removed in '76; has gained 50 lbs. in the last five years; has lost weight before, will lose weight and then gain it back; energy is decreasing and is worse than it was five years ago; notices that she coughs more when eating white sugar; may be lactose intolerant because she gets diarrhea when drinking milk; she's been drinking soy milk for one month; does get diarrhea or constipation; has about one bowel movement a day; has a lot of gas and bloating; has reflux 1-2 hrs. after eating; takes long naps and sleeps about ten hours a night, will wake up about 1time; does cough at night; drinks one cup of coffee a day, one cup of green tea a day and drinks 1-2 diet Cokes a week; was on the birth control pill for nine months years ago but got terrible headaches; had a partial hysterectomy in '82; has never had menopausal symptoms

Previous Test Findings: Normal Lung Function; Borderline EKG; Tendency toward Diabetes; Low Minerals; High Sed Rate; Mild Anemia; Low Thyroid

Medications: *[All reactions are from the PDR 1995]:* Premarin; Hydrochlorothiazide (for blood pressure) since Nov. '98; Was on Prinivil before that for one year; Nasacort once a day; Pulmicort twice a day; Some Vitamins (C, E, Zinc, Calcium, Magnesium and B 12)

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.

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 ANTIMONY

Antimony or stibium has no known function in living organisms and has low toxicity. **Foods stored in enamel vessels and cans may contain appreciable antimony concentrations. Variations in concentration are apparently**

influenced by geography, season and refining of foods. However, due to low toxicity, little research is available regarding the importance of blood and hair levels.

HIGH TIN

You'll see that you have a tin value that is too high. The most common sources of tin are: tap water, preserved foods in tin cans, asparagus packaged in glass, processing and packaging of gelatin, smoked fish, macaroni, dried legumes, dried milk, milk in large cans, and tea. I

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 3/day.

Note that your calcium is very high. Basically, it looks like your body is losing calcium which is not unusual. In fact, this correlates with your blood test. You have a very low calcium level, which correlates with your low thyroid and even the medications you are on. I would like to see a bone density test to see the density your bones have. You should note that almost all of your other nutrient elements are low.

I would also suspect that due to a lack of nutrient minerals that your body may eliminate more heavy metals on your next hair analysis. You need calcium, magnesium and other good minerals to help carry out your other toxic metals.

So today, when you get this report, I would like to do a bone density test and a body composition analysis to determine how much lean body mass you have.

Please keep this report for future reference.

I would like to re-test your hair in six 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/vlb



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HAIR MULTIELEMENT ANALYSIS REPORT

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LAB. NO.: 99019-0331 ACCT.: 22044
 PATIENT: l s AGE: 51 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	1	***	9	
Antimony	0.054	*****	.15	
Arsenic	0.009	*	.15	
Beryllium	<dl .002		.03	
Bismuth	0.066	***	.3	
Cadmium	0.032	**	.25	
Lead	0.3	*	4.0	
Mercury	0.32	***	1.5	
Nickel	0.09	**	0.7	
Platinum	<dl .001		.02	
Silver	0.04	**	0.4	
Thallium	<dl .001		.05	
Thorium	<dl .001		.01	
Tin	0.5	*****	0.8	
Uranium	0.009	*	.2	

SAMPLE SIZE: 0.21 g
 SAMPLE TYPE: head hair
 DATE SAMPLED: 01/11/1999
 DATE IN: 01/19/99
 DATE OUT: 01/20/99
 OFFICE CODE: 2-1
 ICP-MS analyzed
 RACE: oriental
 HAIR COLOR:
 HAIR PREPS:
 SHAMPOO: ORGANIC

Ratios

	PATIENT RATIO	EXPECTED RANGE
CA/MG	10.4	5- 15
CA/P	14.4	2.5- 6.5
MG/K	> 148	1.5- 6.0
NA/K	> 5	1.5- 4.0
ZN/CU	8.8	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 BELOW	MEAN	ONE STANDARD DEVIATION ABOVE	HIGH	
Calcium	3074						350- 860
Magnesium	296						40- 110
Sodium	9						18- 87
Potassium	<dl 2.00						8- 38
Copper	21						13- 35
Zinc	184						125- 155
Iron	3						6- 15
Manganese	0.17						0.30- 0.75
Chromium	0.30						0.35- 0.80
Cobalt	0.020						0.020- 0.045
Vanadium	0.017						0.009- 0.080
Molybdenum	0.032						0.030- 0.080
Boron	0.10						0.80- 2.80
Iodine	0.1						0.3- 1.2
Lithium	0.010						0.010- 0.040
Phosphorus	213						144- 216
Selenium	0.681						0.950- 1.700
Strontium	36.95						1.00- 7.60
Sulfur	50208						48000- 52500

Other Elements

ELEMENT	PATIENT LEVELS	EXPECTED RANGE	ONE STANDARD DEVIATION HIGH	TWO STANDARD DEVIATIONS HIGH
Barium	8.70	0.40- 2.50	*****	*****
Germanium	0.001	0.003- 0.028		
Rubidium	0.006	0.020- 0.150		
Titanium	<dl .029	0.100- 0.700		
Zirconium	0.112	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, cns=quantity not sufficient

END OF SECOND REPORT

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THIRD REPORT

PATIENT: LL

DATE OF BLOODTEST: 3/12/99

DATE OF ANALYSIS: 3/20/99

DATE OF PREVIOUS TEST (S): 12/9/98

SEX: F

WEIGHT: 190

AGE: 51

BLOOD TYPE: B

Presenting Symptoms: Hard coughing with phlegm every morning; just about every day vomits with thick phlegm; her chest gets tight; is tired all the time; medications make her tired; has had deep depression; is sensitive, to smells; clears her throat a lot due to the mucous; gets 2-3 headaches a week; gets dizziness from her coughing spells and from not eating; had a bronchial infection and a urinary tract infection this year and was on antibiotics once; has frequent urination due to the medication; had a gall bladder removed in '76; has gained 50 lbs. in the last five years; has lost weight before, will lose weight and then gain it back; energy is decreasing and is worse than it was five years ago; notices that she coughs more when eating white sugar; may be lactose intolerant because she gets diarrhea when drinking milk; has been drinking soy milk for one month; does get diarrhea or constipation; has about one bowel movement a day; has a lot of gas and bloating; has reflux 1-2 hrs. after eating; takes long naps and sleeps about ten hours a night, will wake up about 1 time; does enough at night; drinks one cup of coffee a day, one cup of green tea a day and drinks 1-2 diet Cokes a week; was on the birth control pill for nine months years ago but got terrible headaches; had a partial hysterectomy in '82; has never had menopausal symptoms

Previous Test Findings: Normal Lung Function; Borderline EKG; Tendency toward Diabetes; Low Minerals; High Sed Rate; Mild Anemia; Low Thyroid

Test Findings: High GGT; High SGOT; High SGPT; High LDH; Low Lymphocytes

Medications: *[All reactions are from the PDR 1995]:* Premarin; Hydrochlorothiazide (for blood pressure) since Nov. '98; Waston Prinivil before that for one year; Nasacort once a day; Pulmicort twice a day; Some Vitamins (C, E, Zinc, Calcium, Magnesium and B12)

Side Effects of Medications: Premarin (for menopause) contraindicated in pregnancies, known or suspected cancer; thrombophlebitis; increased risk of cancer; increased gallbladder disease; increased cardiovascular disease; increased heart disease; elevated blood pressure; hypercalcemia; birth defects; breast tenderness; gastrointestinal nausea; vomiting; abdominal cramps; bloating; skin disease; loss of scalp hair; headaches; migraines; dizziness; mental depression, increased weight; reduced carbohydrate tolerance; edema; decreased libido.

Prinivil (used for hypertension and blood pressure) edema of the face and extremities; anaphylactic reactions; hypotension; should not be used by pregnant women; may cause birth defects; heart failure; chest pain; chills; hepatitis; pancreatitis; gastritis; constipation; bone marrow depression; arthritis; ataxia; tremors; memory impairment; irritability; nervousness; lung involvement; blurred vision; renal failure.

Hydrochlorothiazide (beta blocker) (contraindicated in heart problems specifically congestive heart failure) tachycardia; used cautiously in kidney disease; liver disease; dizziness; vertigo; drowsiness; lethargy; headaches; nightmares; diarrhea; digestive disorders; nausea; vomiting; constipation; blurred vision; sweating; impotence; fatigue; depression; mental confusion; headaches.

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.

LL, it looks like you've been sick and are currently sick. Your SGOT, SGPT and GGT indicate early liver disease and possibly pancreatic disease. It may be associated with a potential viral infection you have, indicated by your low lymphocyte count. These values are seen in hepatitis. This could have been caused from the virus or even the medications or even food poisoning. My first question to you is have you been sick recently? Have you been jaundiced? The vitamins we need you to take include Zinc at 1/day, Chromium at 2/day, Niacinamide at 2/day, Hepatagen at 4/day, Beta-Carotene at 2/day, Monolaurin at 9/day and Vitamin C at 3/day. It is crucial to get this under control quickly. I would recommend a test of your liver profile (SGOT, SGPT, GGT) in 2 weeks. This liver dysfunction is affecting, your digestion, your protein is low, and your calcium is low. Take Magnesium at 3/day, B6 at 1/day, Calcium at 3/day and to give your immune system a boost, I'd like you to take Herbal Defense for 2 weeks until your next blood test.

This is what we want you to do first LL. Let's get this under control and when we do we may modify some of this. When we see the liver enzymes come down, we'll modify it accordingly.

Please keep this report for future reference.

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/mlr

Test Description	Current Result	Current Rating	Prior Result	Delta	Homeostatic	Clinical	Units
Date	03/12/99						
Ferritin	252.20	HI	0.00		31.30 - 134.30	14.00 - 179.00	ng/ml
Sodium	142.00	Opt	0.00		140.00 - 144.00	138.00 - 146.00	meq/dl
Potassium	4.40	Opt	0.00		4.00 - 4.60	3.50 - 5.50	meq/dl
Magnesium	1.60	LO	0.00		2.20 - 2.60	1.70 - 2.40	mg/dl
Chloride	106.00	Opt	0.00		100.00 - 106.00	96.00 - 110.00	meq/dl
Blood Urea Nitrogen (BUN)	11.00	lo	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	16.00	Opt	0.00		13.00 - 17.00	7.50 - 18.50	ratio
Uric Acid	4.60	Opt	0.00		4.00 - 6.00	2.50 - 8.00	mg/dl
Calcium	8.50	LO	0.00		9.70 - 10.10	8.60 - 10.70	mg/dl
Phosphorus	2.90	lo	0.00		3.40 - 4.00	2.40 - 4.60	mg/dl
Glucose	88.00	Opt	0.00		85.00 - 100.00	65.00 - 110.00	mg/dl
Hemoglobin A1C(Gly-Hgh)	5.60	hi	0.00		4.00 - 5.40	3.40 - 6.10	%
LDH	254.00	HI	0.00		120.00 - 160.00	100.00 - 225.00	mu/ml
SGOT (AST)	307.00	HI	0.00		18.00 - 26.00	0.00 - 40.00	mu/ml
SGPT (ALT)	485.00	HI	0.00		18.00 - 26.00	0.00 - 47.00	mu/ml
GGT	122.00	HI	0.00		1.00 - 36.00	0.00 - 65.00	mu/ml
Total Bilirubin	0.80	hi	0.00		0.50 - 0.70	0.20 - 1.00	mg/dl
Alkaline Phospatase	94.00	hi	0.00		60.00 - 80.00	41.00 - 138.00	mu/ml
Total Protein	638.00	HI	0.00		7.10 - 7.60	6.00 - 8.00	gm/dl
Albumin	4.30	Opt	0.00		4.00 - 4.50	3.50 - 5.00	gm/dl
Globulin	2.50	lo	0.00		2.80 - 3.50	1.90 - 3.70	gm/dl
A / G Ratio	1.70	hi	0.00		1.20 - 1.60	1.10 - 2.30	ratio
Cholesterol	143.00	lo	0.00		150.00 - 180.00	140.00 - 200.00	mg/dl
HDL Cholesterol	49.00	lo	0.00		55.00 - 120.00	35.00 - 55.00	mg/dl
LDL Cholesterol	88.00	Opt	0.00		50.00 - 110.00	65.00 - 130.00	mg/dl
VLDL	16.00	Opt	0.00		5.00 - 20.00	5.00 - 40.00	mg/dl
Triglyceride	79.00	lo	0.00		80.00 - 115.00	10.00 - 195.00	mg/dl
T4	11.80	HI	0.00		5.40 - 9.69	4.70 - 11.40	mcg/dl
T3	23.20	LO	0.00		27.60 - 33.06	24.00 - 38.90	%
T7	8.66	Opt	0.00		5.80 - 11.80	3.60 - 14.00	
TSH	0.00		0.00		2.50 - 4.20	0.35 - 5.50	mIU/l
Serium Iron	100.00	Opt	0.00		85.00 - 120.00	50.00 - 180.00	mcg/dl
Red Blood Count	4.93	Opt	0.00		4.50 - 5.50	4.50 - 5.50	m/cumm
Hemoglobin	13.60	lo	0.00		14.00 - 15.00	12.00 - 16.00	gm/dl
Hematocrit	40.80	Opt	0.00		40.00 - 47.00	37.00 - 47.00	%
MCV	82.70	lo	0.00		85.00 - 97.00	82.00 - 99.00	cu.m
MCH	27.70	Opt	0.00		27.00 - 31.00	27.50 - 32.50	pg
MCHC	33.50	Opt	0.00		32.00 - 34.00	32.00 - 36.00	%
Platelets	243.00	Opt	0.00		175.00 - 250.00	150.00 - 450.00	k/cumm
White Blood Count	5.30	Opt	0.00		5.00 - 8.00	4.80 - 10.80	k/cumm
Polys (SEGS-PMNS)	67.30	hi	0.00		55.00 - 65.00	50.00 - 70.00	%
Lymphocytes	18.30	LO	0.00		25.00 - 40.00	20.00 - 40.00	%
Monocytes	11.40	HI	0.00		3.00 - 7.00	1.00 - 8.50	%
Eosinophils	2.30	Opt	0.00		0.00 - 4.00	1.00 - 5.00	%
Basophils	0.70	hi	0.00		0.00 - 0.00	0.00 - 1.00	%
CRP C-Reactive Protein	0.50	hi	0.00		0.00 - 0.00	0.49 - 0.51	mg /L
Creatine Kinase	66.00	Opt	0.00		50.00 - 150.00	26.00 - 174.00	u/l
Erythrocytes Sed Rate ESR	5.00	Opt	0.00		0.00 - 8.00	0.00 - 9.00	mm/HR
Total Cholesterol / HDL Ratio	2.92	Opt	0.00		0.00 - 4.00	0.00 - 5.00	ratio

Personal Vitamin and Supplement Program for LL 7995					
Vitamin or Supplement	Dosage Per Unit	AM	Noon	PM	Bed
Beta Carotene (A-Caro)	25000 I.U.	1		1	
Vitamin C (Ascocid 1000)	1000 mg.	1	1	1	
Chromium Picolinate w/ boron	200 mcg.	1		1	
Hepatagen	1	2		2	
Herbal Defense Complex	1	2		2	
Magnesium Glycinate	100 mg.	1	1	1	
Calcium (MCHC)	250 mg.	1	1	1	
Monolaurin	300 mg.	3	2	2	2
B6 (Neuro-K-500)	500 mg.	1			
Niacinamide	500 mg.	1		1	
Zinc	50 mg.	1			

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

END OF THIRD REPORT

FOURTH REPORT

PATIENT: LL

DATE OF BLOODTEST: 6/11/99

DATE OF ANALYSIS: 6/18/99

DATE OF PREVIOUS TEST (S): 12/9/98, 3/12/99

SEX: F

WEIGHT: 190

AGE: 51

BLOOD TYPE: B

Presenting Symptoms: Hard coughing with phlegm every morning; just about every day vomits with thick phlegm; her chest gets tight; is tired all the time; medications make her tired; has had deep depression; is sensitive to smells; clears her throat a lot due to the mucous; gets 2-3 headaches a week; gets dizziness from her coughing spells and from not eating; had a bronchial infection and a urinary tract infection this year and was on antibiotics once; has frequent urination due to the medication; had a gall bladder removed in '76; has gained 50 lbs. in the last five years; has lost weight before, will lose weight and then gain it back; energy is decreasing and is worse than it was five years ago; notices that she coughs more when eating white sugar; may be lactose intolerant because she gets diarrhea when drinking milk; has been drinking soy milk for one month; does get diarrhea or constipation; has about one bowel movement a day; has a lot of gas and bloating; has reflux 1-2 hrs. after eating; takes long naps and sleeps about ten hours a night, will wake up about 1time; does cough at night; drinks one cup of coffee a day, one cup of green tea a day and drinks 1-2 diet Cokes a week; was on the birth control pill for nine months years ago but got terrible headaches; had a partial hysterectomy in '82; has never had menopausal symptoms

Previous Test Findings: High GGT at 122; High SGOT at 307; High SOPT at 485; High LDH at 254; Low Lymphocytes

Test Findings: Mildly High Liver Enzymes; Low Serum Iron; High C-Reactive Protein; High Sed Rate; Possible Infection

Medications: *[All reactions are from the PDR 19951:* Premarin; Hydrochlorothiazide (for blood pressure) since Nov. '98; Was on Prinivil before that for one year; Nasacort once a day; Pulmicort twice a day; Some Vitamins (C, E, Zinc, Calcium, Magnesium and B12)

Note: As of 3/26/99 she is off all her drugs and feels better; off of coffee.

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.

Overall, good job, LL. You can see that your liver enzymes have improved dramatically. Your total bilirubin and alkaline phosphatase are normal. Your LDH is down to 172. Your SGOT was at 307 and is now down to 48. Your SGPT was at 45 and is now down to 43. Your GGT was at 122 and is now down to 21. Your liver is still a little bit sick, especially with the SGPT being at 48. It is not so critical at this time.

Your thyroid shows nice improvement, although it is still a little out of balance. Most all of your minerals are better as well as your protein.

The areas that we see that need the most work have to do with the C-reactive protein, sed rate and probable infection. This is indicated by the high polys, low lymphocytes and high monocyte count. For this, I would like you to take Vitamin C at 3/day, Beta Carotene at 2/day, Chromium Picolinate at 2/day, Hepatagen at 2/day, Magnesium at 3/day, Calcium at 3/day, B6 500 at 1/day, Zinc at 1/every other day, Monolaurin at 4/day, Thymus at 4/day, Garlic at 3/day and a multiple vitamin at 3/day. I know we didn't reduce these much, but the high C-reactive protein and high sed rate can be early signs of metabolic dysfunction. We need to get this problem corrected as well.

Good job. You did a nice job following the program. I would think that you are feeling even better. Although, quite honestly, this little infection may set you back a little bit. Follow the same hypoglycemic program. I would like to keep an eye on the liver.

A retest of the liver panel, C-reactive protein, sed rate and a CBC is desired in three months.

Please keep this report for future reference.

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/vlb

Test Description	Current Result	Current Rating	Prior Result	Delta	Homeostatic	Clinical	Units
Date	06/11/99						
Glucose	94.00	Opt	0.00		85.00 - 100.00	65.00 - 110.00	mg/dl
Hemoglobin A1C(Gly-Hgh)	5.50	hi	0.00		4.00 - 5.40	3.40 - 6.10	%
Uric Acid	3.80	lo	0.00		4.00 - 6.00	2.50 - 8.00	mg/dl
Blood Urea Nitrogen (BUN)	12.00	lo	0.00		13.00 - 18.00	10.00 - 20.00	mg/dl
Creatinine	1.00	Opt	0.00		0.60 - 1.00	0.50 - 1.50	mg/dl
BUN / Creatinine Ratio	12.00	lo	0.00		13.00 - 17.00	7.50 - 18.50	ratio
Sodium	139.00	lo	0.00		140.00 - 144.00	138.00 - 146.00	meq/dl
Potassium	4.10	Opt	0.00		4.00 - 4.60	3.50 - 5.50	meq/dl
Chloride	105.00	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	9.20	lo	0.00		9.70 - 10.10	8.60 - 10.70	mg/dl
Phosphorus	3.70	Opt	0.00		3.40 - 4.00	2.40 - 4.60	mg/dl
Total Protein	7.10	Opt	0.00		7.10 - 7.60	6.00 - 8.00	gm/dl
Albumin	4.00	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	1.20	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	68.00	Opt	0.00		60.00 - 80.00	41.00 - 138.00	mu/ml
Creatine Kinase	125.00	Opt	0.00		50.00 - 150.00	26.00 - 174.00	u/l
LDH	172.00	hi	0.00		120.00 - 160.00	100.00 - 225.00	mu/ml
SGOT (AST)	48.00	HI	0.00		18.00 - 26.00	0.00 - 40.00	mu/ml
SGPT (ALT)	43.00	hi	0.00		18.00 - 26.00	0.00 - 47.00	mu/ml
GGT	21.00	Opt	0.00		1.00 - 36.00	0.00 - 65.00	mu/ml
Serium Iron	39.00	LO	0.00		85.00 - 120.00	50.00 - 180.00	mcg/dl
Ferritin	182.00	Opt	0.00		12.50 - 218.30	10.00 - 291.00	ng/ml
Cholesterol	190.00	hi	0.00		150.00 - 180.00	140.00 - 200.00	mg/dl
Triglyceride	79.00	lo	0.00		80.00 - 115.00	10.00 - 195.00	mg/dl
HDL Cholesterol	74.00	Opt	0.00		55.00 - 120.00	35.00 - 55.00	mg/dl
VLDL	15.00	Opt	0.00		5.00 - 20.00	5.00 - 40.00	mg/dl
LDL Cholesterol	100.00	Opt	0.00		50.00 - 110.00	65.00 - 130.00	mg/dl
Total Cholesterol / HDL Ratio	2.50	Opt	0.00		0.00 - 4.00	0.00 - 5.00	ratio
T4	9.90	hi	0.00		7.00 - 9.00	5.50 - 13.00	mcg/dl
T3	29.00	LO	0.00		36.00 - 40.00	32.00 - 43.00	%
T7	2.80	Opt	0.00		2.60 - 3.60	2.10 - 4.70	
CRP C-Reactive Protein	9.00	HI	0.00		0.00 - 0.00	0.00 - 4.90	mg /L
White Blood Count	5.80	Opt	0.00		5.00 - 8.00	4.80 - 10.80	k/cumm
Red Blood Count	4.66	Opt	0.00		4.50 - 5.50	4.50 - 5.50	m/cumm
Hemoglobin	13.90	lo	0.00		14.00 - 15.00	12.00 - 16.00	gm/dl
Hematocrit	40.20	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	29.90	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	165.00	lo	0.00		175.00 - 250.00	150.00 - 450.00	k/cumm
Polys (SEGS-PMNS)	71.00	HI	0.00		55.00 - 65.00	50.00 - 70.00	%
Lymphocytes	17.00	LO	0.00		25.00 - 40.00	20.00 - 40.00	%
Monocytes	10.00	HI	0.00		3.00 - 7.00	1.00 - 8.50	%
Eosinophils	2.00	Opt	0.00		0.00 - 4.00	1.00 - 5.00	%
Basophils	0.00	Opt	0.00		0.00 - 0.00	0.00 - 1.00	%
Erythrocytes Sed Rate ESR	15.00	HI	0.00		0.00 - 8.00	0.00 - 9.00	mm/HR

**Personal Vitamin and Supplement Program
for LL 7995**

Vitamin or Supplement	Dosage Per Unit	AM	Noon	PM	Bed
Beta Carotene (A-Caro)	25000 I.U.	1		1	
Vitamin C (Ascocid 1000)	1000 mg.	1	1	1	
Chromium Picolinate w/ boron	200 mcg.	1		1	
Garlic	345 mg.	1	1	1	
Hepatagen	1	1		1	
Magnesium Glycinate	100 mg.	1	1	1	
Calcium (MCHC)	250 mg.	1	1	1	
Monolaurin	300 mg.	2		2	
B6 (Neuro-K-500)	500 mg.	1			
Thymus	140 mg.	2		2	
Ultra Preventive III (Multiple)	1	1	1	1	
Zinc	50 mg.	1			

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

END OF REPORT

DOCTOR'S COMMENTS:

I can't imagine how depressing it must be or how hopeless one must feel to have a problem for so long. What's worse is to have seen 10 medical doctors in the last 5 years, which provided no help at all. It's easy to see why LL was depressed. I would be depressed too if I felt this bad and nobody had any answers. It's really exciting to see how the body can heal and repair itself in a very short period of time if you can identify exactly what the body needs.