

Diabetes – Special Report # 3

How To Naturally Control Diabetes And Hypoglycemia

***...What Your Doctor Doesn't
Tell You!***

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This Special Report does not intend to diagnose disease, nor to provide specific medical advice. Its intention is solely to inform and to educate. The author intends that readers will use the information presented in this report in cooperation with the advice of a qualified health professional trained in such field.

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INTRODUCTION

If someone were to ask you what the most epidemic disease of the so-called '*civilized world*' was, what would be your answer? You might say *Cancer*.

Cancer is certainly the most feared of modern-day diseases. You might choose *Heart Disease*. This condition still kills more people around the world than any other single cause. Yet, neither of these conditions is the most epidemic. When we refer to an epidemic we mean a disease or condition, which is on the rapid rise and is spreading with unusual speed.

Adult-Onset Diabetes or Type II Non-Insulin Dependent Diabetes is the epidemic of the Twentieth Century. It is rising in numbers, faster than all other Chronic Degenerative Diseases combined. Diabetes is so common in the United States that almost everyone alive knows someone who has the disease.

According to the National Institutes of Health, there are about 8 million diagnosed Diabetics in America, and at least that many who have not been diagnosed. There are over 700,000 new cases of Diabetes every year, that's one about *every 30 seconds*. To make matters worse, each year, tens of thousands of Americans lose their eyesight, compromise their circulation, suffer irreversible heart damage, require the amputation of a lower limb or die due to Diabetes!

Of all these cases of Diabetes, ninety percent of them are the Adult-Onset, Type II variety. Only ten percent are genetically induced, Type I or Juvenile-Onset. The sad part about this statistic is that Adult-Onset, Type II Diabetes is completely controllable and very often reversible WITHOUT the need for dangerous drugs or worse yet, the misuse of Insulin.

Type II Diabetes is, almost exclusively, caused by dietary abuse. In this Special Report we will examine the cause, progression and reversal of this needless, Chronic Disease, which robs millions and millions of people of both the quality and quantity of their lives.

Hypoglycemia, or more accurately low blood sugar, is frequently the precursor to Adult-Onset Type II Diabetes, it is even more common in occurrence. If left unchecked, Hypoglycemia can devastate the lives of its victims, while providing them with better than a 9 to 1 chance of progressing to Diabetes later in life. This condition, like Diabetes, is completely dietary induced and can be controlled. Let's find out how.

Hypoglycemia: The Undiagnosed Disorder

For many decades, Hypoglycemia was both shunned and denied by the mainstream medical profession. Millions of people went to their physicians with a long list of debilitating symptoms, only to be told that they were all psychological and if they persist, psychiatric help may be necessary. This 'mis-diagnosis' only led these people to further and further desperation. Many of them even resorted to such drastic measures as suicide. This, in turn, further fueled the argument that these people were suffering from a mental disorder.

Today, we know that Hypoglycemia or low blood sugar is both real and very common. It is THE Chronic Condition of the Twentieth Century. Like many such chronic illnesses, Hypoglycemia was virtually unknown at the turn of the last century. This means that these conditions have escalated to epidemic proportions in less than 4 generations!

Whenever we see such an incredible rise in a non-contagious disease condition, we cannot help but look towards the environment for answers. Remember, that which affects the human biochemistry most directly is food consumption.

At the turn of the last century, the average person consumed five to seven pounds of sugar per year. Today, we all consume at least our own body weight in sugars every single year! Further, the refining of whole wheat into white flour has produced a substance that is, chemically, one small step away from sugar. This means everything made from white flour contributes to the overall consumption of sugars that the internal biochemistry must regularly deal with.

After months or years of this continual onslaught against normal chemistry, the body loses the ability to regulate sugars. This produces rapid rises and falls in the level of glucose in the bloodstream. Low blood levels of glucose would be Hypoglycemia, and high levels of blood glucose would be an indication of Diabetes. Two seemingly opposite problems but with the same basic cause, namely, excess sugar, and sugar-forming foods in the diet.

While there can be several causes for clinical Hypoglycemia such as excess alcohol consumption, stress, or certain prescription drugs, ninety-nine percent is the result of dietary abuse.

The symptoms of Hypoglycemia are many and can come and go with great regularity. This often makes the disorder difficult to diagnose. The only scientific way to determine clinical Hypoglycemia is through the 6 hour Glucose Tolerance Test. (Anything less than 6 hours is non-conclusive)

The number and frequency of certain symptoms is also a valid determining factor for the presence of Hypoglycemia. Let's look at these many symptoms, keeping in mind that you may experience more than one of these symptoms at the same time. They may come and go, only to return again.

If you experience any significant number of these symptoms on a somewhat regular basis, you can be fairly certain that you have Hypoglycemia, and if left unchecked, will likely progress to Diabetes.

- * *Headache*
- * *Blurred or double vision*
- * *Mental confusion*
- * *Tingling sensation in fingers or tongue*
- * *ringing in the ears*
- * *Elevated pulse rate (even when resting)*
- * *Difficulty in tasting sweet foods (needing more sugar)*
- * *Irritability*
- * *Anxiety*
- * *Emotional outbursts*
- * *Reduced physical coordination*
- * *Tiredness or even fatigue*
- * *Weakness*
- * *Sudden awakening from a sound sleep*
- * *Rapid and shallow breathing*
- * *Nervousness*

- * *Hot flash feelings*
- * *Cold and clammy skin*
- * *Restlessness*
- * *Nausea*
- * *Overweight by more than 25 pounds*
- * *Insomnia*
- * *Nightmares*

If you experience eight or more of these symptoms on a regular basis, and other possible causes have been ruled out, you can consider yourself a Hypoglycemic.

There are two types of Hypoglycemics. The most common form occurs along with excess bodyweight. The second, more obscure form, produces normal or likely an underweight condition. The cause of both is the same, namely excess insulin in the bloodstream, but the manner in which we manage the conditions differs slightly. (See the management protocols for both Type I and Type II Hypoglycemia later in this Report)

Medically, the cause of Hypoglycemia, most all obesity, and Adult-Onset Diabetes is called Hyperinsulinemia, or excess Insulin. In the Hypoglycemic patient, excess Insulin is produced by the Pancreas and subsequently drives the level of blood sugar, down below the optimal level. This dip in blood sugar for prolonged periods of time produces the many side effects and symptoms listed above.

Typically, when we feel weak and flushed from loss of blood sugar, our first reaction is to eat some more sugar. When we do this, the blood glucose once again rises rapidly, stimulating another Insulin response which in turn, lowers blood sugar below normal again. This produces the yoyo effect of 'highs and lows' so common with Hypoglycemics.

What is Insulin?

In order to understand these conditions more clearly, it is essential to understand the cause. Each is caused by an excess of the hormone Insulin, which is produced by the Pancreas, circulating in the blood. Insulin is the glucose-regulating hormone and, in healthy individuals, is produced on an as-needed basis according to the levels of glucose present in the blood.

Many people are of the erroneous thought that Insulin burns up excess Glucose. It does not! Insulin serves to transport excess Glucose to the body's various storage sites. The first and normal site for Glucose storage is in the Liver and muscles. Insulin converts the blood glucose into a substance called Glycogen, which is 'stored sugar'. This is then transported to the Liver and muscles. This is unfortunate for those following the Standard American Diet (SAD), which is filled with sugar, because the body's ability to store Glycogen is very limited.

Once all the storage sites for Glycogen are full, Insulin further converts blood Glucose into another substance called Triglycerides and these are then carried by Insulin to the fat cells of the body. This is why most Hypoglycemics and virtually all Type II Diabetics are overweight.

In order to control most Obesity, Hypoglycemia and Type II Diabetes, we must control the amount of Insulin present in the bloodstream.

Currently, there are no drugs which can reduce or limit the production of Insulin. There is only one way. That is by eliminating the foods that cause Insulin to be produced. (Called the Insulin Response) All sugar and sugar forming foods (Carbohydrates) eventually break down into Glucose.

The key is the speed with which this breakdown occurs. The faster the conversion, the more Insulin is secreted into the bloodstream, setting the stage for the Insulin disorders of Obesity, Hypoglycemia and Diabetes.

Our body needs some Glucose, but much, much less than the average junk food diet provides. Through this constant excess, Insulin is not only over produced but the receptor sites for that Insulin become de-sensitized, requiring more and more Insulin to do the job. (See the next section on Diabetes)

Unfortunately, this whole cycle of Insulin production and response can develop into a terrible downward spiral. As more and more Insulin is produced from excess sugars in the diet, more and more of it is converted to Triglycerides and stored in the fat cells. As the fat cells increase, the body becomes more and more overweight. As the body weight rises, Insulin becomes less and less effective, requiring the body to produce higher and higher amounts, which in turn, cause a greater and greater weight gain, which starts the cycle all over again.

The Importance of Weight Control

After the first few weeks of infancy have passed, we have all the fat cells we will ever have. You cannot make anymore. The fat cell, however, has the ability to continue to increase in size depending upon how much stored sugar, or Triglyceride, it must hold. As the fat cells become larger and larger, their responsiveness to Insulin decreases, causing the need for ever higher amounts of Insulin in order to remove excess sugars from the bloodstream.

Since it is the excess Insulin that causes Obesity, Hypoglycemia and Diabetes in the first place, controlling and normalizing body weight is essential in the regulation of the Insulin/Glucose cycle.

For those persons who are overweight and also have either Hypoglycemia or Diabetes, a reduction in bodyweight, frequently reduces symptoms, or in some cases, eliminates them altogether without any other protocol. These individuals respond extremely well to a Controlled Carbohydrate Diet which counts and limits the amount of sugar-forming foods eaten each day. With a reduction in available Carbohydrates, Insulin production is greatly reduced. With the normalizing of Insulin levels, excess bodyweight is slowly removed.

Through reducing the bodyweight and the Insulin production, Hypoglycemia and Diabetes are easily controlled with the help of a few assisting co-factors (see protocols later in this Report).

There are many effective exercise programs which will not only help accelerate fat loss but also help the body to use Insulin more effectively. When we exercise, several physiological benefits occur.

Muscles need energy to perform. When we exercise, we increase the need for fuel for the muscles. That fuel is Glucose, therefore, exercise increases the uptake of Glucose by the muscle cells. This in turn naturally reduces blood Glucose. This means that the body needs less Insulin to regulate blood sugar, reducing the peaks and valleys so common in all these blood sugar disorders.

Diabetes: The Final Insult of Excess Insulin

Very few people are born with Diabetes. Those that are, are called Juvenile-Onset, or Type I Diabetics and they make up only about ten percent of the total number of Diabetes cases world-wide. The rest of the Diabetes which has reached epidemic proportions, is the result of continual dietary abuse over years, or even decades, of time.

Almost all Adult-Onset Diabetics were first Hypoglycemic. But since that condition went undiagnosed and untreated, they progressed ever onward to the final phase of insulin-induced disorders, namely, Diabetes.

Clinically, Diabetes is Hyperglycemia, or excess blood sugar. In the Adult-Onset Type II Diabetic, this is almost always caused, not by a lack of Insulin, but by a defect in the Insulin receptor sites. Through years and years of dietary abuse, creating a situation of excess sugar in the body, Insulin was forced to convert that sugar into Triglycerides and store that molecule within the fat cell.

In order to accomplish this, Insulin must attach itself to a particular site on specific cells of the body, called the Insulin receptor sites. Through years or decades of excess and subsequent abuse, these receptor sites become de-sensitized, requiring more and more Insulin to do the job of removing the excess sugar. This is why most all Type II Diabetics have normal or even higher than normal levels of insulin in their bloodstream.

Treating these individuals with drugs that increase Insulin production or, worse yet, through Insulin itself, by injection, only makes the disease ultimately worse.

The Type II Diabetic needs to reduce available sugars and sugar-forming foods from the diet in order to take the demand off of the Insulin receptor sites to constantly have to convert this excess sugar and store it away. This will reduce the presence of Insulin in the blood stream, thereby reducing the symptoms of Diabetes and the other related Insulin disorders.

Excess Glucose, or sugar in the blood, is one of the body's true emergencies and it will attempt to lower that blood sugar by almost any means. Individuals with constant high blood sugars have a much greater chance of developing a variety of other Chronic Degenerative Diseases and do so much earlier in their lives.

Osteoporosis, poor skin condition, inflammation of the joints (Arthritis), poor circulation, amputations and Heart Disease are just some of the side effects that occur much more frequently when the body's balance of blood sugar and insulin goes astray.

It is important to remember that Type II Diabetes develops slowly over the years. This is one of the reasons why this disease is so insidious. Often, by the time the disease has been diagnosed, the patient has already suffered considerable damage to nerves, blood vessels, the Heart, the Eyes and even the Brain. I have often called Type II Diabetes the non-contagious Leprosy of the 20th century. Diabetes eats away at multiple organ and tissue systems, slowly but steadily destroying the quality of life for the sufferer inch by inch.

The symptoms of Diabetes are often very subtle in nature and can begin so slightly that we hardly even notice their presence. Some of the more common initial warning signs of Type II Diabetes include:

- * Excessive thirst
- * Frequent urination
- * Wounds which heal slowly
- * Fatigue and excessive tiredness, especially after eating
- * A breath which smells like 'acid'
- * An increase in infections
- * Abnormal weight loss without an obvious cause
- * Loss of libido (sexual desire)

While there are certainly other signs of this disease, if you have even one of these on a regular basis, you should have your blood sugar checked. You can do this quite accurately by obtaining any one of a variety of Glucose Test Strips, which are available without a prescription at any pharmacy. If the test strips show any deviation from normal, you should have a blood test to determine a more accurate blood sugar level.

Factors that Worsen Diabetes

In addition to the obvious dietary factor of excess sugars, which we have been discussing, there are other situations, both environmentally and chemically, which can make Diabetes worse.

I have often said that stress is the cardinal cause of all illness and it certainly plays a direct role in the process of Diabetes. During periods of stress, it is not uncommon for a Diabetic to observe sudden rises in blood sugar. This phenomenon can occur even if the stress was brief, but severe.

Life changing events, such as the loss of a job, spouse or relative, can produce such stress as to cause the onset of Diabetes in someone who has not yet even been diagnosed with the illness. For this reason, any program that wishes to address the complete needs of the Diabetic should include nutritional support for the nervous system as well as support for glucose metabolism.

Other common circumstances which can adversely affect Insulin and subsequently Insulin-induced disorders, include anesthesia, the abuse of anti-inflammatory drugs, and infections in the body. Under each of these circumstances, a person prone to Insulin-induced diseases should pay particular attention to their blood sugar levels and have them checked more frequently than at other times.

Summary of Insulin-Induced Disorders

It can now clearly be seen that excess Insulin in the body causes numerous health challenges at varying levels. Let's summarize the levels of what we call Carbohydrate Intolerance, or Hyperinsulinemia, in their order of severity.

Carbohydrate Intolerance - As the first level of Insulin resistance, Carbohydrate Intolerance produces excess body weight. In fact this is the primary cause of at least seventy-five percent of all obesity! At this stage, the individuals may experience some fluctuation in blood sugar but likely those symptoms will be few and far between. Fatigue, cravings for sugars and poor appetite are the likely symptoms of this phase.

Hypoglycemia - Low blood sugar caused by the body's inability to regulate Insulin production is the second phase of Carbohydrate Intolerance. These individuals begin to experience some or many of the symptoms listed earlier under our discussion of Hypoglycemia.

There are two types of chemistry involved in low blood sugar. First there is the Hypoglycemic with obesity. This is the most common form and, fortunately, the easiest to control. The second form of Hypoglycemia produces an underweight condition. These individual must follow a modified program, which we will outline shortly.

Diabetes - The final insult to the human chemistry, in the process of Insulin excess, is Diabetes. There are also two forms of this condition as well. Firstly, there is Juvenile-Onset, or Type I Diabetes. This is genetically driven and virtually all these individuals will be insulin-dependent for their entire lives. This is the most difficult form of Diabetes to manage, but fortunately, it accounts for only about ten percent of all Diabetes cases. Even with the delicate manner in which it must be handled, Type I Diabetics can still benefit immeasurably from this program.

The second form of Diabetes is, of course Adult-Onset Type II Diabetes. It is this form, which occurs usually after the age of 30, that makes up the epidemic numbers of Diabetes cases we are seeing every year. These individuals do not suffer from a lack of Insulin, but rather have too much Insulin, producing a host of side effects. It is the Type II Diabetic for which this program has had the greatest life-saving effect.

This condition is one hundred percent dietary induced and, therefore, can be reversed through proper diet and dietary supplement programs such as the program we will be outlining a little later. No matter what stage of this disease process you may find yourself, you can greatly improve or even reverse your condition if you make the conscious decision to take responsibility for your life and follow the program that follows.

What Do You Do Now?

OK, now let's say you have one of these insulin-induced disorders such as Obesity, Hypoglycemia or Type II Diabetes. Where do you go from there? With a few small modifications, the management of all these conditions is basically the same.

We will do so with a combination of dietary restriction and specific dietary supplementation. The following section will explain the full protocol of diet and supplementation, which will be necessary for the control and, in many cases, even the reversal of your Hypoglycemia or Diabetes, but it will work only if you follow it exactly. Any variation from this basic program will produce less than optimal results. Those areas where specific factors apply to certain specific conditions, we will note them accordingly.

Otherwise all the insulin-induced disorders we have talked about so far will benefit from the same program.

Protocol for Managing and Reversing Hypoglycemia & Diabetes

Dietary Factors:

As with most Chronic Degenerative Diseases, diet plays a significant role in the development and subsequent reversal or management of Hypoglycemia and Diabetes. If we are ever to master these conditions, it will be essential to regulate the amount of sugar and sugar-forming foods in the diet.

This is best accomplished by not counting calories but rather by counting Carbohydrates. Since all Carbohydrates eventually turn into blood glucose, the amount and type of Carbohydrates consumed plays a direct effect upon the levels of blood sugar and subsequently the amount of Insulin secreted into the bloodstream.

There are several excellent books, which cover Carbohydrate restricted diets in detail. If you are also overweight, you may wish to choose one that also places emphasis upon weight management as well.

A good guideline for determining the amount of sugars and refined carbohydrates often hidden in common foods, may be found in the book called *Calories and Carbohydrates by Barbara Kraus*. This book is published by *Penguin Putnam Inc.*, and the current revised edition is available in most book stores for \$6.99 US.

I strongly recommend that anyone wishing to gain control over the amount of sugars and sugar-forming foods in their diet, obtain this handy book. It even lists favorite fast food restaurant items, giving the Calorie and Carbohydrate count for each.

In your case, you will want to pay attention only to the Carbohydrate count of each food, because, for practical purposes, you will not be concerned with Calories.

It is essential that you begin the program by reducing your total daily Carbohydrate intake to less than 40 grams. (Note: The only exception is if you are a Type II Hypoglycemic who is underweight. See special note below) As your available Carbohydrates begin to fall, if you are a Hypoglycemic, you will experience cravings for sweets which can sometimes be almost overwhelming.

I know that this will be a difficult time but you must stick through it. It will only last a few days and once the cycle of sugar has been broken, the intense cravings will subside. Lingering cravings for sugars will be controlled by specific dietary supplements which we will discuss later in the program. If you are a Diabetic, your blood sugar will very likely fall steadily the longer you restrict your Carbohydrate intake.

For this reason, if you are taking medications and especially if you are taking Insulin, you will need to monitor your blood glucose levels regularly. In the beginning, testing 4 to 6 times per day is not excessive. As your blood sugar falls, if you are taking medications, your doctor will want to, slowly and correctly, begin to reduce the amount of medication you are taking since you will not be needing it in the quantities you were before.

If you add an exercise program to the dietary program, you will achieve results much faster but you will also need to test your blood sugar more often since it will likely fall even faster. As your blood sugar normalizes over the next few weeks, you can gradually increase the number of Carbohydrates in the diet.

Eventually, you will get to the point where, if you are a Hypoglycemic, your symptoms will begin to return. If you are a Diabetic, your blood sugar will once again begin to rise. This is called the Carbohydrate Threshold. It is usually different for each person, so you will have to establish what that number of Carbohydrate Grams would be for you, each day.

Once you know what your threshold for Carbohydrate intake is, you merely must stay 20 percent or so below that figure in order to keep symptoms or blood sugar in control.

Special Note for Underweight Hypoglycemics:

If you have Hypoglycemia and are of normal or especially underweight, you cannot totally restrict your Carbohydrate intake. To do so would produce even greater weight loss and subsequent fatigue. You need to count Carbohydrates but you will have to keep the level above what will produce a further weight loss.

Determine what your Carbohydrate Threshold is by the above means, once you begin reducing your total Carbohydrate intake, at some point you will start losing weight. Increase the Carbohydrate consumption to 10 percent above the level that produces a weight loss. Now you must learn to choose Carbohydrate foods, which keep your weight up but produce a minimal Insulin response. The faster a Carbohydrate breaks down into simple sugars, the faster and greater will be the Insulin response.

For this reason, you must choose complex Carbohydrate foods, which take several hours to slowly break down into simple sugars. Examples would be whole grains such as the black wild rice, breads that are truly whole grain, legumes and certain vegetables. Foods you need to avoid are those containing sugar, honey, molasses, corn syrup or any other forms of simple sugars.

Additionally, you must avoid highly refined starches such as anything made with refined white flour, refined grains and pastas as well as over-cooked root vegetables such as potatoes. All of these foods will convert to glucose too rapidly causing an Insulin response, throwing you into a state of low blood sugar.

As I said earlier, there are sugars hidden in virtually everything that you eat. You may not think that the foods you eat contain any sugar or sugar-forming ingredients, but think again. The following are examples of commonly consumed foods and their sugar content.

<u>Food</u>	<u>Sugar content in Teaspoonfuls</u>
<i>Soda Pop (12 oz)</i>	<i>3-12</i>
<i>All Cakes & Cookies (4 oz serving)</i>	<i>5-10</i>
<i>Candies (1 piece)</i>	<i>1-5</i>
<i>Canned Fruits (½ cup)</i>	<i>2-4</i>
<i>Ice Cream (3 oz)</i>	<i>3-5</i>
<i>Malted Milk Shake</i>	<i>10-16</i>
<i>Jams & Jellies (1 oz)</i>	<i>1-6</i>

You can see how it adds up. Sugars are hidden in other foods as well, such as breakfast cereals, breads, rolls, and anything made from refined white flour. Speaking of breakfast cereals, the leading cereals are between eight and fifty-two percent pure sugar! No wonder our children are Hyper-Active!

(For further information on Attention Deficits and Hyperactivity in Children refer to Special Report # 15 entitled Drug Free Answers to Correcting Learning Disabilities)

I'm the first one to tell you that it is difficult to abstain from the very foods you not only crave, but are actually addicted to, and carbohydrate sensitivity is a genuine addiction. So, rather than leave you to your own frustrations, there are several specific nutrients and nutrient co-factors which can help you win your battle with sugar addiction and make your body function more effectively regarding Glucose and Insulin management.

These nutrients are outlined in the following section, along with specific protocols for their use.

Do I Have To Do It All Alone?

Dietary Supplementation for Hypoglycemia & Diabetes

There is one nutrient, a mineral, which stands out as the pivotal support for the person with insulin related disorders. That mineral is Chromium. Yet, that mineral alone is far more effective when it is properly combined with other nutrient co-factors which will provide a Full Spectrum approach to the problem.

As with any Chronic Degenerative Disease, those suffering from Hypoglycemia or Diabetes need more of certain nutrients, not less. We cannot, however, provide mega-doses of isolated nutrients without first ensuring that all the nutrients needed by the body, on a daily basis, are being provided in the right ratios.

To simply and effectively ensure that these needs are met, we use a Liquid Multiple Vitamin, Mineral, Amino Acid, Phytonutrient formula.

This formula not only provides all of the 100+ nutrients needed for optimal health every day, but provides them in a ratio that is synergistic with their natural ratios within human body tissues. A Full Spectrum Nutritional supplement would include at least the following:

8 - 12 Essential Amino Acids
3 Fatty Acids
16 Vitamins
75 + major, Trace and Micro Trace Minerals
Phytonutrients from fruits and vegetables

Once this base line nutrition has been met, we can proceed with the aggressive supplementing of specific nutrient and nutrient groups. This will assist the body in re-balancing the relationship between Blood Sugar and Insulin. Such a protocol will not only provide the specific nutrients necessary for proper Glucose regulation, but will go far in reducing the cravings for sugars and sugar-forming foods so common in individuals with these disorders.

Nutrient Support For Glucose/Insulin Regulation

In addition to Chromium, the mineral Vanadium, as well as the Amino Acid, Aspartic Acid, have been shown to be very helpful in assisting the body in the regulation of Glucose and Insulin. Following are the ratios of these nutrients, which we have used with tremendous success at The Institute.

This formula, along with Full Spectrum Nutrition, has helped tens of thousands of people live a normal life, free from Hypoglycemia and Diabetes. Together, with the proper diet as outlined earlier, it can ensure that you will not have to progress to further stages of these diseases. Further, you will not have to suffer the numerous and debilitating side effects which arise from excess Insulin in the blood.

<i>Aspartic Acid</i>	<i>300 mg</i>
<i>Chromium</i>	<i>100 mcg</i>
<i>Vanadium</i>	<i>500 mcg</i>
<i>Bilberry Extract</i>	<i>20 mg</i>
<i>Bitter Melon</i>	<i>200 mg</i>
<i>Alpha Lipoic Acid</i>	<i>25 mg</i>

This represents the potency of our formula of choice, in a per capsule dose. We then use six capsules per day (2 with each meal) for two to four weeks. This is followed by using one capsule, three times per day, indefinitely.

Managing Stress

As we illustrated earlier, stress, especially un-manageable stress, can wreck havoc with the glandular systems of the body. Since both Hypoglycemia and Diabetes are endocrine disorders, stress has a rapid and intense negative impact on these conditions. If we are to gain control over these problems, managing stress is very important.

(For steps in the safe management of stress, refer to Special Report # 10 entitled, *Stress Can Kill You!*)

During periods of stress the body can consume very high amounts of certain nutrients. When these nutrients subsequently become depleted, the nerves become irritated and additional stress is even more poorly managed. For this reason, we always use a combination of nutrients in higher amounts when working with Hypoglycemics and Diabetics.

These nutrients, in the following combinations and ratios, have proven time and time again to stabilize the body's many chemical functions through calming and nourishing the central nervous system.

* Vitamin C	1000 mg
* Vitamin B1	50 mg
* Vitamin B2	50 mg
* Vitamin B6	50 mg
* Vitamin B12	500 mcg
* Pantothenic Acid	1200 mg
* Calcium	400 mg
* Magnesium	100 mg
* Adrenal Substance	200 mg
* Valerian Root Extract	200 mg

Well, that is the protocol, just as we have tested and used at our Institute with great results for over 10 years. It is relatively simple, but likewise, it is important that you follow it exactly.

If you have Hypoglycemia or most especially, Adult-Onset Type II Diabetes, don't be told by doctors, loved ones, or anyone else that your condition is hopeless.

Most physicians do not understand how to treat either of these conditions and because of their misunderstanding of the biochemical processes involved in these disorders, often treat them in exactly the opposite way in which they should be managed. Believe it or not, there are medical doctors who believe that the best way to treat Hypoglycemia is by giving the patient a little sugar every two hours! This is a sure fire way of guaranteeing a patient for life!

These same doctors treat Diabetes much the same way by force-feeding refined Carbohydrates to Diabetics in order to keep their blood sugar up. Why have they never thought of lowering the consumption of sugar-forming foods in these people's diets so that they would not need all those drugs or Insulin?

Medicine is often not founded on logic! For those of you who are suffering with these conditions, I am telling you that there is hope, plenty of hope. But you must TAKE ACTION and DO IT! If you follow the guidelines given in this Report, you will succeed.

Program Summary

Dietary Restriction. It is imperative that you follow a dietary program that reduces the amount of total sugar-forming foods in the diet.

Exercise. A regular exercise program, designed for your age and level of fitness, will accelerate your victory over virtually any phase of Hyperinsulinemia.

Dietary Supplements.

Full Spectrum Nutrition - providing all 100 + nutrients your body needs every day.

Glucose Metabolizing Nutrients - Chromium, Vanadium, Aspartic Acid, Bilberry Extract, Bitter Melon and Alpha Lipoic Acid in mega dose amounts.

Stress Reducing Nutrients - Since stress plays such a direct role in the pathology of carbohydrate intolerance, the addition of stress reducing nutrients is of vital importance.

Nutrients such as vitamin C, Vitamins B1, B2, B6, B12 and Pantothenic Acid are nearly all consumed by the body, during both physical and emotional stress. Carbohydrate Intolerance produces both forms of stress. This stress exercises a direct effect upon the entire endocrine system through the action of the Adrenal Glands.

While this program seems simple enough, it is powerful in the results it can deliver. It is important to remember that Carbohydrate Intolerance, at any level, is a progressive, degenerative process. The longer you ignore your problems, the worse they will become, progressing you from one stage of Hyperinsulinemia to another.

Each step is more debilitating to the body and more difficult to reverse. For this reason, time is of the essence. You must make a conscious decision to change your lifestyle or resign yourself to a life filled with disease.

Each of the formulas and protocols detailed in this Special Report are available exclusively from Phoenix Nutritionals.

Contact www.PhoenixNutritionals.com or by telephone at 1-800- 440-2390 or 858-217-2412 or email Questions@PhoenixNutritionals.com

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