

Back To Chiropractic CE Seminars

Nutrition ~ 6 Hours

- Presented by John B. Campise, D.C.-

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This course counts toward your California Board of Chiropractic Examiners CE. (also accepted in other states, check our website or with your Chiropractic State Board). The California Board requires that you complete all of your CE hours **BEFORE** the end of your Birthday month. We recommend that you send your chiropractic license renewal form and fee in early to avoid any issues.

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Please retain the certificate for 4 years. If you get audited and lose your records, I'll have a copy.

I'm always a phone call away... 707.972.0047 or email: marcusstrutzdc@gmail.com -Marcus Strutz, DC, Back To Chiropractic CE Seminars

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John B. Campise, Doctor of Chiropractic

john@drjohnusa.com 559-285-4121 (Cell)

EDUCATION

- Doctor of Chiropractic, March 2001 – Life Chiropractic College West, Hayward, CA
- Undergrad 90 quarter hours, June 1997 – Santa Clara University, Santa Clara, CA

CHIROPRACTIC TECHNIQUE ADVANCED STUDY

- Neuro-Emotional Technique Certification, January 2006, Dr. Scott Walker, D.C., NET, Inc., Carlsbad, CA
- Applied Kinesiology Certification, May 1999, Tim Francis, D.C., ICAK USA, Sunnyvale, CA
- Carrick Institute Chiropractic Neurology Diplomate Course: 250 hours audited, May 1999

John B. Campise, Doctor of Chiropractic

CONFERENCE PRESENTATIONS

-Neuro-Emotional Technique “Success Seminars” 25th Anniversary. *24 hour clock acupuncture theory correlations to NET and homeopathic support of the chiropractic adjustment.*

CHIROPRACTIC PRACTICE

-Campise Chiropractic private practice, June 2001 - Present, Fresno, CA. General Practice with a focus on nutrition, wellness, and rehabilitation of traumatic brain injuries.

-Dr. Kotsonis, D.C., DACNB Chiropractic Office, Jan 2015 - Dec 2015, Clinton Township, MI. General practice with a focus on stroke rehabilitation. For 2 weeks every month Dr. Campise was trained by and filled in for Dr. Kotsonis while he recovered from lumbar spinal fusion surgery.

Legal Disclaimer



Please be advised that everything contained within this PowerPoint and/or within this lecture is not intended to be clinical advice, counseling or advice for any patient.

The examples contained herein are for the comprehension of nutrition/labs and is intended for nothing other than informative continuing education purposes.

All protocols herein should not be used until proper history, exam and special studies have been completed and assessed.

Nutrition - 6hrs Overview

The three nutrients covered:

- 1) Vitamin D
- 2) Omega 3
- 3) Iodine

Each nutrient has the following sections:

- Testing
- How to supplement
- Alternatives to supplementation
- High Risk Patient Profile
- Symptoms of insufficiency
- Conditions made worse by insufficiency
- Diseases caused by deficiency
- Biochemistry of nutrient
- Overdose risks/Other dangers

Nutrition - 6 hrs

Definitions:

Deficiency: A state whereby the patient has such a low level of the nutrient in their body that it causes a disease state.

Insufficiency: A state whereby the patient does not have a frank nutrient deficiency disease, but has suboptimal levels of the nutrient in their body. Insufficient (suboptimal) levels of nutrients can cause various sets of symptoms or may aggravate existing conditions.

Vitamin D





Vitamin D: Testing



Blood test to order:

25(OH)Vitamin D

(Do **NOT** test 1,25 (OH) vit D, this is a test for kidney failure patients.

This is a common mistake that even medical doctors routinely make.)



Vitamin D: Testing



“Normal blood test range”:

According to Quest: 20-70 ng/ml,

According to Labcorp: 30-100 ng/ml



Vitamin D: Testing



“Optimal Level” for blood test,
according to the average vitamin D researcher:

40-60 ng/ml minimum



Vitamin D: Testing



“Optimal Level” of Vitamin D
according to Dr. Campise:
80 ng/ml



Vitamin D: Testing



How often to test:

Test every 30 days until the patient's blood reaches optimal level then...



Vitamin D: Testing



Ongoing testing routine for adults:

Test every 6 months,

(Spring and Fall)

to ensure optimal dosing and find differences between summer and winter sun exposure.



Vitamin D: Testing



Testing for children:

Pinprick blood droplet testing is available:

<https://www.grassrootshealth.net/>



Vitamin D: How to Supplement

- Supplement with vitamin D3 orally, it is best to take it daily.
- Patients can take their vitamin D once per day, spreading out the daily dose over the day is **not necessary**.



Vitamin D: How to Supplement

-Anywhere from 2,000 to 20,000 iu of daily vitamin D may be needed to reach optimal blood test results, depending on each patient's unique situation.



Vitamin D: How to Supplement

- Dr. Campise starts patients with 4,000 iu daily then rechecks their blood in 30 days.
- If they are still below 80 ng/ml, then he increases their daily dose and rechecks in another 30 days.
- Repeat as needed.



Vitamin D: How to Supplement



- There is no way to know how much vitamin D a patient needs to take daily in order to reach a blood level of 80 ng/ml.
- There are some guidelines (skinny short patients tend to need less, and overweight tall patients tend to need more), but you never know, without testing the blood, whether the patient is taking the right dosage of vitamin D.



Vitamin D: How to Supplement

- Take vitamin D supplements with a fatty meal for best absorption.
- Any brand of Vitamin D should work fine.



Vitamin D: How to Supplement

- If patients forget to take their vitamin D one day, they should take a double dose the next day and so on.
- A large 7X dosage, once per week, can partially work, but for optimal health results, the best routine is daily intake.



Vitamin D: Alternatives to Supplementation

Sunbathing:

-Lay out with bare skin exposed at solar noon for 15 minutes face up, then 15 minutes face down. (Time varies depending on skin type and degree of tan).



Vitamin D: Alternatives to Supplementation

Sunbathing:

- Do not use sunblock while sunbathing:
it blocks vitamin D absorption.
- Be sure not to burn. Sunbathing is healthy
as long as you don't burn.



Vitamin D: Alternatives to Supplementation

Sunbathing:

-Depending on the time of day, latitude, time of year, altitude, smog levels, local ozone layer thickness, cloud cover, age, and skin color/darkness of tan, the amount of D produced in your skin varies between 0 and 10,000 iu per 15 minutes of sun exposure. (Natural upper limit is 20K iu, as UV light begins to break down the excess D in the skin).



Vitamin D: Alternatives to Supplementation



Diet:

Eat wild caught fish:

The vitamin D content of fish varies between 0 and 400 iu per 3 oz depending on type and source of fish.



Vitamin D: Alternatives to Supplementation



Diet:

Eat wild caught fish:

Farmed fish may not contain vitamin D depending on what the farmer fed the fish.



Vitamin D: Alternatives to Supplementation



Diet:

Eat wild caught fish:

Fish get their vitamin D from their food chain which starts with microalgae (which makes its D from sunshine).



Vitamin D: Alternatives to Supplementation



Diet:

Eat wild caught fish:

For most, trying to get all of your vitamin D from eating fish would be very hard to accomplish without eating fish at every meal.



Vitamin D: Alternatives to Supplementation

Bottom line:

-Order blood tests to definitely know the patient's vitamin D status and increase any combination of D sources until subsequent blood tests reach desired optimal level, then...





Vitamin D: Alternatives to Supplementation



Monitor the patient's blood levels with a blood test twice per year.

Spring and Fall

Quest: 20-70 ng/ml,

Labcorp: 30-100 ng/ml,

Scientists: 40-60 ng/ml,

Dr. Campise: 80 ng/ml



Vitamin D: High Risk Patient Profile

Obese Patients

-Adipose tissue traps vitamin D so that it's not available to blood and body tissues.



Vitamin D: High Risk Patient Profile

Darker skinned Patients

-Melanin can absorb Ultraviolet B (UVB) light so that it is not available to convert cholesterol metabolites into vitamin D as easily.



Vitamin D: High Risk Patient Profile



Elderly

-Aged skin produces less vitamin D during sun exposure than younger skin



Vitamin D: High Risk Patient Profile

Avoids sun exposure

- Pale skin
- Vampire look
- Regular sunscreen use





Vitamin D: Possible Symptoms of Insufficiency

joint pain

muscle pain

muscle twitches (fasciculations)

muscle cramps

bone pain



Vitamin D: Possible Symptoms of Insufficiency

fatigue

insomnia

jaw clenching or grinding

anxiety



Vitamin D: Conditions Made Worse by Insufficiency

- Recurring infections of any type (impaired immune function)
- Frequent colds and flus
- High blood pressure (hypertonic smooth muscles of arteriole walls)



Vitamin D: Conditions Made Worse by Insufficiency

- Too many Braxton-Hicks (“normal” /“practice” non-labor uterine contractions during pregnancy)
- “Premature” contractions of pregnancy
- Pre-eclampsia (high blood pressure during pregnancy)



Vitamin D: Diseases Caused by Deficiency

-Rickets (weak bones in children)

-Osteomalacia (weak bones in adults)



Vitamin D: Low D causes: Strong Evidence; No Consensus

- Autoimmune disease
- Cardiovascular disease
- Cancer



A nice paper by Dr. Hollick, MD, PhD, about this topic:

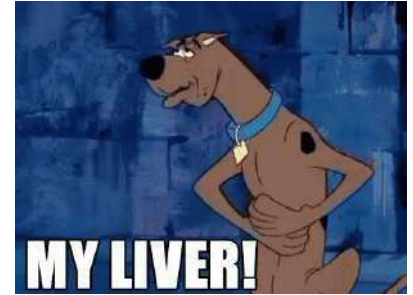
<https://pubmed.ncbi.nlm.nih.gov/28516265/>

“True prevention must include assessing and correcting vitamin D status.”

-Dr. Campise, D.C.



Vitamin D: Biochemistry



Cholesterol (manufactured by liver) → travels to skin
7Dehydrocholesterol + sunlight (UVB + infrared) →
Cholecalciferol (vitamin D3) converted by Liver into →
25(OH) vitamin D (inactive form) converted by kidneys
into →
1-25 (OH) vitamin D (active form)



Vitamin D: Overdose Risk?

Very low risk

- No published cases of vitamin D toxicity below 200 ng/ml.
- All published cases of vitamin D toxicity resolved without complication after 2-4 months by simply avoiding sources of vitamin D.



Vitamin D: Overdose Risk?

-The worst symptoms of published vitamin D toxicity were muscle and joint pain.

-Often the cause of toxicity is manufacturing errors where the supplement capsule accidentally contained 1 million iu's instead of the labeled amount (usually around 1000 iu).



Vitamin D: Overdose Risk?

-No published cases of
vitamin D toxicity ever
causing death.



Vitamin D: Overdose Risk?

-Every year there are verified cases of death from drinking too much water (usually endurance athletes), so in that sense, vitamin D is safer than water!

-So don't let your patients be afraid to take vitamin D when the news reports that too much vitamin D is bad for you. Of course too much of anything can be harmful, but vitamin D is very very safe.



Vitamin D: Overdose Risk?

- That being said, make sure to order the blood test to verify that the patient is in the optimal range (mostly so that you can prevent them from being deficient).
- By my estimates, millions of deaths each year could be avoided if we brought everyone's D levels up to optimum.

Omega 3





Omega 3: Testing



Blood test:

- The “omega 6 to omega 3” ratio (OmegaCheck TM) test is available from Quest.
- This test measures the percentage of omega 6 fatty acids and the percentage of omega 3 fatty acids in the blood and then divides the two to get a ratio.



Omega 3: Testing



Optimal ratio = less than 4.5:1 (primitive tribes with natural diets are between 3:1 and 1:1).

A ratio of 3:1 means that the blood has three times more omega 6 fatty acid than it does omega 3 fatty acid.



Omega 3: Testing



- A ratio of 1:1 means that there are equal amounts of omega 6 and omega 3 fatty acids in the blood.
- Average American = 15:1 or higher
- A ratio of 15:1 means that the blood has 15 times more omega 6 fatty acid than it does omega 3 fatty acid.



Omega 3: Testing



-It takes about 3 months to see a significant change on the blood test.

-If the patient's Omega Check test results are not good, have them increase their intake of omega 3 (and ideally lower their intake of omega 6) and then retest every 3 months until the desired ratio is reached.



Omega 3: Testing



Then test yearly to make sure they stay in the optimal range of less than 4.5:1.



Omega 3: How to Supplement

Loading Phase:

4,000 - 6,000 mg of “total omega 3” content
until the blood test comes into optimal range
(3-12 months)



Omega 3: How to Supplement

Maintenance Phase:

500 - 1500 mg of “total omega 3” daily
depending on need.



Omega 3: How to Supplement

-A 1000 mg capsule of fish oil will generally NOT have 1000 mg of “total omega 3” but more often 300-800 mg. Always study the label, don’t just go off the front of the bottle.



Omega 3: Alternatives to Fish Oil Supplementation

Loading phase:

Eat fresh wild caught fish and seafood 21 times weekly during the loading phase to bring 6:3 ratio down below 4.5.



Omega 3: Alternatives to Fish Oil Supplementation

Maintenance phase:

- Eat fresh wild caught fish and seafood 7 times per week for maintenance.
- Farmed fish and seafood may or may not have much omega 3 content. It depends on what the farmers feed the fish.



Omega 3: Alternatives to Fish Oil Supplementation

-The omega 3 in a fish comes from their natural diet up the food chain starting with algae. If the fish are fed mainly corn, wheat, and/or soy, they won't have much omega 3 in them.



Omega 3: Alternatives to Fish Oil Supplementation

-Flax seed oil and chia seed oil, among others, can be converted into omega 3 by the body, but not everyone can efficiently convert these vegetable sources (Inuit people, among others, can't convert flaxseed oil to omega 3).



Omega 3: Alternatives to Fish Oil Supplementation

-Algae oil has omega 3 in it, but Dr. Campise has found that it doesn't seem to clinically work at reducing symptoms of inflammation as quickly as fish oil does.



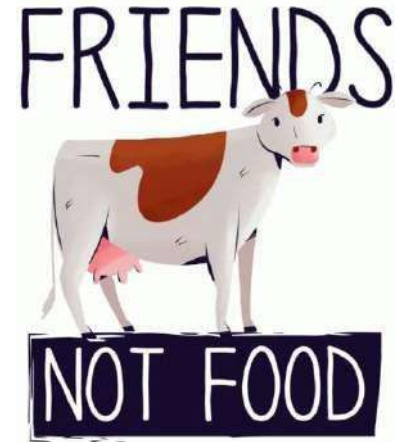
Omega 3: High Risk Patient Profile

Patients who eat:

Standard American Diet

OR

Vegan diet





Omega 3: Symptoms to Look For

Patients with any chronic inflammatory symptom, including:

joint pain

muscle pain

tendon pain

ligament pain

nerve pain



Omega 3: Conditions Caused by Insufficiency

A paper by Horrocks and Yeo in the journal Pharmacological Research
<https://pubmed.ncbi.nlm.nih.gov/10479465/>

From the abstract: “DHA has a positive effect on diseases such as **hypertension, arthritis, atherosclerosis, depression, adult-onset diabetes mellitus, myocardial infarction, thrombosis, and some cancers.**” (DHA is one form of omega 3 fatty acid)



Omega 3: Conditions Caused by Insufficiency

A paper by Grant and Guest in the journal Advances in Neurobiology
<https://pubmed.ncbi.nlm.nih.gov/27651257/>

From the abstract: “low omega-3 levels have been associated with CNS-linked disorders such as **poor cognition, depression, anxiety disorders, poor anger control, attention deficit hyperactivity disorder (ADHD) and accelerated neurodegeneration in the elderly.**”



Omega 3: Conditions Caused by Insufficiency

A paper by Chang, et. al. in the journal Neuropsychopharmacology
<https://pubmed.ncbi.nlm.nih.gov/28741625/>

From the abstract: “In summary, there is evidence that n-3 PUFAs supplementation monotherapy improves clinical symptoms and **cognitive performances in children and adolescents with ADHD**, and that these youth have a deficiency in n-3 PUFAs levels. Our findings provide further support to the rationale for using n-3 PUFAs as a treatment option for ADHD.” (n-3 PUFAs = omega 3 oils)



Omega 3: Conditions Caused by Insufficiency

A paper by Simopolous in the journal Biomed Pharmacotherapy
<https://pubmed.ncbi.nlm.nih.gov/12442909/>

From the abstract: “Excessive amounts of omega-6 polyunsaturated fatty acids (PUFA) and a very high omega-6/omega-3 ratio, as is found in today's Western diets, promote the pathogenesis of many diseases, including **cardiovascular disease, cancer, and inflammatory and autoimmune diseases**, whereas increased levels of omega-3 PUFA (a low omega-6/omega-3 ratio) exert suppressive effects.”



Omega 3: Conditions Caused by Insufficiency

A paper by DiNicolantonio and O'Keefe in the journal Nutrients
<https://pubmed.ncbi.nlm.nih.gov/32759851/>

From the abstract: “Evidence indicates that a low intake of marine omega-3s increases the risk for numerous mental health issues, including **Attention Deficit Hyperactivity Disorder (ADHD), autism, bipolar disorder, depression and suicidal ideation.**”



Omega 3: Conditions Caused by Insufficiency

A paper titled: “The potential of omega-3 fatty acids in the **prevention of non-melanoma skin cancer**” by Black and Rhodes in the journal Cancer Detection and Prevention <https://pubmed.ncbi.nlm.nih.gov/16872755/>

From the abstract: “Supplementary omega-3 FA significantly increases the UVR-mediated erythema threshold in humans. Supplementary omega-3 FA significantly reduces the level of pro-inflammatory and immunosuppressive PGE(2) levels in Ultraviolet B-irradiated human skin.”



Omega 3: Overdose Risk

-Omega 3 oils are mild natural blood thinners, so they are especially good for anyone with excess clotting issues.

-But for those taking blood thinning medication, you may have to work with the patient's prescribing medical doctor because they may have less of a need for the medication as you load their system with more omega 3.



Omega 3: Overdose Risk

- One sign of blood that is too thin is purple bruises on the skin, especially when the patient can't recall any significant injury at the bruise site.
- Generally, have the patient stop taking Omega 3 supplements several days prior to surgery and prior to giving birth. Restart the omega 3 supplements after any bleeding from the surgery or delivery has subsided.



Omega 3: Other Dangers

Warning:

-There are little to no standards set by the US Federal Government for fish oil supplements, unlike in the European Union, World Health Organization, and California. But even California and the EU don't require testing for oxidation or for radioactive iodine contamination.



Omega 3: Other Dangers

-Make sure that the manufacturer you recommend to patients has robust third party testing to ensure their fish oil has low levels of:

Heavy Metals, Oxidation, Dioxin, PCB's, Radioactive iodine

<https://www.nordicnaturals.com/images/pdfs/ChartTesting.pdf>



Omega 3: Other Dangers

Oxidation = Rancid

-Oxidation is what creates the extreme “fishy” smell of some fish oils on the market and also what causes people to burp up the oil later in the day or to complain of a “fishy” smell when they sweat.

-All of this is avoided with a high quality manufacturing process that prevents oxidation.



Omega 3: Other Dangers

-Dr. Campise's favorite high quality brand to recommend to patients is Nordic Naturals. They have a professional label that's only available to health care clinics.

Dr. Campise carries in his office:

Pro-omega 2000 for adults

DHA Junior for children.

Iodine





Iodine: Testing

- Simple Urine and Blood tests: Reflective of recent intake, not of total body sufficiency.
- Skin test: (Paint red iodine on skin and wait to see how long it takes to absorb fully). Not an accurate test.





Iodine: Testing

- 24 hour urine iodine loading and excretion test: Gold standard for total body sufficiency.
- Many labs don't perform this test.
- More difficult for patient than the other tests.





Iodine: Testing



The US Government Recommended Daily Value for iodine intake is 150 mcg for humans older than 4 years (and slightly more, at 220 mcg, for pregnant women).

The traditional Japanese diet contains **100 times** more iodine than this.



Iodine: Testing



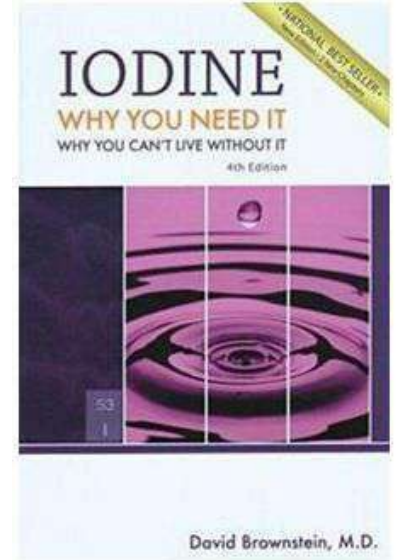
Iodine is the most common deficiency worldwide, leading to miscarriage, birth defects, impaired childhood growth, and to physical and mental disabilities.

30% of world population is thought to be at risk.



Iodine: Dr. David Brownstein, MD

Read Dr. David Brownstein's book for more in-depth understanding of why modern humans need so much more iodine intake than the mainstream consensus.



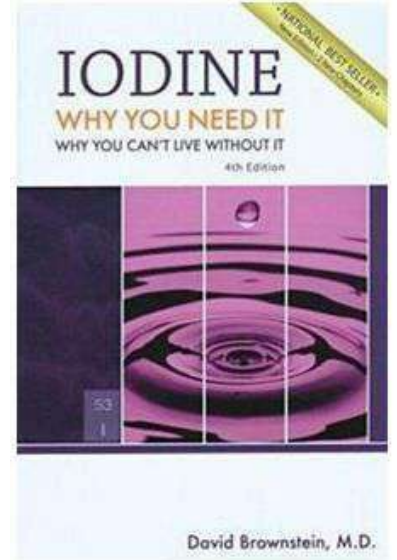


Iodine: Dr. David Brownstein, MD

He also introduces the term “iodophobia” to refer to clinicians who think that higher iodine intake is bad for humans.

Of course the opposite is true. But there are reasons to be careful recommending it.

We’ll cover this in the upcoming slides.





Dr. Campise's protocol based on his experience and his study of Dr. David Brownstein's work. →

Iodine: How to Supplement



Biotics Liquid Iodine Forte (or similar):

(Food grade clear potassium iodide: 150 mcg per drop.)

- 1) Start with 10 drops daily for 7 days.
- 2) Double to 20 drops daily during second week.
- 3) Double to 40 drops daily during the third week.



Iodine: How to Supplement



Dr. Campise's protocol based on his experience and his study of Dr. David Brownstein's work. →

Iodizyme HP (or similar). High potency tablets 12 mg iodine per tablet.

4) Take 1 tablet daily during fourth week.

5) Take 2 tablets daily during fifth week.

6) Take 4 tablets daily during sixth week.



Iodine: How to Supplement



Additional instructions for patient:



Do **NOT** take iodine if previously diagnosed with autoimmune thyroid disease such as **Graves** or **Hoshimoto's** until in remission as proven by normal TGA and TPO blood tests. It could make these conditions flare up!



Iodine: How to Supplement



Additional instructions for patient:



Some patients could have a subclinical undiagnosed case of autoimmune thyroid and could react poorly to iodine by having a thyroid storm.



Iodine: How to Supplement



Additional instructions for patient:



Thyroid storm symptoms: Sudden onset (within 30 minutes of iodine intake) of any of the following: rapid heart beat, palpitations, anxiety, sweating, nervous energy, insomnia, lightheaded, high blood pressure, hot flashes.



Iodine: How to Supplement



Additional instructions for patient:



Educate the patient about the very small chance of these symptoms and tell them to immediately stop the supplement and let you know.



Iodine: How to Supplement



If a patient has thyroid storm symptoms after taking iodine, or if you might suspect undiagnosed autoimmune thyroid issues, send them to get a thyroid panel including TGA and TPO antibody tests.





Iodine: How to Supplement



If the patient's TPO and TGA are normal, then they likely did not have a thyroid storm. Instead, they may be having a bromide detox. The toxic halide salt, bromide, is thought to accumulate in iodine insufficient patients. Taking iodine can sometimes trigger a bromide detox.

Halides

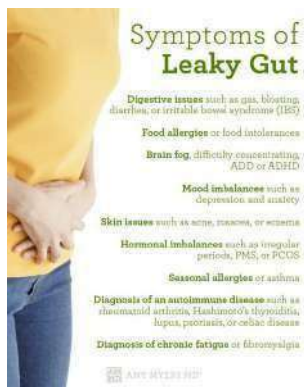
					2				
	5	6	7	8	10				
	B	C	N	O	Ne				
	13	14	15	16	18				
	Al	Si	P	S	Ar				
28	29	30	31	32	33	34	35	36	38
Ni	Cu	Zn	Ga	Ge	As	Se	Br	Kr	
46	47	48	49	50	51	52	53	54	86
Rd	Ag	Cd	In	Sn	Sb	Te	I	Xe	
78	79	80	81	82	83	84	85	86	118
Pt	Au	Hg	Tl	Pb	Bi	Po	At	Rn	
110	111	112	113	114	115	116	117	118	118
Ds	Rg	Cn	Nh	Fl	Mc	Lv	Ts	Og	
64	65	66	67	68	69	70	71		
Lr	Tb	Dy	Ho	Er	Tm	Yb	Lu		
88	89	90	91	92	93	94	95	96	103
Rf	Bk	Cf	Es	Fm	Md	No	Lr		



Iodine: How to Supplement



Image from AmyMyersMD.com:



Dr. Campise's Autoimmune Thyroid protocol:

- 1) Stop all dairy, all grains, and all added sugars.
- 2) Treat the patient's leaky gut.
- 3) Improve patient's stress management skills.





Iodine: How to Supplement

From womhoo.com



Dr. Campise's Autoimmune Thyroid protocol:

4) Take topical progesterone as a temporary mild immune suppressant (ok for men too).

5) If *hyper*thyroid: also take OTC Lithium.

6) Optimize vitamin D and omega 3 levels.





Iodine: How to Supplement



Dr. Campise's Progesterone protocol:

For men: take 5 drops daily, increase by 1 drop every 3 days until reaches maximal autoimmune thyroid (AIT) symptom relief.





Iodine: How to Supplement



Dr. Campise's Progesterone protocol:

For women: to avoid estrogen detox symptoms, start with 1 drop daily, increase by one drop every 3 days if no worsening estrogen symptoms until she reaches maximal AIT symptom relief. If estrogen detox symptoms, stop. Restart next wk.



Iodine: How to Supplement



Dr. Campise's Progesterone protocol:

Progesterone can make some people sleepy, so generally patients should apply it at night before bed. Men can take it because it has no sexualizing activity. This is why placentas produce progesterone instead of estrogen/testosterone.



Iodine: Alternatives to Supplementation

Eat seafood at every meal:

Seaweed

Fish

Shellfish



Iodine: High Risk Patient Profile

Vegans

Inland or high altitude dwelling

Average American



Iodine: Symptoms of Insufficiency

- 1) Keloids/excessive scar tissue
- 2) Fibroids
- 3) Polyps
- 4) Tough/Thick skin
- 5) Skin tags



Iodine: Symptoms of Insufficiency

6) Any low thyroid symptom: fatigue, weight gain, cold hands or feet, joint pain, muscle pain, dry skin, thin brittle hair and nails, heavy or irregular menstruation, infertility, slow heart rate, depression, constipation, poor memory, hoarse voice, low body temperature, anemia, tingling in hands, low libido, puffy face, high cholesterol.



Iodine: Symptoms of Insufficiency

7) Thick mucus in sinuses, throat, lungs, vagina, or colon.

Mucinase is an enzyme that requires iodine in order to function properly. Mucinase thins mucus. Low iodine intake can lead to a lack of mucinase activity and thus thick mucus.



Iodine: Symptoms of Insufficiency

7) Thick mucus can cause or aggravate:

-Sinus infections, sinus allergies, sinus headaches

-Asthma, lung allergies, lung infections,
respiratory viral infections

-Vaginal or colon inflammation, dysbiosis



Iodine: Symptoms of Insufficiency

Case Report at Dr. Campise's clinic:

-Chronic asthma for three years with thick mucus in throat requiring daily allergy medication and weekly use of steroid inhaler in 35 yo male.

-4 weeks of iodine protocol and grain/dairy free diet: all symptoms gone and no more meds use.



Iodine: Diseases Caused by Deficiency

Hypothyroid

Goiter

Infertility

Birth Defects

Hashimoto's/Graves (according to Dr. Brownstein)



Iodine: Overdose

80% of excess iodine intake is eliminated by the kidneys in 24 hours.

Iodine is very safe for those without an autoimmune thyroid disease.



Iodine: Allergy

There is no such thing as an allergy to iodine. By definition, allergies are overreactions to foreign proteins.

Iodine is not a protein.



Iodine: Allergy

Radioactive “Iodine” Dye, or Iodine Containing Contrast Dye:

Anyone who has an allergic reaction to these dyes is having an allergy to the protein that makes up the dye, not the iodine itself.



Iodine: Allergy

Patients who claim they have an iodine allergy are actually allergic to either medical contrast dyes that happen to contain iodine, or to shellfish chitin (contained in the shell), and not iodine.

I have never found a patient who can't tolerate pure iodine supplements due to an "allergy."

Back To Chiropractic CE Seminars

Nutrition ~ 6 Hours

- Presented by John B. Campise, D.C.-

john@drjohnusa.com 559-285-4121 (Cell)

Thanks for taking CE Seminars with Back To Chiropractic.

I hope you enjoyed the course. Please feel free to provide feedback.

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marcusstrutzdc@gmail.com

707.972.0047