How to be
an
Expert Muscle Tester

Nutrition, Metabolism and Toxicity
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Proprioception in Practice

What do all these conditions have in common?

Acne, Allergic rhinitis, Alzheimer’s disease, anaemia, angina, anxiety, asthma, bipolar disorder, breast cancer, congestive heart failure, high cholesterol, colorectal cancer, depression, diabetes, DVT, enlarged prostate, glaucoma, reflux, heart attack, HIV and aids, hypertension, irritable bowel syndrome, incontinence, insomnia, migraine, multiple sclerosis, osteoporosis, otitis media, panic disorder, parkinson’s disease, schizophrenia, stroke, thyroid disorders.

A diagnosis which describes a condition without giving a clue as to it's cause is a useless diagnosis. Without knowing the cause, a cure is impossible.

What do all these conditions have in common?

RSI, carpal tunnel syndrome, tennis elbow, golfers elbow, rotator cuff tendonitis, frozen shoulder, neck pain, whiplash, bursitis, osteoarthritis, sprain, strain, muscle tears, pulled muscles, disc bulge, sciatica,

They are all labels given to tissue damage caused by failure to withstand an outside force.

Remember the WEAKNESS CAUSES THE PAIN, the pain doesn't usually cause the weakness.

Where there is pain, you will find weakness. To assist in recovery, you need to be able to identify the weakness and find its origin.

The difficult part is sometimes linking the symptom to the solution but this becomes easier with muscle testing and proprioceptive challenges.
Evidence for systemic or organic function related to changes in muscle tone.


Vising J; Wilson LB; Mitchell JH; Victor RG
Harry S. Moss Heart Center, University of Texas Southwestern Medical Center, Dallas 75235-9034.

Little is known about the mechanisms responsible for activation of sympathoadrenal function during exercise. We hypothesized that sympathoadrenal discharge is activated at the onset of exercise by a reflex arising in the contracting muscle. Adrenal sympathetic nerve activity (SNA) was recorded during 1 min stimulation of the tibial nerve at two times motor threshold, before and during neuromuscular blockade, in 12 alpha-chloralose-anesthetized rats. Static muscle contractions, induced by stimulation before neuromuscular blockade, were repeated during ganglionic blockade (n = 6) to specifically test reflex activation of preganglionic activity to the adrenal gland. During static contraction, adrenal SNA rapidly increased (P less than 0.05) to a maximum of 89 +/- 12% above basal and then declined, reaching basal levels after 30 s of muscle contraction. Tibial nerve stimulation during neuromuscular blockade had no effect on adrenal SNA. In most rats, adrenal SNA decreased with ganglionic blockade, indicating postganglionic as well as preganglionic innervation of the adrenal gland. During ganglionic blockade, static muscle contractions elicited a 140 +/- 21% increase in adrenal preganglionic SNA. In conclusion, static muscle contraction reflexly increases SNA to the adrenal gland, providing a mechanism for sympathoadrenal activation at the onset of exercise. Ann Intern Med 1997 Jul 15;127(2):97-104

Notes: __________________________________________________________
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Stimulation of renal sympathetic activity by static contraction: evidence for mechanoreceptor-induced reflexes from skeletal muscle.

_Circ Res, 64(3):592-9 1989 Mar_ Victor RG; Rotto DM; Pryor SL; Kaufman MP

Department of Internal Medicine, University of Texas Southwestern Medical Center, Dallas 75235-9034.

Abstract
Static muscular contraction in anesthetized animals has been firmly established to reflexly increase arterial pressure. Although group III and IV muscle afferents are known to be responsible for this reflex pressor response, there is no evidence that the stimulation of muscle mechanoreceptors, many of which are supplied by group III fibers, plays a role in causing this contraction-induced reflex effect. To provide this evidence, we recorded renal sympathetic nerve activity in chloralose-anesthetized cats while contracting the triceps surae muscles. **We found that static contraction tripled renal nerve activity within three seconds of its onset, an increase that was abolished by cutting the L6 and S2 dorsal roots.** On average, the contraction-induced increase in renal nerve activity was observed 0.8 +/- 0.1 seconds after the onset of this maneuver. In addition, intermittent tetanic contractions synchronized renal nerve discharge so that a burst of activity was evoked by each contraction. A similarly synchronized renal nerve discharge was evoked in paralyzed cats by electrical stimulation of the tibial nerve at five times motor threshold, a current intensity that activates group III afferents. We conclude that, in anesthetized animal preparations, mechanoreceptors with group III afferents contribute to the reflex stimulation of renal sympathetic outflow evoked by muscular contraction.

Notes:______________________________________________________________________________________________
More muscle tests

Every joint pivots around a point – this action is known as rotation. A combination of pivots can lead to a translation.

Rotation in the sagittal plane is known either as flexion or extension. Flexion is bending. Extension is straightening.

Rotation in the frontal plane is known as abduction or adduction. Abduction is moving away from the midline, adduction is moving towards the midline.

You can test the strength of any joint, or any movement and compare it to others in the area or to the same movement on the opposite side.

It is important that your testing becomes so accurate, that you can determine whether a muscle is normal or inhibited just by testing it (without reference even to any other muscle).

Advanced Muscle testing

Spend time learning all of the Applied Kinesiology muscle tests available online by registering at www.expertmuscletester.com

Rules

General, systemic or foundational weaknesses (covered in the first module) take precedence over all other weakness patterns

Create a good foundation before you go chasing symptoms.

Bilateral weakness takes precedence over unilateral.

Bilateral weakness usually indicates a organ, nutritional or spinal interference to function.

Single (unilateral) joint or muscle weakness usually indicates a local or spinal origin.

Check nerve roots and joint stabilizers first.
The Alarm Point Technique
Finding the Most Important Weakness

In Traditional Chinese Medicine (TCM), acupuncture points have been used therapeutically for three thousand years. It is possible that these points have a higher proprioceptive sensitivity than other points although recent studies have suggested that the effects of neele stimulation are similar whether exact or random points are used.

In TCM, Alarm points are the acupuncture system’s monitoring points. They will respond if a meridian is in either over-energy or under-energy, facilitated or inhibited which means they can be used diagnostically or therapeutically.

We can use alarm points to produce strength or weakness.

If a patient has multiple weaknesses, it is sometimes useful to find the one alarm point that strengthens all of them. When the patient subsequently presses that alarm point, a strong indicator muscle will usually fail. If that failure is then treated, all of the initial weaknesses will be seen to have been treated.

The technique is summarised as follows:

1. Find as many weaknesses as possible.
2. Choose a suitable normotonic indicator muscle (deltoid or general shoulder abductor)
3. Choose any one of the weak muscles and have the patient put the weak muscle into contraction (preferably against resistance)
4. The indicator should now be weak.
5. Use your own hand to press firmly on each of the alarm points in turn. If the alarm point is bilateral, it does not matter which one is used.
6. The PRIMARY ALARM POINT (PAP) is the one that negates every muscle weakness found on initial testing and has at least one pair of its own related muscles weak in the clear bilaterally.
7. Using any strong muscle as an indicator, relax the contracted weak muscle and ensure the indicator is still strong.
8. Have the patient now press on the PAP and maintain the pressure – the indicator muscle should now test weak.
9. Correct the PAP weakness using whatever treatment seems most appropriate eg.
   - Spinal, visceral or cranial adjusting
   - Dentistry
   - Jewellery
   - Nutrition
   - Homeopathy (this is outside the proprioceptive model)
Emotional techniques

10. Recheck the indicator with pressure to the PAP supine and prone, to make sure it is now negative.
11. Recheck all of the muscles found weak in step 1 above to make sure they now test normally.

Notes on the PAP technique.

Although not classic Alarm points, CV24 (beneath bottom lip) and GV27 (above top lip, beneath nose) seem to act as alarm points and are sometimes found to be the primary alarm point using this technique.

The technique works best when applied to bilateral, multiple and systemic weaknesses. Unilateral and local weaknesses are best treated locally or spinally.

Do check the muscles related to the meridian of the PAP to see whether they are weak. Often only one of the pairs of related muscles is weak.

Notes on structural corrections for PAP

To test for the need for a structural correction:

<table>
<thead>
<tr>
<th>Test</th>
<th>Indicates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deep Breath In</td>
<td>Cranial</td>
</tr>
<tr>
<td>Deep Breath Out</td>
<td>Cranial</td>
</tr>
<tr>
<td>Neck Protrusion</td>
<td>Cervical Disc (Annular Tear)</td>
</tr>
<tr>
<td>Neck Lateral Flexion</td>
<td>Neck problem</td>
</tr>
<tr>
<td>Lumbar Lateral Flexion</td>
<td>Lumbar problem</td>
</tr>
<tr>
<td>Shoulders Forward</td>
<td>Thoracic problem</td>
</tr>
<tr>
<td>Shoulder Backwards</td>
<td>Thoracic problem</td>
</tr>
<tr>
<td>Pressure on viscera</td>
<td>Visceral problem</td>
</tr>
</tbody>
</table>

Once you have corrected the structural problem with the patient supine. Have the patient press on the PAP while they are prone and check to see if another spinal correction is needed by pressing on each spinous in turn from inferior to superior to see if the weakness turns to strength.
From the first Seminar:

Have the patient hold the Primary Alarm Point and then check for the following sources of Proprioceptive Interference.

<table>
<thead>
<tr>
<th>Cause of Weakness</th>
<th>How to Test</th>
<th>Treatment Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Body piercing</td>
<td>Remove</td>
<td></td>
</tr>
<tr>
<td>Jewelery such as neck chains, watches, rings</td>
<td>Remove</td>
<td></td>
</tr>
<tr>
<td>Glasses</td>
<td>Remove or close eyes</td>
<td></td>
</tr>
<tr>
<td>Dentures</td>
<td>Remove</td>
<td></td>
</tr>
<tr>
<td>Metal fillings or crowns</td>
<td>Push on each tooth in turn</td>
<td></td>
</tr>
<tr>
<td>Mechanical Lesions</td>
<td>Change the patient’s position</td>
<td></td>
</tr>
<tr>
<td>Dehydration</td>
<td>Give a large glass of water</td>
<td></td>
</tr>
<tr>
<td>Scars (surgical or traumatic)</td>
<td>Contact, push or pull scar</td>
<td></td>
</tr>
<tr>
<td>Nutritional Deficiency</td>
<td>Place nutritional substances or foods on tongue.</td>
<td></td>
</tr>
<tr>
<td>Wired Bras</td>
<td>Undo or remove the bra</td>
<td></td>
</tr>
<tr>
<td>Chemical Toxins (The only time to test from strength to weakness)</td>
<td>Test by taste or smell</td>
<td></td>
</tr>
<tr>
<td>Meridian</td>
<td>Nutrient</td>
<td>Muscles related to the meridian</td>
</tr>
<tr>
<td>---------------------</td>
<td>----------------</td>
<td>-----------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Lung</td>
<td>Copper</td>
<td>Deltoids, Anterior Serratus, <strong>Coracobrachialis</strong></td>
</tr>
<tr>
<td>Large Intestine</td>
<td></td>
<td><strong>Tensor Fascia Lata</strong>, Hamstrings, Quadratus Lumborum.</td>
</tr>
<tr>
<td>Spleen (pancreas)</td>
<td>Chromium</td>
<td>Latissimus <em>Dorsi</em>, Mid and Lower Trapezius, Triceps, Anconeus.</td>
</tr>
<tr>
<td>TripleWarmer</td>
<td>Beta Carotene</td>
<td><strong>Teres Minor</strong>, Infraspinatus.</td>
</tr>
<tr>
<td>Circulation-Sex</td>
<td></td>
<td><strong>Sartorius</strong>, Gracilis, Gluteus Medius and Maximus, Piriformis, Adductors, Soleus, Tibialis Posterior.</td>
</tr>
<tr>
<td>Small Intestine</td>
<td></td>
<td><strong>Quadriceps</strong>, Abdominals.</td>
</tr>
<tr>
<td>Heart</td>
<td>Magnesium</td>
<td><strong>Subscapularis</strong></td>
</tr>
<tr>
<td>Gall Bladder</td>
<td>Iron or CoQ10</td>
<td><strong>Popliteus</strong></td>
</tr>
<tr>
<td>Liver</td>
<td>Sulphur</td>
<td><strong>Pectoralis Major Sternal</strong>, Rhomboids.</td>
</tr>
<tr>
<td>Bladder</td>
<td></td>
<td>Manganese <strong>Peroneus Longus</strong>, Brevis and Tertius, Tibialis Anterior, Sacrospinalis.</td>
</tr>
<tr>
<td>Kidney</td>
<td>Calcium</td>
<td><strong>Psoas</strong>, Iliacus, Upper Trapezius.</td>
</tr>
<tr>
<td>Governing Vessel</td>
<td>Vit B</td>
<td><strong>Teres Major</strong></td>
</tr>
<tr>
<td>Conception Vessel</td>
<td>Zinc</td>
<td><strong>Supraspinatus</strong></td>
</tr>
</tbody>
</table>
Compression and Springing

Our body should not fail (weaken) on moderate compression and springing. Here are some things to check

Eyeballs
- suspect raised intraocular pressure

Ribcage (4 areas)
- lung, heart, liver and gall bladder are all being compressed.

Gall Bladder
- a great mimicker of pain

Pancreas
- involved in sugar handling and digestion

Kidneys
- check against absorbable calcium and magnesium

Bowel
- often fails in the presence of inflammation in the bowel.

Appendix
- fails over McBurney’s point

Uterus (push inferior)
- works with ptosis of any lower abdominal structures

Prostate (inside ischial bones)
- check against phytofood calcium

Bone – shin, ribs, skull, spinous processes
- rare, but indicates liver dysfuntion

Fat
- major storage of pesticides and other environmental toxins

Paraspinal muscles
- sometimes weak

Spinal vertebrae
- sometimes all vertebrae fail. If only axial skeleton involved, check the neck.

Skin (pinch)
- used to indicate fluid in the tissues. Check against Iodine.

Turker KS; Brodin P; Miles TS
Department of Physiology, University of Adelaide, Australia.

The reflex responses evoked by controlled mechanical stimulation of an upper central incisor tooth in single motor units in the human masseter muscle were examined. The stimuli were (brisk) taps and (slow) pushes of about 2 N peak force, applied orthogonally to the labial surface of the ipsilateral upper central incisor tooth. The reflex responses of the motor units were characterised by analysis of the changes in the durations of the first and second interspike intervals (ISIs) immediately following the stimulus. A significant increase in the duration of these ISIs in comparison with pre-stimulus ISIs indicated inhibition, and significant shortening indicated excitation. Twenty masseter motor units were tested with both the pushes and the taps. The brisk taps elicited a significant reflex inhibition in 16 of the 20 motor units at a latency of 13 ms and duration of 37 ms. This inhibition was followed by significant excitation in 11 of the 20 units at latencies of 71 ms, lasting for 29 ms. The short-latency response to slow pushes was significant inhibition in four units: significant excitation in one unit and no response in 15 units. The slow pushes evoked a significant long-latency excitatory reflex response in 12 of the 20 units at latencies of 77 ms and lasting for 40 ms. The shapes and amplitudes of the compound post-synaptic potentials underlying the reflex responses in the motoneurones were estimated. It is concluded that stimulation of periodontal mechanoreceptors usually activates an excitatory reflex pathway to the jaw-closing motoneurones. This probably helps to grip the food bolus between the teeth during chewing. However, when the rate of application of the stimulus is large enough, a short-latency inhibitory response is evoked which, if of sufficient duration, may over-ride the subsequent excitatory response. Inhibition of the jaw-closing muscles will tend to protect the teeth and soft tissues when one bites unexpectedly on a hard object while chewing.

**Testing Teeth**

1. Identify a weakness or a pattern of weakness. Dental problems usually cause a systemic (global) weakness or a Primary Alarm Point weakness, but occasionally cause a localised problem (eg hip joint).
2. Press on each tooth in turn. Use your finger (gloves or finger cots are advisable), the patient’s finger or ask the patient to bite on a cotton wool roll.
3. Test the indicator after applying pressure on each tooth. Make a note of the tooth (or teeth) that returns strength to normal.
No metal in the mouth is safe, but certain metals seem to cause more problems than others. In order of severity these would be

1) Metal crowns placed over an amalgam filling.
2) Metal crowns
3) Abscesses
4) Amalgam fillings
5) Dentures

**Metal Crowns**

Most crowns are made of metal although some have a layer of porcelain fused over the metal and are known as bonded porcelain crowns. Metal crowns are made of either precious or semi-precious metal. Gold crowns are being used less than previously for cosmetic reasons. Although gold is supposedly inert, when it is placed over amalgam, the proximity of two different metals in an acid medium (saliva) produces a battery. The current from the battery may discharge the sensory nerves from the tooth. Even when placed without amalgam, the crown may corrode slightly or allow the introduction of bacteria and decay underneath it. Sometimes the cause of the proprioceptive irritation is unknown. X-Rays and visual examination cannot see underneath the crown and therefore cannot aid the diagnosis. The only way to know if there is a proprioceptive problem related to the tooth is by taking the crown off or by testing for changes in muscle strength.

**Bonded Porcelain Crowns**

A bonded porcelain crown is a metal crown covered by a thin layer of porcelain. This type of crown is distinguished by a thin layer of black metal visible at the base of the inside of the tooth as the porcelain covering only extends to the gum-line on the external surface of the tooth. Bonded crowns are made of either a precious or semi-precious metal, both of which cause the same problems as gold crowns.

**Alternatives to Metal Crowns**

Saving over-filled or broken teeth is highly desirable but not if placing metal crowns condemns the patient to a lifetime of pain and ill-health. Fortunately, many dentists are now able to use solid porcelain or composite crowns. These are cast or computer milled out of a block of solid porcelain. In addition to giving a better cosmetic result, these crowns do not seem to cause proprioceptive irritation and muscle weakness.
Abscesses

A tooth abscess is an infection in the tooth root or in the bone surrounding the root. While some become obvious due to the pain they cause, others produce no pain. Although painless, they can irritate the proprioceptive nerves. Some infections get into the bone surrounding the tooth and can destroy large areas of bone. Many dentists believe that such an area of infection can be the source of decaying bacterial matter which can be discharged into the blood-stream and from there circulate to cause infection in many other parts of the body.

Sometimes an infection can be treated with root-canal therapy but this approach may be ineffective if the infection has already progressed to the bone. The only effective treatment in this case is to extract the tooth and drill away the dead and decaying bone from inside the socket. This is a delicate and highly invasive procedure that must be attempted only by dentists experienced in its use and with the full understanding and informed consent of the patient.

Amalgam fillings

Not all amalgam fillings cause problems. The only way to detect proprioceptive lesions from fillings is to examine muscle strength. Once found, the amalgam can be replaced by a non-metal alternative. The worst amalgam fillings are those that reach the gum. These have the most potential to irritate the delicate mucous membranes of the mouth.

Dentures

Dentures are manufactured by mixing a toxic and volatile liquid called a monomer with a powder. When the two are mixed, the acrylic is poured into a mold which is then set. The denture must then be cured to remove the resting (residual) monomer. The denture is wrapped in plaster of paris and is then boiled under pressure. It used to be standard practice to cure dentures overnight. These days many labs will cure for a couple of hours or even shorter. The instructions for some materials recommend just a 20 minute cure. It appears that this is not long enough.

When dentures are repaired, they are often “cold-cured” leaving excessive monomer exposed. It is also possible that the soaking of dentures overnight with cleaning tablets breaks down the surface of the denture, exposing the monomer.

Widespread and severe muscle weakness often occurs with toxic dentures. It can lead to difficulty with movement, brain function and arthritic pain – all problems normally associated with the elderly – the very people who are most likely to be wearing dentures.

Dentures that are causing weakness can be recurred by denture labs to remove the remaining monomer and render the denture less toxic. Monomer also cures with UV light so it is possible to cure
the light at home with the UV light you might find in a sunbed or in the lamps used by nail technicians to cure gel nails.

**Dental Warning**

Advising people to change their dentistry is probably the most controversial and difficult part of Proprioceptive Medicine. Most people will not understand that the foreign substances in their mouth can be causing them pain, distress, disability and persistent injury. The knowledge you have is highly unusual and requires tact and sensitivity to pass on.

The most difficult part is that dentistry is always expensive. Patients can sometimes feel angry if you have suggested a therapy that they cannot afford (although most time they can if they understand its importance).

I suggest you use disclaimers and advise patients that they are under no obligation to follow your advice, you only offer it as a suggestion. It helps to have several understanding metal-free dentists available for patients who don't have an existing dentists. Ethically, it is important that you refer patients back to their existing dentist for any work that you are recommending, but most will not be familiar with the principles of proprioception and my become hostile to your efforts to improve the health of your patients.

**Mechanical Lesions**

Mechanical lesions in the spine are known by chiropractors as subluxations and by osteopaths as osteopathic lesions. Others might describe them as fixations.

Testing for mechanical lesions:

1. Find a weakness
2. Alter the patient’s body position, especially their spine. Rotation, lateral flexion or translation are the normal things to try.
3. Retest for strengthening

Treatment can be determined by your normal therapy and experience. You might like to try stretching, resisted stretching, massage, exercises or referral to your favourite chiropractor or osteopath.

Skin rolling is often effective in the low back. Lift the skin off the vertebrae in the low back, squeezing between for thumb and fingers. Give little tugging movements to lift the fascia off the underlying structures. Sometimes you will hear a little pop or click. These are not vertebral movements, you are just breaking adhesions between the fascial planes. The relief can be considerable for some patients. This technique seems to be very effective at stimulating a proprioceptive response.
There can be no doubt that nutrition will affect health but most people are amazed that taste can affect muscle strength. By now you know that muscle strength is determined by proprioception and that proprioception is really sensory information coming from the body.

Taste is just another form of sensory input. When harmonious tastes arrive at the brain, muscles react normally. When non-harmonious tastes (or smells) arrive at the brain, the brain reacts with muscle inhibition.

The central mechanisms for this reaction are purely speculative.

Whether you test your patients nutritionally is entirely up to you and your field of expertise. The techniques described here are simple and can be done by anyone. Advice given based on these techniques may require more extensive knowledge and training.

**Testing for Intolerance**

1. Test a group of muscles that are strong, deltoids and quads are good choices.
2. Place a nutritional substance on the tongue.
3. Retest the muscles for weakening

An allergy is not the same as an intolerance. Although most of the hidden food reactions are IgG allergies, it is probably more accurate to use the word intolerance. Food intolerances do change over time, normally according to emotional or chemical changes within the patient’s body. It is worth checking the patient and their food test after about 2 weeks of avoiding the offending food.

**Testing for deficiency**

1. Find a weakness
2. Place a nutritional or food supplement on the patient’s tongue.
3. Retest for strengthening.

**Practitioners in the UK can obtain a practitioner account and free test kit from Cytoplan by emailing amanda@cytoplan.co.uk**
Real Food Eating Plan

Food is the basic fuel of the body. The right fuel will give you the energy, vitality and essential ingredients you need to repair and maintain your body.

Real food is food that spoils or “goes off.” The longer a food will last after opening, the less likely that it has any important nutritional value. Real food is packed with the nutrients you need to feel good most of the time and it is less likely to contain anti-nutrients or toxins. As a general rule – if you can find a food in nature, it is probably OK to eat in that form.

**Real Food**

**Eat as much as you can, organic and raw if possible**

- **Eggs**
  Eggs are a true super-food. The cholesterol they contain is essential for your body to create cells and hormones. Their amino-acid mix closely mirrors human protein. All mammals will eat eggs if they can find them. An average of about two eggs per day is about right. Make sure you buy the best quality you can find, organic and free range if possible. Eat them as lightly cooked as possible and raw (in smoothies) if you can.

- **All vegetables/salads**
  Vegetables that can be eaten raw, should be. See if you can make 50% of your vegetable intake raw and about 80% of your overall food intake raw. Lots of organic carrots and cucumber.

- **All fruits**
  As much as you like.

- **Beans, sprouted beans and lentils**
  Sprouts are a great superfood. Beans and lentils must be cooked but they make good vegetarian staples.

- **Avocado**
  A big favourite. High-quality natural fat and protein that will make you feel full without putting on weight. Fantastic for breakfast.

- **Rice**
  All rice is OK but short grain brown rice is best unless you are trying to give up sugars and starches, in which was you need to avoid rice for a while.

- **Nuts and seeds**
  Great food. Nuts must be fresh to avoid the oils turning rancid. Raw nuts and seeds only (not roasted or salted).

- **Seaweeds**
  Mostly found in Japanese food. Good for calcium content and the thyroid gland

- **Soups**
  Home-made soups and casseroles make great alternatives to packet food. Have them for breakfast to give you energy all day.

- **Whole grains, millet, barley, quinoa, amaranth, buckwheat etc**
  Try the more exotic grains. They are usually healthier and tastier than wheat.

**Partially Processed Food**

**Moderate consumption is OK. Keep to organic where possible.**

- **Flours to make bread, cakes, biscuits and pasta –**
  Most people have more energy if they avoid all grains, but this is too much to ask of anyone just starting Real Food eating. Specialty flours like spelt, rye, barley, millet, quinoa, amaranth and kamut make great alternatives to regular flour, they just take a little practice.

- **Tofu, tempeh, miso and other soy-based products**
  Tempeh and miso are fermented soy products and are generally regarded as healthy. Tofu soy milk, TVP and soy protein are best avoided or used in minimal quantities.

- **Meat, chicken and fish**
  If you must eat meat, try to buy organic and free-range if possible. Avoid processed and mechanically re-claimed meat which will be heavily treated.

- **Fruit juices, fresh squeezed yourself is best**
  Commercial fruit juices are nearly always pasteurized which will destroy their enzyme content. Invest in a juicer, the slow-speed ones are best. Choose “fresh-squeezed” over “made from concentrate” and “juice drink” (added sugar) products.

- **Rice Milk, Oat Milk, Almond Milk, Coconut milk.**
  Oat milk is best for cooking. The others come in different brands so don’t be put off if you don’t like the first one you try. The best rice milk is Rice&Rice available from Cook’s Delight in Berkhamsted.

- **Butter**
  A good source of cholesterol and Vit D, both essential for good health.

- **Raw honey, maple syrup, brown rice syrup, molasses or agave syrup to replace sugar**
  All sugars are bad and should be avoided. If you need some sweetener try these less harmful versions.
**Non-foods**

**Avoid when possible**

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Artificial Sweetener</td>
<td>Aspartame and sucralose, “diet” and “low calorie” foods. Way too dangerous to be even a small part of your diet or that of your children. Avoid whenever possible.</td>
</tr>
<tr>
<td>Margarine (butter is better)</td>
<td>There is no such thing as solid vegetable oil in nature. Just use butter.</td>
</tr>
<tr>
<td>Cordials</td>
<td>Sugar and chemicals – avoid.</td>
</tr>
<tr>
<td>Tobacco</td>
<td></td>
</tr>
<tr>
<td>Tea</td>
<td></td>
</tr>
<tr>
<td>Coffee</td>
<td>Sugar, coffee, tea, alcohol and tobacco are all stimulants. They are purified substances that have drug-like effects on the body. Any time you are using a substance to make yourself feel better, you are addicted to that substance. Addictions fuel destructive behaviour and stress. Once you have given them up, the odd one isn't going to hurt you.</td>
</tr>
<tr>
<td>Refined sugar and sweets</td>
<td></td>
</tr>
<tr>
<td>Alcohol</td>
<td></td>
</tr>
<tr>
<td>Dairy Products</td>
<td>No other animal species drinks milk after it is weaned. No milk, cream, milk chocolate, ice cream, yogurt, cheese or fromage frais. You can't get calcium from pasteurised milk. Look at gorilla's bones, they drink no milk. Get your calcium from green vegetables and eggs.</td>
</tr>
<tr>
<td>Wheat Bran</td>
<td>You can get all the fibre you need from fruit and vegetables. There is no need to eat wheat bran. Bran covers the outer lay of the wheat kernel and therefore absorbs all the sprays and insecticides used to protect the crop.</td>
</tr>
<tr>
<td>All breakfast cereals</td>
<td>All breakfast cereals are processed, packet food. Forget the slick advertising. Eat food that spoils, rots or goes off, especially for breakfast. Cereals do any of this, nor do they grow. They are dead and destructive to your health.</td>
</tr>
<tr>
<td>Cakes and Biscuits</td>
<td>Cakes and biscuits are just cereals with added sugars and fats. They might taste great but they do you no good at all and rob you of your energy.</td>
</tr>
<tr>
<td>Deep Fried Food and crisps</td>
<td>All vegetable oil forms trans-fats when it is heated. Olive oil is reasonably stable but it is best to cook with coconut oil, butter or lard.</td>
</tr>
<tr>
<td>Anything microwaved</td>
<td>Best to avoid microwaved food until we know more about what it does to us. Please don't put plastic bottles or baby food (milk and formula) into microwaves.</td>
</tr>
<tr>
<td>Soya Milk</td>
<td>Chemically denatured, soy is high in phytates that will leach calcium and other minerals from your body.</td>
</tr>
<tr>
<td>Table Salt</td>
<td>We need a certain amount of salt but choose sea salt or rock salt instead.</td>
</tr>
</tbody>
</table>

Tip: Most people feel much better just by changing their breakfast to the foods in the first category. Soup, raw carrot, fresh fruit or eggs are great breakfasts (not all at the same time), especially if you can do without the tea, coffee and toast.

Do your best on this eating plan for 2 weeks, then have whatever it is you think you are missing. You will be surprised how much your tastes have changed and you don't need it (or even like it) any more. If you can't make massive changes, that's OK. Just change what you can, when you can. If you want to just start somewhere, just change your breakfast.

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A copy of the Real Food Eating Plan is available online at

[www.naturality.org.uk/real_food_eating_plan.pdf](http://www.naturality.org.uk/real_food_eating_plan.pdf)
Testing for Chemicals

These days, many people live in a chemical fog that is often worse indoors than out.

Many chemicals can be tested with muscle testing using the sense of smell although the reliability tends to be less than with taste.

1. Test a group of muscles that are strong, deltoids and quads are good choices.
2. Have the patient take a deep breath of normal air and retest the muscles (this is a control test to make sure that deep inhalation doesn’t fail due to a mechanical fault)
3. Have the patient inhale the fumes of the chemical and hold their breath.
4. Retest.

Common Toxins in the Home (Reproduced with permission from www.wwf.org.uk)

Living Room

AVOID

- synthetic carpets, carpet underlay or upholstery with synthetic foams, foam rubber, latex or plastic coverings, because these emit VOCs;
- chemical finishes such as stain repellents and brominated flame retardants on furniture or carpets;
- re-carpeting or ripping out carpets if you are pregnant.

BUY

- carpets made from organic natural fibres such as wool, cotton, rattan or jute;
- curtains, carpets or upholstery containing little or no brominated flame retardants or stain repellents;
- computers and monitors carrying the TCO 95 eco-label, which limits the amount of brominated flame retardant in the product.

CHANGE

- carpets for wooden, ceramic, or cork floorings where possible;
- synthetic carpets for ones made from natural fibres, if carpeting is necessary;
- air fresheners for fresh air - open your windows! If you can’t do that, use natural odour eaters such as a bowl of baking soda, or natural fragrances such as potpourri or essential oils.
BATHROOM

AVOID

- cosmetics, toiletries and perfumes with synthetic fragrances;
- toothpaste, toothbrushes and mouthwashes containing Triclosan;
- long-term use of permanent hair dyes, especially those carrying a warning that they "can cause an allergic reaction. Do not use to colour eyelashes or eyebrows";
- vinyl flooring, as it may emit hazardous fumes and VOCs;
- sanitary products bleached with chlorine.

BUY

- beauty products such as soaps, shampoos, conditioners and hair care products made from natural ingredients;
- fragrance-free products;
- beauty products from companies that state they do not use phthalates;
- unbleached toilet paper and sanitary products.
- naturally made deodorant, soap and cotton wool pads from the WWF shop.

CHANGE

- the use of air fresheners for fresh air (open the windows, or use natural air fresheners such as baking soda or potpourri);
- pesticide-based anti-lice shampoos and lotions for natural product alternatives or "bug-busting" (combing wet hair using a plastic anti-head lice comb);
- synthetic chemical insect repellents for those using natural products, such as citronella.
KITCHEN

AVOID

- tinned food products;
- products containing Triclosan, such as certain plastic chopping-boards, washing-up cloths, sponges, liquids, soaps and disinfectants;
- chemical air fresheners or heavily scented cleaning products such as dishwashing liquids, floor cleaners and washing powders;
- using cling film in contact with high fat foods, unless the manufacturer’s advice states it is suitable for this (high fat foods include dairy products, meat, pastries and cakes);
- using cling film when re-heating or cooking food in a microwave oven;
- using silicon-based baking paper;
- microwaving food in plastic containers
- PVC and PC plastics (look on the packaging for either PVC 3 or PC 7, or look inside the recycling triangle for the numbers 3 or 7).

BUY

- fresh, frozen or dried food rather than tinned food;
- organic products wherever possible;
- a water filter to reduce the levels of chemical contaminants in drinking water;
- fragrance-free "green cleaners" or ones with a natural fragrance;
- products that don’t contain Triclosan
- buy a whole range of ecologically friendly cleaning products from the WWF shop

CHANGE

- processed foods for fresh, organic products wherever possible;
- reduce your intake of fatty meats and other high-fat foods such as cheese and cream;
- any lead water pipes in your house;
- from using anti-bacterial cleaners containing Triclosan to products which don’t - they give perfectly adequate protection against potentially harmful bacteria.
BEDROOM

AVOID

- soft furnishings with chemical finishes such as stain repellents and brominated flame retardants; synthetic carpets, carpet underlay or upholstery with synthetic foams, foam rubber, latex or plastic coverings, because these emit VOCs;
- chemical finishes such as stain repellents and brominated flame retardants on furniture or carpets;
- re-carpeting or ripping out carpets if you are pregnant.
- dry-cleaning clothes wherever possible;
- having too many electrical appliances in your bedroom such as computers, TVs and videos.

BUY

- machine washable clothes;
- clothes with fewer chemical treatments such as stain repellents.
- T-shirts and other clothes from the WWF shop
- naturally made deodorant from the WWF shop

CHANGE

- fragranced products such as deodorants and hairsprays for unfragranced or naturally fragranced products.
NURSERY

AVOID

- polycarbonate-plastic baby feeding bottles. The vast majority of plastic feeding bottles are made from polycarbonate which contains bisphenol A, a hormone disrupting chemical that can leach into the liquid inside. Polycarbonate can be identified by looking on the packaging for PC 7 or looking inside the recycling triangle for the number 7. Wherever possible, breast feeding is always the best option;
- using old and worn plastic baby bottles;
- using dummies and PVC toys that are more than two years old - they may contain phthalates, which are now banned in newer dummies and children’s plastic toys;
- painting, stripping old paint or using DIY products which emit fumes, when you’re pregnant.

BUY

- baby bottles that are not made of polycarbonate;
- children’s teething products and dummies from a reputable source;
- non-flexible plastic or wooden toys;
- children’s clothes and pyjamas without plastic logos or chemical treatments.
- kids T-shirts from the WWF shop

CHANGE

- your baby’s food to organic produce, wherever possible;
- polycarbonate feeding bottles for alternatives - and replace scratched and worn ones every few months.
GARDEN

AVOID

- painting, paint stripping or using DIY products with high levels of VOCs, especially if you or someone in your house is pregnant;
- occupying a newly-painted room - first, open the windows and ventilate it for as long as possible;
- exposing passengers to fumes when re-fuelling your car - shut the doors and windows;
- using pesticides indoors or in the garden - use alternatives and try gardening organically;
- using creosote-based preservatives. They are now banned for domestic use. Take any remaining products you may have to a proper hazardous waste disposal facility;
- using products pre-treated with creosote such as fences or garden furniture.

BUY

- water-based cleaning products, paints, stain removers, sealants and adhesives, or ones with low levels of VOCs;
- organic or natural paints made from plant oils - ask in the store to find which products are available.

CHANGE

- your gardening habits - go organic to minimise the use of pesticides;
- to a range of products to help you garden organically from the WWF shop;
- chemical pesticide treatments for natural pet treatments in the "flea war". Natural treatments can help keep fleas at bay - place dried lavender and rosemary around your pet’s bed, and add a chopped clove of garlic to your dog’s food twice a week. If your pet becomes infested, ask your vet to treat it professionally rather than using hazardous pesticides in your own home;
- your car as infrequently as practical. That “new car smell” comes from high levels of chemicals escaping from the plastic, upholstery, carpeting and other synthetic materials used in a car.
WWF’s top ten tips on reducing exposure to hazardous chemicals

1. Buy organic produce whenever possible.
2. Wash and peel fruit and vegetables before eating.
3. Avoid the use of pesticides in the home or garden by going organic.
4. Avoid canned food: choose fresh, frozen or dried foods instead.
5. Avoid food coming into contact with PVC cling film.
6. Use non-polycarbonate baby feeding bottles or, better still, breast-feed babies.
7. Open your windows instead of using air fresheners.
8. Use environmentally friendly cleaning products.
9. Buy soap, shampoos and cosmetics that don’t contain synthetic fragrances.
10. Use paints, varnishes and glues with a low VOC content, or those that are water-based.

Helpful Contacts

www.greenfibres.com - a great range of organic cotton clothing, bedding and household furniture.
www.aveda.co.uk - natural and luxurious range of cosmetics and makeup
www.onegroup.com – Organic skincare rated and audited to international specifications so that every ingredient can be traced back to the farm it was grown on.
www.neways.co.uk - safe cosmetics and personal care products. Excellent nutritional range. A direct sales multilevel company.
www.wwf.org.uk - information and environmentally friendly products
www.greenpeople.co.uk - natural, organic cosmetics and personal care products.
Www.cytoplan.co.uk – food state nutrients that are hard to overdose on and absorb easily.