Tissue Mineral Test (Lowenberg Test)

One of the strongest indicators of tissue calcium deficiency is muscle cramping at rest. This is a means for checking the tissue calcium stores of an individual suspected to have a tissue calcium deficiency. If a deficiency is confirmed, various forms of calcium and its co-factors will be tested orally in order to determine which specific forms of nutrients are needed to improve tissue calcium status.

Caution: Do not use this test if peripheral vascular disease is present or suspected. In elderly or frail patients, do not exceed 180.

Procedure

Place a standard blood pressure cuff around the patient's calf muscle. Instruct the patient to let you know when they feel the ONSET of cramping pain.

A muscle withstanding 200 millimeters of mercury is considered to be of sufficient calcium stores. A patient who has cramping prior to 200 mmHg is considered to be deficient in tissue calcium. The optimal tissue calcium level is considered to be 240 mmHg or more.

If a deficiency is indicated, have the patient taste the various forms of calcium (30 seconds, ideally) until the pain threshold is appropriately increased. In many cases a co-factor may have to be used in addition to a calcium source.

Calcium and Mineral Sources

Osteo-B Plus Ca/Mg Zyme Ca/Mg Plus Multi Mins Super Phosphozyme Bio CMP Ca-Zyme K-Zyme Co-Factors Hormonal Digestion Thyrostim Hvdro-Zvme Equi-Fem GTA HCL-Plus Cytozyme-O Meda Stim Betaine Plus HP Cytozyme-Orchic **Essential Fatty Acids** Cytozyme-M Other Factors Flax Seed Oil Caps Cytozyme-F Bio-D-Mulsion Black Currant Seed Oil Neonatal Multi-Gland Chlorocaps Biomega-3 Cytozyme-AD Bio-Ae-Mulsion Mixed EFA's Cytozyme-PT/HPT Liquid Iodine Note: the majority of people will respond to calcium and/or the cofactors listed above however, if necessary consider the following: Oxygenation Vitamin E Kidneys Hydration E-Mulsion 200 Cytozyme-KD Ginko Biloba Water Renal Plus OOrganic-15 Water & Electrolytes Bio-E-Mulsion Forte Argizyme **BioProtect**