

# Have A Tough Case? Think Liver

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How many times have you heard one of the old timers say during a lecture "when you have a tough case, hit the liver?" After over 30 years in the field, I guess I am getting close to being one of those old timers; and I can tell you they are right.

Why is the liver so important? Well for starts, it performs over 500 known functions. The liver is involved with digestion, the endocrine system, controlling blood sugar, protein and fat metabolism. If the liver is not working efficiently, symptoms include allergies, skin problems, digestive problems, headaches, fatigue and joint pain to name a few.

I think all of us are familiar with the toxins we are exposed to: heavy metals, plasticizers, pesticides and herbicides, the air we breathe, the water we drink, household chemicals; I mean we consume over 10 pounds of food additives in



a year alone. The liver has to deal with all these toxins. That doesn't even take into account the normal metabolic job of breaking down hormones, cholesterol, making amino acids, creating and restructuring enzymes, and dealing with cellular byproducts. The bottom line is the liver is the "LIVER of the BODY."

If we get it so bound and stuck with environmental toxins or byproducts, it can't perform its "living" functions effectively. Let's look at some of the signs that

suggest a tired, congested liver may be underlying your patient's complaints and then some treatment options.

Knowing that we live in a toxic environment if even one of these indicators is out of balance, the body is telling you the liver or gall bladder is malfunctioning and trouble is on the horizon. With that in mind, let's start with a questionnaire. I've listed 27 questions that suggest liver malfunction on the handout below. I like pre and post questionnaires

as a way to document progress for the patient. Somehow they seem to forget how sick they were.

Next, check for liver problems with physical exams. Blanching between the shoulder blades. Press on the area between the shoulder blades; if you can see a white fingerprint for a few seconds, it is a good sign that liver congestion is present.

Also, check for tenderness under the right ribcage, sometimes called Murphy's sign. Have your patient lie on their back with their knees bent. Slowly as the patient exhales insert finger tips palm side down and watch for expressions on their face or tenderness. Tenderness here suggests a swollen oversized gall bladder. Tenderness in the "web" of the right hand is also a possible indication of a gall bladder problem.

The Chapman Reflex for the liver is in the 6th intercostal space, on the mid-mamillary line.

Both blood and urine tests can be valuable to detect liver malfunction. If you are looking for chemical burden look for mercapturic acid and D-glutaric acid in the urine. You can determine whether there is excessive chemical exposure and if the body is handling that level of chemical exposure. Other familiar tests are the urinary indican or urinary sulfite tests. Standard laboratory tests include GGT, ALT or SGPT and AST or SGOT.

Remember, when test results are outside established laboratory ranges, liver cell destruction is already taking place. So I use Dr. Harry Eidenier's references. He has personally reviewed over 10,000 blood chemistry reports. You can see the ranges below.

I like to use neurolingual response testing to find which supplements will help improve liver function. I have about five favorite liver products, and I try to identify which has the greatest feedback response. If can you identify any tenderness using Chapman's reflexes for the liver, have the patient hold a nutrient in their mouth, and retest to see if the tenderness decreases.

Also, assess range of motion using various muscles and see if tasting the nutrient increases that range. The same can be true with pain levels. Get a pain score from the patient and have them taste different nutrients to see which ones increase range of motion or reduces pain.

Tests like these can be time consuming. Personally I use them whenever I can especially with the more difficult cases. My experience is that most patients love to experiment to see what is best for them.

The field of liver therapy contains much more than we could ever cover here, but I have included links below that go into more detail on the rational and use of my favorite liver products: MCS-2, Beta TCP, Phosphatidylcholine and Cytozyme-LV. Also below are video links with further details about some of the physical exams I've mentioned.

Remember, true wellness is helping people find the minor problems that keep them from functioning at 100%, then dealing with the problems while they are small. Why wait for a fatty liver, cirrhosis or hepatitis before we begin therapy?

Thanks for reading this week's edition. I'll see you next Tuesday.