

What is Nutrition Response Testing (NRT)?

Nutrition Response Testing (NRT) is a precise and scientific clinical muscle testing procedure used to evaluate health needs. Muscle response testing, first developed in the 1960's has been used by a wide range of medical and health professionals. It is a unique approach to health assessment and quite different from conventional allopathic procedures.

It is important to understand that NRT (or any form of muscle response testing) is not a medical diagnostic procedure, but rather a method of analysis. It is a neurological reflex evaluation technique that gives the doctor an additional "window" through which he can better evaluate function or dysfunction of the body. Nutrition Response Testing (NRT) helps to identify body functions, organs or glands that may have become imbalanced or overly stressed allowing health problems to develop. Information from this evaluation is combined with other testing data to allow the doctor to design a program of therapy to bring those functions back into balance with nutritional supplements, herbal remedies, homeopathic medications and dietary or lifestyle changes. Rather than merely focusing on symptoms and conditions we concern ourselves with bringing all of the body's functions into healthy balance. When this is accomplished, **the body can heal itself.**

A Reflex Based Technique

NRT works because of the relationship of reflex areas on the surface of the body to organs and glands within. Organ or glandular stress may be pinpointed through these reflex zones even before the symptoms of ill health have appeared. NRT provides an invaluable "window" for the doctor to detect malfunction in the body. By contrast traditional medical tests are generally not useful for detecting a malfunction until after the symptoms of disease are well developed.

There are different theories as to how muscle response testing works, but what we believe is that it is nothing more (or less) than a neurological reflex type test. It is similar to other medical examination procedures such as shining a light into the eye to observe how the pupil constricts, or tapping the tendon below the knee to see how the leg "jerks". In these types of tests the doctor applies a stimulus to the body and then observes how the body reacts to that stimulus. The nature of the body's response tells him things about the particular function he is evaluating.

How it Works: The Autonomic Nervous System (ANS)

The brain sends nerve fibers (much like telephone wires) to every organ, gland and tissue of the body. Through this miraculous "wiring system" the brain communicates with every body part and tissue and is able to regulate their various functions. The particular part of the nervous system that performs this function is called the Autonomic Nervous System or **ANS** (you can think of it as the *automatic* nervous system because it does not require any thought on your part to do its job). The ANS runs all body functions that keep you alive and healthy - digestion, hormone function, healing and repair, circulation, waste removal, blood pressure, etc.

We believe that the nerves that run to any given organ also communicate with the skin that is over or near the organ. When pressure is applied it creates a decreased oxygen supply to the skin by compressing the blood vessels and reducing the blood flow in the area (push on the palm of your hand and you can see that the skin turns white). This reduction of blood flow to the skin sends an alarm reaction to the ANS along the same nerve pathways that connect the ANS to the organ.

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If an organ is already stressed because of overwork, malfunction or disease, the additional stress caused by reducing the blood supply to the nerves of the area of skin related to the organ creates a magnified emergency response in the ANS. The ANS, sensing that the stressed organ needs additional support, responds by routing more energy to the organ.

The Energy Steal

Have you ever turned on a vacuum cleaner in your home at night? What happens to the lights? They dim when the vacuum cleaner is on. This is because there is only a limited amount of electricity coming into your home through the main power line. When you turn on an additional appliance, the power company cannot send more electricity to meet the increased demand. Instead, the appliance will rob energy from the rest of the house, dimming the lights. A similar thing happens in the body. If an organ is already stressed for any reason and you create an additional demand on the body's limited energy supply, the body can't instantly create more energy. It has to "steal" the energy from the rest of the body. This shifting of energy from the rest of the body to the organ being tested is most easily detected by testing the strength of a muscle. A muscle may first test as "strong" before you activate an organ reflex, but after you activate the associated skin reflex (if the organ is already challenged) the muscle will go weak so that it cannot be "locked". This inability to lock the muscle is the key to muscle response testing. The muscle test is not so much a test of strength as it is a test of resistance. *The characteristic of the resistance the patient produces is the key to correctly interpreting the muscle test.*

How NRT Is Done: The Lock vs the Fade

To better explain this, let's go through a typical muscle response testing / NRT procedure. In NRT we usually have the patient lie on a comfortable table, though the test may also be done in a standing or sitting position. The shoulder muscle is most commonly tested because it is convenient to use, but any muscle can be used. The patient fully extends an arm and the doctor pushes on the arm in a downward direction and at the same time, puts pressure on the reflex area associated with the organ or gland being evaluated. (Where more intimate body areas are involved, the patient applies this pressure themselves). Normally, the patient should be able to "lock" their arm against the pressure the doctor exerts on the arm. If the organ being tested is under abnormal stress for any reason, the patient will be unable to lock their arm because the body shifts energy away from the muscles to the organ being tested. The arm will weaken and give out. This is referred to as a "fade".

The patient is instructed to only maintain a consistent strong resistance and to not increase resistance as they feel the doctor increase his force against the arm (which he will do if he does not detect the "lock"). Increasing resistance will result in an "arm wrestling" contest that will make it more difficult for the doctor to detect the "lock".

A "locking" of the muscle would indicate that the organ is strong and not stressed; a "fading" of the muscle indicates stress or weakness of that organ or gland. This type of testing procedure is very sensitive and will detect dysfunction in an organ that may not show up on more traditional testing procedures, such as blood testing. However, it is important to again point out that NRT is not diagnostic in the same sense that regular medical tests are (which is why insurance companies will not accept a diagnosis using it). It only tells the doctor if there is abnormal stress occurring in a given part of the body. The doctor still needs to put the NRT test results together with a proper medical history and other testing and examination procedures when indicated.

NRT is a neurological reflex test. There is nothing "hocus pocus" about it if you understand how it works. It is a powerful and important part of the total health evaluation that you will receive in our office.