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# FRANK

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Next Test Due: 9/10/2003

# CellMate<sup>™</sup> Blood Test (CWP) Report Practitioner

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The % Status is the weighted deviation of the laboratory result.

					Low Results					
-80	-60	-40	-20	0		% Status		Result	Low	High
		l I			HDL-Cholesterol	-40.53	L	44.00	35.00	130.00
					Uric Acid	-40.20	L	4.40	3.90	9.00
					Neutrophils	-38.00	L	51.00	48.00	73.00
i	i				Iron, Total	-34.76	L	81.00	65.00	170.00
i	i I				Neutrophil Count	-32.97	L	2856.00	1800.00	8000.00
1	1	:			Calcium	-32.61	L	8.90	8.50	10.80
1	1	1			W.B.C.	-25.38	L	5.60	4.00	10.50
	1	1			Globulin	-25.00	L	2.30	1.90	3.50
					Phosphorus	-25.00	L	3.00	2.50	4.50

-25%

# High Results

-2	5 <b>C</b>	) 25	5 50	75		% Status		Result	Low	High
					LDL	69.12	Н	143.00	62.00	130.00
				1	Triglycerides	56.03	Н	211.00	0.00	199.00
					sGPT	52.00	Н	51.00	0.00	50.00
				i	Eosinophils	50.00	Н	6.00	0.00	6.00
				i	Protein/Globulin Ratio	40.00	Н	3.00	2.10	3.10
				1	Cholesterol	39.00	Н	229.00	140.00	240.00
					Ultra-Sensitive TSH	37.96	Η	4.88	0.35	5.50
					MCH	34.72	Η	32.08	27.00	33.00
				1	MCV	29.17	Н	95.83	80.00	100.00
			1	1	Creatinine	27.78	Н	1.30	0.60	1.50
				l	Chloride	26.92	Н	106.00	96.00	109.00

-25%

25%

# **Basic Status Report (Alphabetic)**

Male / Age: 56

The % Status is the weighted deviation of the laboratory result relative to the range.

-100	-50	0	50	100		% Status		Result	Low	High
100				100	A/G Ratio	19.23		2.00	1.10	2.40
	1				Albumin	5.00		4.60	3.50	5.50
1					Alkaline Phosphatase	-23.86		60.00	37.00	125.00
					Anion Gap	3.33		14.40	8.00	20.00
I				I	B.U.N.	11.90		18.00	5.00	26.00
I			I	I	B.U.N./Creatinine Ratio	-8.70		13.85	6.00	25.00
I			I	1	Basophil Count	-22.00		56.00	0.00	200.00
I			I	i	Basophils	-16.67		1.00	0.00	3.00
  			i	i i	Bilirubin, Total	-4.55		0.60	0.10	1.20
   			i		Calcium	-32.61	L	8.90	8.50	10.80
1			1	1	Calcium/Phosphorus Ratio	16.67		2.97	2.30	3.30
1				1	Chloride	26.92	Н	106.00	96.00	109.00
1				1	Cholesterol	39.00	Н	229.00	140.00	240.00
1	1			1	CO2	0.00		26.00	20.00	32.00
	1		1		Creatinine	27.78	Н	1.30	0.60	1.50
					Eosinophil Count	7.20		336.00	50.00	550.00
					Eosinophils	50.00	Н	6.00	0.00	6.00
 !				I	Free T4 Index (T7)	-22.50		6.20	4.00	12.00
 !			I	<u> </u>	GGT	-6.47		37.00	0.00	85.00
	1				Globulin	-25.00	L	2.30	1.90	3.50
				1	Glucose	-2.73	-	86.00	60.00	115.00
			1	1	HDL-Cholesterol	-40.53	L	44.00	35.00	130.00
					Hematocrit	0.00	-	46.00	37.00	55.00
				1	Hemoglobin	-2.00		15.40	13.00	18.00
			i	i	Iron, Total	-34.76	L	81.00	65.00	170.00
					LDH	5.00	-	132.00	0.00	240.00
					LDL	<u>69.12</u>	н	143.00	62.00	130.00
			1		Lymphocyte Count	-23.80		1848.00	800.00	4800.00
1	1			1	Lymphocytes	0.00		33.00	18.00	48.00
I	1			1	MCH	34.72	н	32.08	27.00	33.00
 				1	MCHC	-13.04		33.48	32.00	36.00
				1	MCV	29.17	н	95.83	80.00	100.00
1				1	Monocyte Count	-16.22		504.00	200.00	1100.00
				1	Monocytes	19.23		9.00	0.00	13.00
					Neutrophil Count	-32.97	L	2856.00	1800.00	8000.00
					Neutrophils	-38.00	- -	51.00	48.00	73.00
					Phosphorus	-25.00		3.00	2.50	4.50
					Potassium	0.00	-	4.40	3.50	5.30
					Protein, Total	-14.00		6.90	6.00	8.50
					Protein/Globulin Ratio	40.00	н	3.00	2.10	3.10
I					R.B.C.	-16.67		4.80	4.20	6.00
	1		1	<u> </u>	sGOT	23.33		33.00	0.00	45.0
1	<u> </u>			<u> </u>	sGPT	<u>52.00</u>	н	<u> </u>	0.00	50.0
1	<u> </u>			   	Sodium	8.33		142.00	135.00	147.0
			1	<u> </u>	T-3 Uptake	-19.33		28.60	24.00	39.00
			1	   	Thyroxine (T4)	-6.25		7.50	4.00	12.00
					Triglycerides	56.03	н	211.00	0.00	199.00
					Ultra-Sensitive TSH	37.96		4.88	0.00	
					Uric Acid	-40.20		4.88		5.50
			i	i	W.B.C.	-40.20		<u>4.40</u> 5.60	3.90	9.00
1				i	Total Status Deviation	21.52	L	00.6	4.00	10.50
	-25	% 259	70							
					Total Status Skew	1.39				

### **Nutritional Support**

The fo	llowing supplements may help t	o balance your biochemistry.	Consi	ult your practitioner.	
	1-Elevated Lipid Level Protocol See Nutrition-Detail			1-Incr. Protein to CHO Ratio 30% Pro, 30% Fat, 40% CH	D
	1-Multivitamin w/Digestive Suppo 2x daily	ort		1-Oral Electrolyte - Standard 2x daily	Formula
	2-Vitamin B12 2x daily 500 mcg (Add to other	protocols)		2-Vitamin C 1x daily 1000 mg	
	3-Sunlight 1 hour per day			H - Garlic 1 - 3 times daily	
	H - Gugul 1 - 3 times daily			H - Milk thistle 1 - 3 times daily	
	H - Nettle 1 - 3 times daily				
	tional Supplements to A llowing supplements may aggra		ocher	nistry.	
	Creatine	H - Billberry	Lac	ctoferrin	MCT Oil

# **Food Recommendations**

The following foods may help to balance or strengthen your biochemistry.

Artichoke	Black Pepper	Bok Choy Cabbage
Broccoli	Brown Rice	Cantaloupe
Fava Beans	Grapefruit	Green Beans
Halibut	Honeydew Melon	Kale
Macadamia Nuts	Milk, Cow	Mushrooms
Onions	Papaya	Red Peppers
Turnip Greens	Wild Rice	Yams
	Broccoli Fava Beans Halibut Macadamia Nuts Onions	BroccoliBrown RiceFava BeansGrapefruitHalibutHoneydew MelonMacadamia NutsMilk, CowOnionsPapaya

## Foods to AVOID

The following foods may aggravate already out-of-balance biochemistry.

Bacon	Cholesterol Rich Foods	Chuck Roast	Coconut Cream
Coconut Milk	Coffee (2)	Dairy Cream	Egg Yolk
Eggplant	Escargot	Hydrogenated Fats	Liver Pate
Margarine	Sweetbreads		

## **Out-Of-Balance Panel Values**

The following panels have a PSD of greater than 25% indicating need for further review. PSD is the Panel Status Deviation, or the average imbalance of that subset of results. The PSS is the Panel Status Skew, or the direction, negative (deficiency) or positive (excess), of that subset of results.

Panel Name	PSD	PSS
Inflammatory Process	35.87%	15.23%
Lipid	34.11%	20.60%
Cardiac Marker	26.20%	5.88%
Bone/Joint	25.52%	-24.10%

## Lab Reported out-of-range Values

The following results are out-of-range (as reported by the lab), and should be carefully reviewed.

#### LDL ( 69.12%)

LDL is the cholesterol rich remnants of the lipid transport vehicle VLDL (very-low density lipoproteins). There have been many studies showing correlations between high levels of LDL and arterial artherosclerosis. Due to the expense of direct LDL measurement, a calculation known as the Friedewald formula is used (Total Cholesterol - HDL Cholesterol - Triglycerides/5). When Triglyceride levels are greater than 400, this method is not accurate. Increased levels are seen in high cholesterol diets, nephrotic syndromes, multiple myeloma, hepatic obstruction or disease, anorexia nervosa, diabetes, chronic renal failure, and premature coronary heart disease.

#### Foods which may have an adverse affect:

Coconut Milk

#### Triglycerides ( 56.03%)

Triglycerides is where most of the stored fat in the body resides. While high triglycerides are clearly associated with coronary heart disease, it is also been shown to be responsive to dietary changes.

#### Drugs which may have an adverse affect:

Itraconazole, Levothyroxine, Methyldopa, Miconazole, Polythiazide, Propranolol, Tamoxifen

#### Nutrients which may have an adverse affect:

MCT Oil

#### Foods which may have an adverse affect:

Bacon, Cholesterol Rich Foods, Chuck Roast, Coconut Cream, Coconut Milk, Dairy Cream, Egg Yolk, Margarine, Sweetbreads

#### sGPT ( 52.00%)

Serum Glutamic Pyruvic Transaminase or ALT is an enzyme found primarily in the liver but also in the heart and other tissues. It is more useful in diagnosing liver function than sGOT levels are. Increased levels are seen in mononucleosis, alcoholism, liver damage, kidney infection, chemical pollutants, or myocardial infarction.

#### Drugs which may have an adverse affect:

Acetaminophen, Allopurinol, Amitriptyline, Ampicillin, Aspirin, Carbamazepine, Chlorpromazine, Clindamycin, Clofibrate, Codeine, Cortisone, Coumadin, Desipramine, Diazepam, Erythromycin, Fluphenazine, Flurazepam, Furosemide, Gentamicin, Griseofulvin, Guanethidine, Haloperidol, Hydralazine, Ibuprofen, Imipramine, Indomethacin, Itraconazole, Kanamycin, Ketocanazole, Levodopa, Levothyroxine, Lincomycin, Lovastatin, MAO Inhibitors, Mercaptopurine, Methimazole, Methotrexate, Methyldopa, Morphine, Naproxen, Nitrofurantoin, Paramethadione, Penicillamine, Phenelzine, Phenobarbital, Phenylbutazone, Phenytoin, Piroxicam, Polythiazide, Pravastatin, Procainamide, Progesterone, Progestins, Propranolol, Protriptyline, Rifampin, Spectinomycin, Sulfamethizole, Sulfamethoxazole, Sulfasalazine, Sulfisoxazole, Tetracycline, Trimethadione, Valproic Acid

## Foods which may have an adverse affect:

Eggplant

#### Eosinophils ( 50.00%)

Eosinophils protect the body from parasites and allergic reactions, therefore, elevated levels may indicate an allergic response.

#### Drugs which may have an adverse affect:

Allopurinol, Ampicillin, Carbamazepine, Chlorpromazine, Clindamycin, Desipramine, Erythromycin, Fluorides, Fluphenazine, Haloperidol, Imipramine, Indomethacin, Kanamycin, Methyldopa, Naproxen, Nitrofurantoin, Penicillamine, Penicillin, Phenylbutazone, Phenytoin, Procainamide, Protriptyline, Rifampin, Streptomycin, Sulfamethoxazole, Sulfasalazine, Sulfisoxazole, Tetracycline, Triameterene, Viomycin

## **Additional Tests**

The following additional lab tests may help in diagnosis.

## Consider ordering prostate specific antigen (PSA)

Rationale: Sex is Male Age is >= 40

# Blood Test (CWP) Date: 3/7/2000

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#### Male / Age: 56

Nutritional and herbal information contained in this report is based upon research related to imbalances in your chemistry. The recommendations are based upon the information provided, without interpretation. This must be done with the help of a qualified health care professional.

<ul> <li><b>1-Elevated Lipid Level Protocol</b> See Nutrition-Detail</li> <li>HIGH LIPID LEVEL PROTOCOL</li> <li>With abnormal lipid markers, the following protocol is recommended:</li> <li>Broad Spectrum Fatty Acid Supplement (1-2 times daily), Oral</li> <li>Electrolyte-Standard Formula (1-3 times daily), balanced and a</li> <li>B-complex vitamin (2 times daily).</li> <li>BROAD SPECTRUM FATTY ACID</li> <li>Broad spectrum fatty acids, high in Omega-3, -6 and -9 have been shown to improve lipid balance.</li> <li>ORAL ELECTROLYTE</li> <li>Necessary to regulate fatty acid metabolism.</li> <li>B-COMPLEX VITAMINS</li> <li>B complex vitamins are involved in a broad spectrum of cell metabolic deficiencies as well as fatty acid utilization.</li> </ul>	Decreased HDL-Cholesterol	<u>Rationale</u> <u>Normal</u>	Increased LDL Cholesterol
<b>1-Incr. Protein to CHO Ratio</b> 30% Pro, 30% Fat, 40% (INCREASE PROTEIN TO CHO RATIO) The increase in protein to carbohydrate ratio is essential to stabilizing fatty acid metabolism and insulin resistance.	CHO <u>Decreased</u> Uric Acid HDL-Cholesterol	<u>Normal</u> B.U.N. CO2	Increased Triglycerides LDL
<b>1-Multivitamin w/Digestive Support</b> 2x daily MULTIVITAMIN WITH DIGESTIVE SUPPORT A multivitamin which contains elements for digestive support including enzymes, betaine HCL, bromelain and Lactobacillus may help balance your chemistry.	<b>Decreased</b> Globulin Iron, Total	<u>Normal</u> LDH Alkaline Phosphatase	Increased Chloride Eosinophils
<b>1-Oral Electrolyte - Standard Formula</b> 2x daily ORAL ELECTROLYTE The main electrolytes in the human body are sodium, potassium, phosphorus, calcium, chloride, magnesium and bicarbonate. During illness, the equilibrium present in healthy individuals, is disturbed. A well balanced formula is helpful in restoring a state of equilibrium. A sports formula will have greater levels of bicarbonate yet still keeping the proportion of the other salts in line.	<u>Decreased</u>	Normal Potassium Sodium CO2	Increased
<b>2-Vitamin B12</b> 2x daily 500 mcg Add to other protocols VITAMIN B12 The only vitamin containing essential mineral elements, B12 is important in metabolism of nerve tissue, protein, fat and carbohydrate metabolism and the actions of a number of amino acids. It also is involved in the production of DNA and RNA.	<u>Decreased</u>	<u>Normal</u> R.B.C.	<u>Increased</u> MCV MCH
<b>2-Vitamin C</b> 1x daily 1000 mg VITAMIN C Water-soluble vitamin essential for the synthesis and maintenance of collagen as well as body tissue cells, cartilage, bones, teeth, skin and tendons. Increases protection mechanism of the immune system. Also improves iron and calcium absorption as well as trace mineral utilization.	Decreased W.B.C.	<mark>Normal</mark> Alkaline Phosphatase LDH	Increased Triglycerides LDL
<b>3-Sunlight</b> 1 hour per day SUNLIGHT Research shows that sunlight may be helpful in increasing vitamin D3 levels which in turn may help to stimulate mineralization of the bone. Care should be taken in not overexposing the skin and increasing the risk for some melanemas.	Decreased Phosphorus Calcium	<u>Normal</u>	Increased

risk for some melanomas.

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## Male / Age: 56

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done with the help of a qualified health care professional.			
<b>H - Garlic</b> 1 - 3 times daily GARLIC Garlic's use has been reported to be beneficial in lowering blood lipid (fat) levels. May cause unwanted bodily odors. As with any herb, caution should be taken with its use.	<u>Decreased</u>	<u>Rationale</u> <u>Normal</u>	Increased Cholesterol LDL
<b>H - Gugul</b> 1 - 3 times daily GUGUL Gugulipid (Commiphora mukul), is a resin derived from the mukul myrrh tree with both triglyceride and cholesterol lowering properties. It has also been reported to be beneficial in the treatment of inflammatory conditions. As with any herb caution should be taken with its use.	<u>Decreased</u>	<u>Normal</u>	Increased Triglycerides LDL Cholesterol
<b>H - Milk thistle</b> 1 - 3 times daily MILK THISTLE The herb milk thistle (Silybum marianum) has been reported to be effective in improving liver function. As with all herbs, caution should be taken with its use. Use only under the direction of a health care practitioner if you have chronic liver disease.	<u>Decreased</u>	<u>Normal</u> sGOT	Increased sGPT
<b>H - Nettle</b> 1 - 3 times daily NETTLE Also known as stinging nettle, research has reported that this herb may be helpful at reducing chlorides. It also has a mild diuretic effect and has been used to relieve benign prostatic hypertrophy. As with all herbs, caution should be taken with its use.	<u>Decreased</u>	<u>Normal</u> B.U.N.	Increased Chloride
AVOID THE FOLLOWING SUPPLEMENTS	3		
AVOID Creatine CREATINE Creatine is supportive of nitrogen retention especially in states of catabolism. Synthesized from arginine and glycine in the kidney, creatine is methylated in the liver to form creatine and ultimately creatinine in muscle.	<u>Decreased</u>	<u>Normal</u>	Increased Creatinine
<b>AVOID H - Billberry</b> BILBERRY Billberry (Vaccinium myrtillus) is an herb often used for the control of insulin levels and may help halt or prevent macular degeneration. It has also been reported to be effective in lowering triglyceride levels. As with any herb, caution should be taken with its use. Bilberry also may interfere with iron absorption.	Decreased Iron, Total	<u>Normal</u>	<u>Increased</u>
AVOID Lactoferrin LACTOFERRIN - CONTRAINDICATED IN PREGNANCY Lactoferrin is a immunoregulatory iron-binding protein closely related to the plasma iron-transporting protein transferrin. Lactoferrin is anti-inflammatory with antifungal, antiviral, and antibacterial properties as well as being supportive in conditions involving immune incompetency. Lactoferrin is contraindicated during pregnancy.	Decreased Iron, Total	<u>Normal</u>	<u>Increased</u>
AVOID MCT OII Prescription only MCT OILS (MEDIUM CHAIN TRIGLYCERIDES) Saturated fatty acids that are 6 to 12 carbons long. They are absorbed easily because of the greater solubility due to their smaller molecular	Decreased	<u>Normal</u>	Increased Triglycerides
size.			

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Male / Age: 56

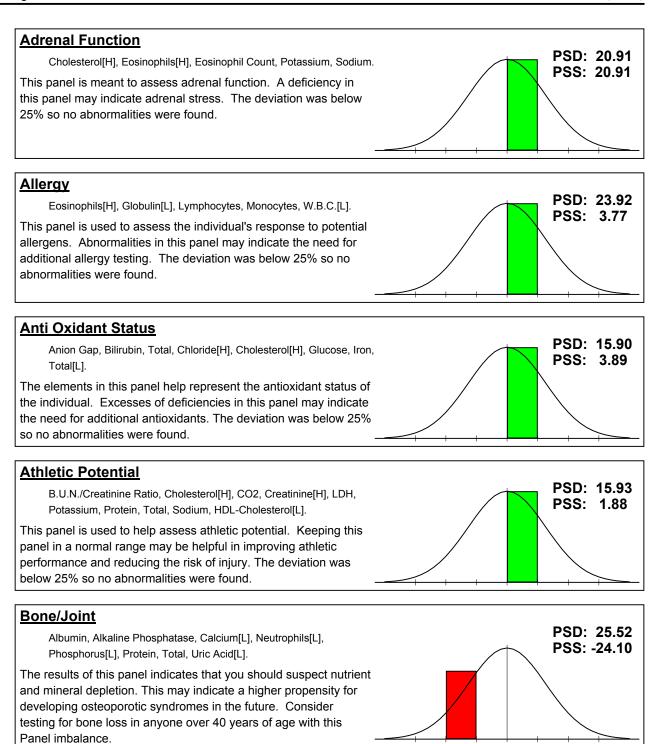
Drugs listed below tend to further aggravate elements of blood chemistry that are out of range (H or L). The (#) after each drug denotes the number of times that drug is flagged as being potentially harmful.

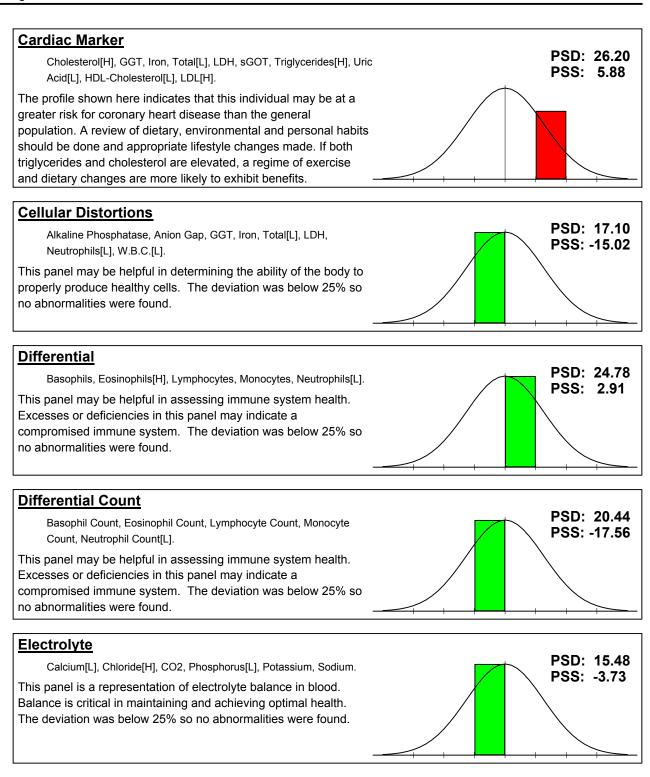
ACTH(2) Albuterol(2) Amoxicillin Carbamazepine(8) Clofibrate(5) Desipramine(4) Fluorides(4) Gentamicin(4) Hydralazine(2) Imipramine(6) Kanamycin(4) Lincomycin(3) Mannitol(2) Methyldopa(6) Neomycin(3) Paromomycin Phenobarbital(6) Polythiazide(4) Procarbazine Protriptyline(3) Streptomycin(4) Sulfisoxazole(3) Trimethadione(5)

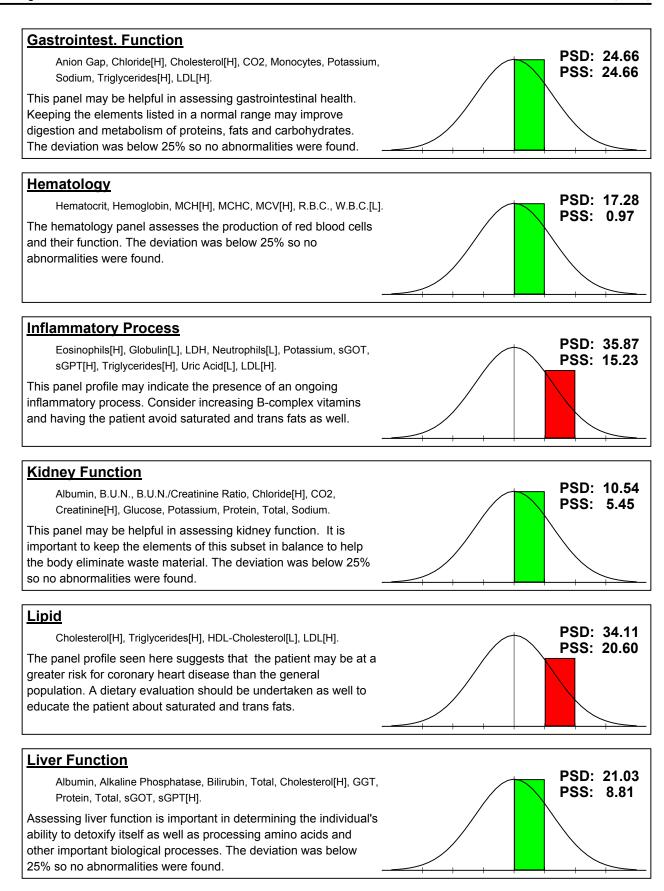
Acetaminophen(2) Allopurinol(6) Ampicillin(3) Chlorothiazide Codeine Diazepam(3) Fluphenazine(4) Griseofulvin(5) Hvdrocortisone Indomethacin(6) Ketocanazole(2) Lithium(5) Mercaptopurine(2) Miconazole(3) Nifedipine(3) Penicillamine(6) Phenylbutazone(8) Pravastatin Progesterone Ramipril Sulfamethizole(2) Tamoxifen(4) Valproic Acid(3)

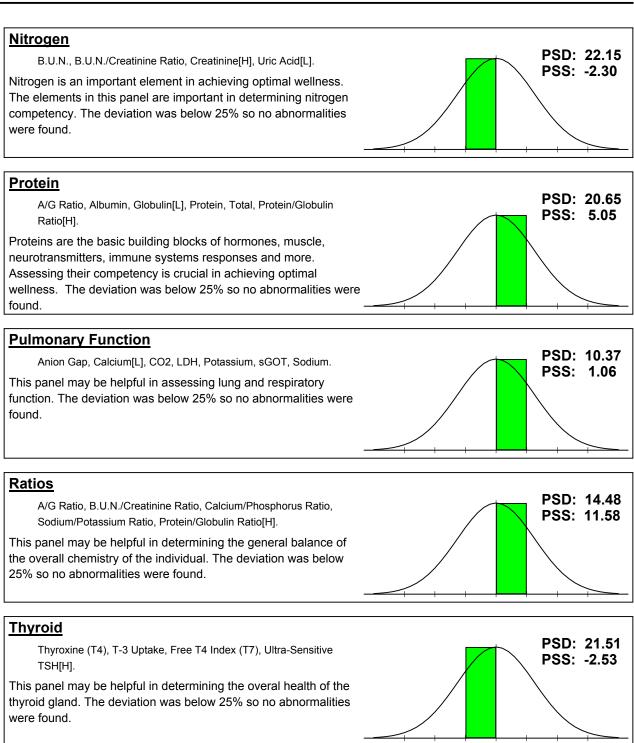
Acetazolamide(4) Amantadine(2) Aspirin(7) Chlorpromazine(6) Cortisone(5) Epinephrine(2) Flurazepam Guanethidine(2) Hydroxyurea(4) Insulin(2) Levodopa(3) Lovastatin Methimazole(4) Morphine Nitrofurantoin(5) Penicillin(4) Phenytoin(8) Prednisone(4) Progestins(2) Rifampin(5) Sulfamethoxazole(4) Tetracycline(7) Vancomycin(3)

Acyclovir(2) Amitriptyline(3) Busulfan Clindamycin(4) Coumadin(2) Erythromycin(3) Furosemide(4) Haloperidol(3) Ibuprofen(6) Itraconazole(2) Levothyroxine(3) MAO Inhibitors(2) Methotrexate(4) Naproxen(3) Paramethadione(6) Phenelzine(2) Piroxicam(3) Procainamide(3) Propranolol(4) Spectinomycin Sulfasalazine(4) Triameterene(3) Viomycin(3)









# **Clinical Correlation**

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Male / Age: 56

# Blood Test (CWP) Date: 3/7/2000

This report "MATCHES" clinical observations with the lab test. Elements shown, normal and abnormal, tend to characterize the observation. Highlighted elements are those reported to "MATCH" the characteristics of the clinical observation. Others are NOT matches but are elements in the observation.

# Euthyroid Sick Syndrome ()

# 66.67% (2 of 3)

Decreased n/a Triiodothyronine <u>Normal</u> -6.25 Thyroxine (T4) Increased 37.96 Ultra-Sensitive TSH