

Integration Series — Class 12: Biochemical Assessment & Adrenal Stress

Overview

This class focuses on the biochemical realm of holistic kinesiology, covering common toxic burdens, gut health, adrenal stress syndromes, and how to identify and correct these issues using muscle testing, modes, and priority-based assessment.

"So many people are toxic with their diets, with their environmental exposure, with their endotoxins — not just exotoxins they're breathing in, but endotoxins. You see so commonly candida, parasites, heavy metals, leaky gut, SIBO, and also adrenal conditions."

Section 1: The Importance of Biochemical Clearing

A core principle of this approach is that psychological or structural corrections may not hold if a biochemical imbalance is left unaddressed.

"If somebody has gut issues and you're working on the psychological, they often can't get their psychological cleared because of the food they're putting in their mouth and the toxins that are coming up from the body."

The most effective sessions integrate all dimensions of the Triad of Health.

"The best sessions combine all of it — some structural work, some psychological clearing, some biochemical clearing, and some energy work. That's where you really get the best, because you're coming at it from all angles as the body reveals it."

Section 2: The Priority Principle

Key Concept

The body presents compensations approximately 80% of the time. Working on compensation instead of the root cause will produce incomplete or temporary results.

"What you'll find is generally 80% compensation. If you work on the compensations, either they won't fix or they'll come back — because that's like mopping up a wet floor when the priority is the hole in the roof."

The Edison Reminder

"The doctor of the future will give no medicine, but will educate his clients in the cause and prevention of disease as well as diet and the person's lifestyle."

Developing Clinical Intuition

As a practitioner advances, the body begins to communicate more directly, sometimes even before a formal muscle test is performed.

"That's what you get to when you get really good — you don't even have to muscle test because you just know what to check. That's what will happen. You're moving into the mastery stage."

Section 3: Biochemical Checklist Topics

The following are the key areas covered in the biochemical assessment checklist. Students should review and practice each one before the March event.

- **Hydration testing** — performed via a simple hair pull
- **Food sensitivity testing** — hold the food and include C1; Riddler points may reveal hidden sensitivities
- **Testing organs under stress** — point into the organ to identify what is out of balance and determine priorities
- **Under-energy head points** — performed on every client
- **Navel assessment** — tug around the navel
- **Food combining principles** — avoid mixing proteins and carbohydrates in the same meal; eat fruit alone
- **Blood chemistry balancing** — have the client touch Spleen 21 on the left; if it goes weak, find which Kidney 27 restores strength
- **Supplement testing** — use the PMC at an angle, then test while the client holds supplements
- **Heavy metals testing** — use a strong muscle and cross the midline; if it switches off, a heavy metal burden is indicated
- **Ileocecal valve** — assess for open or closed; correct and teach the client home correction
- **SIBO (Small Intestine Bacterial Overgrowth)** — often related to the ileocecal valve
- **Leaky gut** — common causes include gluten and medications such as antacids; L-Glutamine is a primary repair nutrient
- **Candida** — key supplements include zinc, caprylic acid, and Sporex; assess what is driving the valve dysfunction
- **Zinc and Magnesium** — assessed using the backstroke technique (downward on the right = zinc needed; upward on the left = magnesium direction)

Section 4: Leaky Gut Protocol

L-Glutamine is a primary nutrient for healing the lining of the small intestine.

Muscle Test Indicator Point

- **Small Intestine 19** is the indicator point for L-Glutamine deficiency.
- A strong muscle will go weak when this point is activated if L-Glutamine is needed.

Common Causes to Assess

- Excess gluten consumption
- Use of antacid medications
- Other pharmaceutical drugs

Section 5: The Ileocecal Valve

Nutritional Guidance

The nutrition indicated for the ileocecal valve depends on the underlying cause. Chlorophyll (from sources such as sprouts, leafy greens, and spirulina) is a primary support. Calcium may be indicated for a closed valve. However, the most important step is to identify the underlying *cause of* the valve dysfunction.

"Look behind why the valve is open or closed — that will tell you what supplements are needed."

Common Underlying Causes

- Candida — indicated supplements include zinc, caprylic acid, and Sporex
- Hydrochloric acid deficiency — impaired protein digestion allows undigested food to stress the valve
- Parasites

Teaching the Client

Photograph the home correction technique so the client can repeat it independently during an acute flare-up. Engaging the client in their own care is a key part of the session.

Section 6: The Three Stages of Adrenal Stress (Hans Selye's GAS Model)

Hans Selye identified the General Adaptation Syndrome (GAS), which describes how the body responds to prolonged stress. There are three stages.

Stage 1 — Alarm Reaction

Physiological Profile:

- Cortisol is elevated (spiked)
- DHEA is normal or low-normal
- The body enters a sympathetic-dominant state
- Adrenaline (epinephrine) surges from the adrenal medulla
- Heart rate increases, and sweating occurs
- Blood flow moves away from the digestive organs toward the muscles
- Hydrochloric acid secretion decreases

"It's always good to relax and chill when you're about to eat. If you're really stressed out, don't eat a big protein meal — just chill and drink a lot of water."

Muscle Test Indicators:

- A weak Sartorius or Gracilis may appear without any challenge or circuit locating

Steps to Test:

1. Test the Sartorius and Gracilis in the clear.
2. If they are already weak without challenge, the client is likely in Stage 1 (Alarm).
3. Place the weak muscle in circuit and proceed through the modes.

Stage 2 — Adaptive (Resistive) Phase

Physiological Profile:

- Cortisol levels begin to drop toward borderline or low
- DHEA is borderline or low
- The body is "hanging in there" — still fighting but no longer in acute panic
- Sodium is retained to maintain blood pressure
- The body maintains necessary energy and circulation to deal with the ongoing stress

Muscle Test Indicators:

- The Sartorius and Gracilis test strong in the clear
- When the client touches the adrenal neurolymphatic points (2 inches up, 1 inch out from the navel), the previously strong muscles go weak
- This is also called the "hidden adrenal" pattern

Steps to Test:

1. Test the Gracilis — pull straight out.
2. Test the Sartorius — flop the knee outward to approximately 90 degrees and pull straight.
3. Confirm both are strong in the clear.
4. Have the client touch the adrenal neurolymphatics: 2 inches up and 1 inch out from the navel (approximately 5 cm up and 2.5 cm out for metric users).
5. Re-test the previously strong muscle. If it now goes weak, the client is in Stage 2.
6. Place the neurolymphatic contact in circuit and proceed through the modes.

Supplement:

- **GSC (Glandular Stress Complex)** by Progressive Labs is a primary support product for adrenal stress. (Practitioners outside the US should consult for an equivalent product.)

Stage 3 — Exhaustion Phase (Reverse Adrenal)

Physiological Profile:

- The most commonly encountered stage in clinical practice
- The adrenal glands are severely depleted
- The body's responses become *reversed* — what normally weakens a muscle may now strengthen it
- The body will grab hold of anything (including white sugar) to keep functioning
- Intense sugar cravings are a hallmark sign

"The body is so exhausted that it will grab a hold of anything to keep going. That's where you really crave sugar."

Additional Signs of Adrenal Exhaustion:

- Waking up feeling deeply fatigued even after many hours of sleep
- Dizziness or near-fainting upon standing (the blood pressure fails to rise adequately)
- Extreme sensitivity to bright light or noise
- High reactivity and emotional volatility
- Pupillary reflex test: when a pen light is shone into the eye, the pupil constricts but then dilates again quickly and repeatedly, rather than holding — this failure to accommodate is a clinical sign of adrenal exhaustion

Muscle Test Indicators:

- The Sartorius or Gracilis may test weak in the clear
- A strong indicator muscle will *not* go weak when white sugar is placed on the body (it stays strong — a reversed response)
- When GSC is added simultaneously with the sugar, the muscle will then go weak (the body reveals the truth)

Steps to Test:

1. Identify a strong indicator muscle and confirm it is not over-facilitated.
2. Place white sugar on the client's body.
3. Re-test the indicator muscle. In Stage 3, it remains strong (reversed response).
4. Add GSC alongside the sugar.
5. Re-test. If the muscle now goes weak, the Stage 3 pattern is confirmed.
6. Test dosage of GSC by asking: "More than one per day? More than two?" and so on, until you find the appropriate daily amount.

"It makes a great teaching tool to show the person an example of how kinesiology works."

Section 7: Correction Protocol for Adrenal Stress

Once the adrenal stage is identified, proceed through the following steps.

Step 1 — Place the Stress Pattern in Circuit

Have the client touch the adrenal neurolymphatic points (2 inches up, 1 inch out from the navel on both sides), or use the weak Sartorius / Gracilis muscle as the circuit indicator.

Step 2 — Check the Modes

Work through each mode and identify which are active:

- **Structural** — neurolymphatics, aerobic exercise, massage, yoga
- **Nutritional** — diet additions, diet deletions, supplement additions (see below)
- **Emotional** — identify and clear the primary emotional stressor
- **Energy** — meridian tracing, chakra balancing, auric field work, Triple Warmer tonification

"Use whatever is already in your toolbox and add it wherever it fits within the modes."

Step 3 — Determine Priority

"You don't have to check priority — you could do them both. But priority is good to know."

Hold the priority mode and test each active mode to determine which correction the body is asking for first. Clear the priority correction, then reassess remaining modes.

Step 4 — Check Lifestyle Factors

Before completing the correction, always assess the following lifestyle considerations (especially in Stage 3):

- Getting enough sleep (going to bed by 10:00 pm is a common recommendation)
- Time for recreation and fun

- Social contact and connection
- Prayer and meditation
- Pursuing one's passion

"It's not just about supplements or rubbing points — it's about getting enough sleep. That's the biggest thing for the adrenals. If you don't get enough sleep, your adrenals are depleted."

Step 5 — Key Nutritional Supports

- **Vitamin C** — the adrenal glands need Vitamin C more than any other organ; this is often the primary nutritional finding
- **Vitamin E**
- **Glandular support** (GSC by Progressive Labs)
- **Hydrochloric acid (HCL)** — supports protein breakdown and reduces stress on the ileocecal valve
- **Essential fatty acids** — flaxseed oil, Udo's Choice, or similar sources
- **Multi-minerals**
- **Water and active detoxification**

"The adrenals need Vitamin C more than any other organ. It is often the clincher."

Step 6 — Structural Support

Even if the structural mode does not appear as a priority, it is always appropriate to rub the adrenal neurolymphatics as a supplementary support.

- **Anterior neurolymphatics:** 2 inches up, 1 inch out from the navel
- **Posterior neurolymphatics:** between T10 and T12 on the back

"If someone has adrenal exhaustion, they'll be really tender back in that part of the back. If you're going down the neurolymphatics and find it's really tender there — that's common."

Step 7 — Emotional Clearing

Have the client focus on the primary emotional stressor while the practitioner holds the emotional stress release (ESR) points. Encourage slow, deep breathing and a gentle awareness of the stressor from a relaxed state.

Useful additions during emotional clearing:

- Sounding the relevant musical note (F or F sharp is common for the heart chakra)
- Visualizing the corresponding color (green for the Wood element/heart chakra)
- Repeating an affirmation such as "*I love...*"

Step 8 — Retest and Confirm Clearance

After completing the corrections, retest the adrenal neurolymphatic response. The previously weak indicator muscle should now remain strong even when the client touches the neurolymphatic points.

Section 8: Common Causes of Adrenal Stress

Stress can enter the system from any direction. Practitioners should be alert to all of the following:

- **Psychological and emotional stress** — fear of failure, relationship conflict, financial pressure
- **Physical overtraining** — a common pattern in athletes; overtraining stresses the adrenals and can lead to ligament laxity and unexpected injury
- **Thermal stress** — extreme heat or cold; rapid temperature changes between environments
- **Dietary stressors** — excess sugar, alcohol, processed foods
- **Endotoxins** — Candida, parasites, heavy metals, SIBO
- **Sleep deprivation** — the single most significant depleting factor for the adrenal glands

"You get stress from every angle. We're trying to weed it all out."

The Athlete and Ligament Laxity

"When you tweak a joint, and it goes weak, that's ligament laxity — the ligaments, when you're in adrenal stress, don't hold. Sometimes, athletes will just be going down the court, nobody hits them, and they fall apart because of the adrenal stress. Not only physical overtraining, but sometimes emotional, where their sponsors are paying millions of dollars, and they're not performing. Those are things that are physical, emotional, and even thermal stress."

Section 9: Energy Corrections Related to Adrenal Stress

When the energy mode is active, the following corrections may be indicated:

- **Triple Warmer tracing** — the tonification point is Triple Warmer 3
- **Meridian tracing** — identify which meridian is out of balance (e.g., Spleen meridian on the right was a priority for a patient with arthritic hands)
- **Tibetan figure eights**
- **Chakra balancing** — identify the specific chakra using a switched-off indicator muscle; test which chakra restores the muscle
 - The **heart chakra** corresponds to the Wood element, the color green, and the emotion of anger
 - The musical note of F or F sharp supports the heart chakra
- **Auric field work** — test using the hand or finger molds to determine if auric fields are in priority

Section 10: Practical Workshop — Partner Practice Guidelines

When practicing with a partner, use the following sequence:

1. **Identify the adrenal stage:** Ask "Am I in Stage 1, Stage 2, or Stage 3?" and test accordingly using the neurolymphatics or muscle indicators described above.
2. **Place the pattern in the circuit.**
3. **Check all modes** — structural, nutritional, emotional, and energy.
4. **Check priority** if multiple modes are active.
5. **Assess lifestyle factors** during the structural correction phase.
6. **Complete the corrections** in priority order.
7. **Retest** to confirm the balance is holding.

"If nothing else, you can just confirm: 'I'm in Adrenal Stage 1, I'm in Adrenal Stage 2, or I'm in Adrenal Stage 3.' Then just go through the protocol with them."

Section 11: Student Practice Wins — Learning Examples

The Ileocecal Valve and the Bloated Abdomen

A practitioner working with a 5-year-old child who frequently complained of abdominal pain followed their clinical intuition and checked the ileocecal valve, even though the mother had not specifically mentioned it as a concern. An open valve was found and corrected. The mother — who had not mentioned bloating — then noticed that the child's abdomen had visibly softened and normalized.

"Intuitively, sometimes — oftentimes now that I've been in practice for so long — I just do it, and it works out."

Key learning: The body will communicate what needs to be addressed. As practitioners develop mastery, they begin to sense the priority before the muscle test confirms it. Teaching the family how to administer the correction empowers them to manage acute episodes at home.

Auric Fields and Arthritic Hands

A 90-year-old client with arthritis presented with painful, swollen hands that limited his ability to use utensils. Rather than using a physical therapy approach of joint mobilisation and stretching, the practitioner identified the auric fields as the priority using the finger molds. After 10–12 minutes of working on the auric fields and adding a Spleen meridian trace on the right side, the client reported feeling energy moving into his index finger, followed by a reduction in pain and improved mobility.

"If I had used my physical therapy mind, I would have just started treating his joints on the fingers. But using the auric fields was just amazing. Priority is key."

Key learning: The tools a practitioner already uses in their primary discipline are valuable — but the body may be pointing to a completely different correction. Kinesiology expands the toolbox and ensures the right tool is used at the right time.

Quick Reference: Adrenal Stage Identification Summary

	Stage 1 — Alarm	Stage 2 — Adaptive	Stage 3 — Exhaustion
Cortisol	High	Low / borderline	Very low
DHEA	Normal / low-normal	Borderline / low	Low
Muscles in the clear	Weak (Sartorius / Gracilis)	Strong	Weak or reversed
Neurolymphatic challenge	Already weak	Goes weak	Reversed responses
Sugar response	Normal (weakens)	Normal (weakens)	Reversed (strengthens)
GSC response	—	—	Reveals weakness (truth)
Common complaint	Panic, racing heart	Tired but	Burnout, exhaustion

Key Supplement Reference

Supplement	Indication
Vitamin C	Primary adrenal support
Vitamin E	Adrenal support
GSC (Progressive Labs)	Stage 2 and Stage 3 adrenal
HCL (Hydrochloric Acid)	Protein digestion; ileocecal valve support
L-Glutamine	Leaky gut repair (SI-19 indicator point)
Zinc	Candida; general deficiency (backstroke test)
Caprylic acid	Candida
Sporex	Candida
Chlorophyll (spirulina, sprouts, greens)	Ileocecal valve primary support
Essential fatty acids (flaxseed, MCT)	Adrenal and general nutritional support
Multi-minerals	Adrenal and general support (Triple Warmer 4 Riddler point)