

Therapeutic Considerations With Hypertension

Dr. Vasquez book on Hypertension

http://optimalhealthresearch.com/textbooks/monograph_hypertension_chiropractic.html

Five-Part Foundational Protocol:

- 1) Lifestyle: Supplemented Paleo-Lithic Diet, exercise, weight optimization, healthy relationships, social involvement, “achievement of meaning in life by the pursuit and realization of values” See Lorain Cordain’s Paleo-Lithic Diet for a sample.
- 2) Multivitamin/multimineral:
 - a. **ProMulti-Plus**® 2 tid
- 3) Balanced fatty acid supplementation: <http://optimalhealthresearch.com/part2>
 - a. **Optimal EFAs**® 2 tid
- 4) Physiologic dosing of vitamin D3 at 3,000-10,000 IU per day:
<http://optimalhealthresearch.com/cholecalciferol>
 - a. **Bio-D Mulsion Forte**® 1 drop is 2,000 units of emulsified Vitamin D, thus 2-5 drops per day, measure 25 hydroxy vitamin D levels to determine optimal values 50-75 ng/mL)
- 5) Probiotics:
 - a. **BioDoph-7 Plus**® 3 at bed for 30 days then 1 per day

Diabetes, metabolic syndrome and or Insulin resistance is a common component in hypertension*

Diets high in sugar and refined carbohydrates cause insulin to rise. Excess insulin promotes renal retention of sodium which leads to water retention. Water retention causes volume overload and ultimately systemic hypertension:

- 1) 5-part protocol as above: emphasize low-carb, exercise, weight optimization, and vitamin D3
- 2) Consider adding the following:
 - a. CoQ10: antihypertension*, renoprotection, antioxidant
 - i. **Co-Q Zyme 30**™ each 30mg tablet has approximately 3X absorption use 2 tid for 60 days then 1 tid as maintenance
 - b. Chromium: up to 1,000 mcg daily
 - i. **Cr-Zyme**™ 200 mcg of organically bound Chromium use 5 tablets per day
 - c. Antimicrobials to address bacterial overgrowth (if appropriate):
 - i. **ADP**® emulsified oregano 5 tablets tid for 2 weeks then 3 tablets tid for 2 weeks always replace healthy bacteria after 2 weeks of treatment see above
 - d. For peripheral neuropathy (if appropriate): GLA and lipoic acid
 - i. **Blackcurrent Seed Oil (GLA)** 2 tid
 - ii. **Lipoic Acid** 100 mg capsules 2 tid for 60 days then 1 tid

Blood Pressure is a sign of an underlying issue and as such may require additional testing.

Additional Factors to Consider:

- 1) Screen for heavy metals: Dr's Data 800-323-2784 can test hair, blood or urine. 24 hour challenged urine collection will give you best results.
- 2) Look for food allergies and or sensitivities: Finger prick test is used by US Bio-Tek 96 foods testing both IGA and IGG for \$201.00
- 3) Assume and then test for a magnesium deficiency: Supplement magnesium to bowel tolerance. **Aqua Mag-CL™** 2 teaspoons at bedtime and increase one teaspoon every 3 days to bowel tolerance. Due to salty taste tangerine or pear juice is suggested. After initial blood pressure is taken have patient take 1 teaspoon of Aqua Mag-CL and allow 10-15 minutes to allow physiologic response. Systolic Blood pressure will often drop 10-20 points demonstrating to the patient the effects of magnesium on blood pressure.
- 4) Rule out adrenal cortical hyperfunction: When excess cortisol is present use **ADHS®** 3-4 tablets bid breakfast and lunch and **Bio-CMP™** 2 tablets three times a day
- 5) Evaluate electrolytes: If sodium and or chloride are **NOT** above the mean blood level consider doing a trial with Celtic sea salt and evaluate results. Avoid processed foods that are high in commercial salt.
- 6) Weight loss is critical: If kidney problems are not an issue and patient is overweight, limit carbohydrates to 50-60 grams per day until proper weight is established.
- 7) Consider supplementing with Nitric Oxide precursors: **Argizyme™** 2 tid and **NitroGreens™** 1-2 scoops per day.
- 8) Avoid excess fructose for caloric reduction and uric acid normalization.
- 9) Assess pH for metabolic acidosis: In general, a "relative acid" chemistry will result in a sympathetic driven nervous system. Russell Jaffe MD, PhD has long championed the use of monitoring first morning urine pH as an indicator and predictor of systemic acidosis. Increasing ascorbate forms of vitamin C, magnesium and alkalizing fruits and vegetables will help the body return to a more parasympathetic state. The goal is to have a first morning pH of 6.5-7.5 which reflects adequate buffering capacity.
- 10) Portal congestion is another issue with high blood pressure. If the portal system is congested, then the blood that should be there must go peripheral; and when this happens, blood pressure must increase. **Beta-TCP™** and **MCS-2®** should be considered with portal congestion and this is an area that is missed very frequently by many allopathic physicians.
- 11) When all else fails consider the use of neonatal thymus (**Cytozyme-THY™**). Use this therapy as your last resort; but if all else fails, try the Cytozyme-THY at 4-6 tablets twice a day. In stubborn cases this may be your silver bullet.
- 12) Rule out drugs as a cause of hypertension. For example estrogens generally tend to promote sodium and water retention, which promotes volume overload and the development of HTN. Many drugs will cause sympathetic dominance, hypertension will be the result.
- 13) Practice disciplines that will enhance parasympathetic expression: prayer, tai chi, relaxation response, laughing, walking, smiling, humming, etc.