

# What Clients Say About Our Clinical Nutrition – Part 2 of 2!

Part 2 of “What Our Clients Say About Clinical Nutrition!” is to continue sharing a brief A-Z overview of the scope of my Clinical Nutrition Testing and Therapeutic Services. By sharing what our clients say, you can see that, for all ages from head to feet, Clinical Nutrition provides safe and effective therapy for your health concerns, even those that may seem hopeless or that you have suffered with for decades.

### ABOUT THE A-Z OVER-VIEWS IN PART 1 AND 2:

- 1) Whatever letter the A-Z overview ends with in Part 2 of this article, I will start with the same or next consecutive letter to continue providing A-Z accounts of “What Our Clients Say!” as they appear in future articles.
- 2) With over 40 years of providing successful Clinical Nutrition Testing and Therapy (since 1981), each of these clients in the A-Z overview represents from hundreds to thousands of clients



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“Take Time for Your Health or Make Time for Your Disease!”

with similar reports.

3) The clients’ physicians diagnosed the conditions listed in the A-Z overview and the clients improvement came from clinical nutrition testing that identified the therapeutic nutrients their body required to heal itself, which were then dispensed to each client. This is why Clinical Nutrition does not (nor does it need to) treat medical conditions, disorders or diseases.

4) Regarding some of the overviews in Part 1 and 2...I have taken the liberty of paraphrasing or summarizing what my clients actually shared with me, verbally and/or in writing, in order to keep their reports and/or my case histories brief.

**BLOOD PRESSURE (HIGH), BONE DENSITY (POOR) AND HYPO-THYROID:** **Beatrice** (82y) attained her health goals of normal blood pressure, healthy thyroid function and even passed her Bone Density Test, which she was not sure she could do at 82.

**BONE SPURS:** Three months after starting their Clinical Nutrition Therapy, bone spurs dissolved on Terry’s neck (71y), Esther’s left heel (43y), and June’s right heel (48y).

**BREASTS (CYSTS / TUMORS):** **Carol** (57y), after having one breast removed due to cancer, she was determined to save the other one; and she did, through our Clinical Nutrition Testing & Therapeutic Services. Her comment to me was, “*I wish I had found you first.*”

**CALCIFICATION (BREAST):** Registered Nurse Sally (58y) was medically-diagnosed with breast calcification. Three months after starting her Clinical Nutrition Therapy, no calcified breast tissue was present.

**CARPAL TUNNEL SYNDROME:** **Bill** (69y) was quite satisfied with the improvement he experienced in his wrists, within just a few weeks after starting Clinical Nutrition Therapy.

**CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD):** **Roy** (54y) had COPD with frequent bouts of Bronchitis and Pneumonia. Not only did Roy’s lung function improve after decades of smoking, he was not hospitalized even once throughout his Clinical Nutrition Therapy, though he had been hospitalized 17 times in the two (2) years prior to contacting me, when using medicine alone.

Roy is a perfect example of what I shared in my article, “*Drug Side Effects – Cause and Prevention Part 2 of 2*” (Villager, 12/23/21, P11), when I wrote... “whatever the reason for taking drugs, whether short-or long-term, your best health results will occur when you combine Clinical Nutrition Therapy with your Drug Therapy, rather than using drugs alone.” This applies to both prescribed and over-the-counter drugs.

**Hubert** (62y) also had COPD

with frequent bouts of Bronchitis and Pneumonia. He said he had ‘tried many different therapies before, but nothing helped him improve his lung function, until he contacted me for our Clinical Nutrition Testing and Therapeutic Services.’

For a copy of the above-referenced article, “*Drug Side Effects – Cause and Prevention, Parts 1 and 2*” you may refer to their past issues or Email: Villager@AdvancedClinicalNutrition.com.

Subject Line: *Drug Side Effects 1 & 2.*

**Please call me – I am here to help you, no matter what your current health concerns. My services are tailored to your individual and personal needs. First consultation is FREE!**

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(THE WALL STREET JOURNAL)

## Collaboration at the Capital

Continued from page 2

which would require voter approval due to TABOR. She also noted that, “We are in debt to the federal government \$1 billion.” Ransom referred to the pending increase in unemployment insurance premiums due to the deficit in that fund, but she said that, “Gov. Polis says he’s going to suspend” that increase. Rep. Van Winkle said he agreed with Ransom.

Ransom all pointed to the bipartisan policy of the Joint Budget Committee, where she is a member, to require all state departments to justify every component of their budget every year as an example of the care the legislature takes in spending taxpayer dollars.

Mayor Millet next brought up the issue of increased crime in our state.

Rep. Baisley’s explained his view of how crime should be addressed, saying, “If law enforcement pulls over my mother-in-law they should treat her with respect, but if they pull over the person who stole her car, I want them to lay down the law.”

Rep. Van Winkle said, “There are organized crime rings that recruit the homeless to steal for them in exchange for drugs. Lawmakers are working on that problem.”

Sen. Bridges said that the first bill he plans to introduce in the 2022 legislative session is a \$5 million program for behavioral health services to assist in the recruitment and retention of law enforcement officers.

Another question came from Denver South president and CEO Tom Brook, who told the legislators that companies seeking to relocate to Colorado have pointed to the lack of available housing for employees. He wanted to

Denver South CEO Tom Brook caught up with Charlie Kercheval, president of Alpine Bank DTC. Kercheval was on his way to a National Western Stock Show event.

know how the legislature plans to address that problem.

Sen. Bridges said, “We spent the summer looking at how to use \$400 million in federal funds to address the housing problem.” He said that \$150 million was planned to be used for grants for workforce housing for people like nurses, teachers and firefighters, but, Bridges added, “There will be strings attached” to the money. Those “strings” could be making changes to municipal zoning codes to allow for workforce housing to be built.

Mayor Millet joined the discussion. She cited a recently completed workforce housing project in her city that she felt was very important, saying, “People need to be careful when they talk about workforce housing. Educate yourself. This will add to everyone’s quality of life.”

Attending this important event live and representing their jurisdictions were a significant number of city council members, all of whom happened to be female—from Lone Tree, Wynne Shaw;

Listening to the panelists was Darryl Jones, Senior Vice President of Coventry Development, the company behind the RidgeGate master-planned mixed-use community in Lone Tree. Jones is a former Greenwood Village City Councilmember.

Photo by Freda Miklin

Paying close attention to the legislative update report were Centennial City Councilmembers Christine Sweetland and Robyn Carnes.

Photo by Freda Miklin

from Centennial, Candace Moon, Christine Sweetland, Robyn Carnes and Mayor Stephanie Piko; from Greenwood Village, Donna Johnston. Also in attendance and listening carefully was 18th Judicial District DA John Kellner.

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