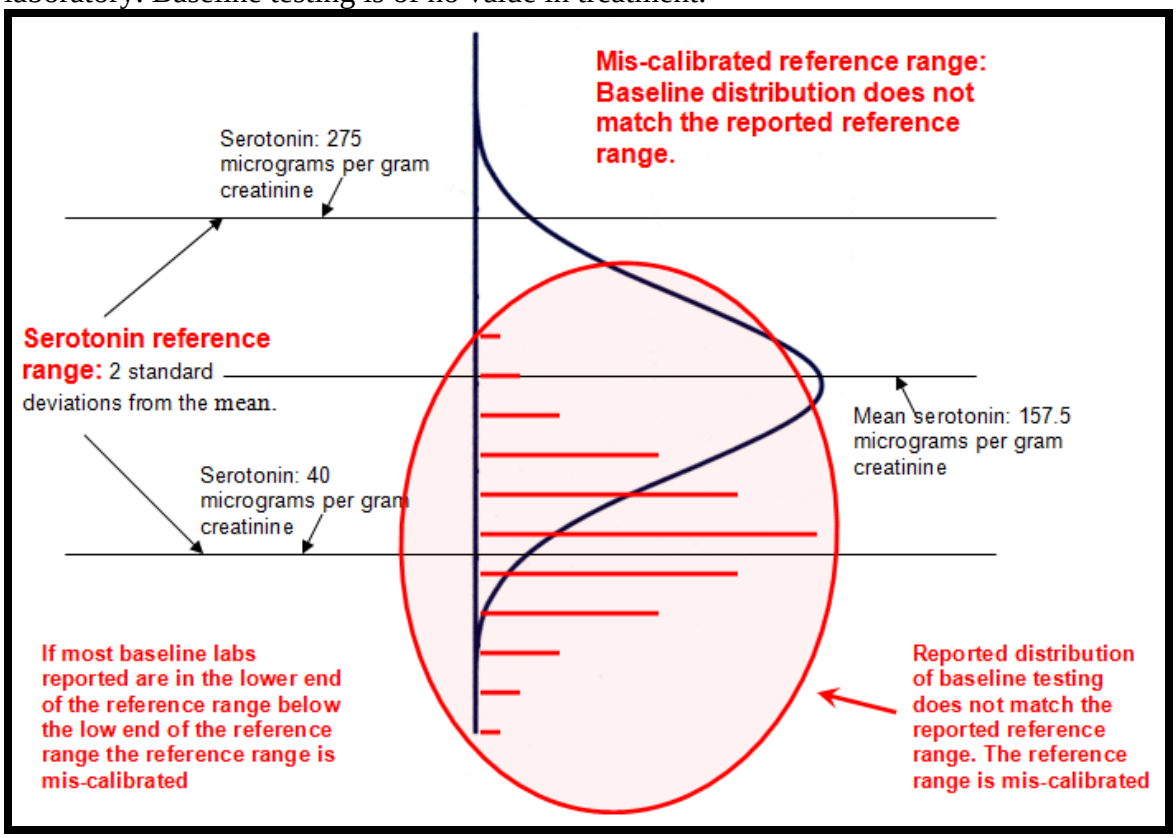
E-mail stream

The following is a graphic posted to

http://neuroassist.com/neurotransmitter-testing/neurotransmitter-testing-reference-ranges.htm

The graphic illustrates “baseline testing distribution” relative to the reported “reference range”. The reference range reported by the lab is calibrated by testing a significant population off the street. By definition the reference range is the reported distribution within two standard deviations of the mean. Once the reference range is established subsequent baseline testing results (patients not under treatment) should reveal the same distribution as the reference range. If most of the baseline testing reported is in the lower end of the reference range or below the lower end of the reference range the reported reference range is flawed (mis-calibrated). Baseline urinary neurotransmitter testing has no correlation with disease states, we are not able to diagnosis patients has having a neurotransmitter disease using this type of testing.

One of the leading serotonin and dopamine researchers of our time is Dr. Soares-Da-Silva, MD PhD. Soares-Da-Silva notes that urinary serotonin and dopamine exist in two distinct states, “the endogenous state” (where no amino acid precursors are being given) and the “competitive inhibition state” (where significant levels of amino acid precursors are being administered). The response of urinary serotonin and dopamine in these two states has no correlation with each other. Therefore the simplistic expectation that identifying low levels of serotonin and dopamine in the urine, prior to treat, that will increase with administration of precursors does not exist in the properly calibrated laboratory. Baseline testing is of no value in treatment.



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