

By Dr. Derek Conte

I have had Charles as a patient for almost 15 years. He works as a fireman and paramedic. He is a big, strong guy, works very hard and gives a great deal to others in his jobs (he has several) and in his personal life.

When I met him he had high blood pressure and high blood sugar. He also had great pain and massive restrictions in his upper and mid-thoracic spine --- the very areas where the body transfers signals of control to and from the brain, heart, stomach, liver, gall bladder and pancreas. The pancreas releases insulin so that sugar can be allowed to enter the cells, which then provide the body the energy it needs to function. He weighed 150 lbs on the right leg and 75 lbs on the left. We went through a thorough history and adjusted him, specifically, to the C-1, T-1, T-4, T-5, and the sacrum. After the first adjustment he weighed 125 lbs in each leg. After a few visits he began to see a normalization of his blood sugar levels and his blood pressure. He no longer had to take medication for these problems.

Recently, Charles came in and said he had a “diabetic stomach” (based on his medical doctor’s opinion and his own research) and that his blood sugar had spiked recently. We examined him and made the appropriate adjustments to specific areas of the spine. I will monitor him and see him soon for his next visit. In light of this, I thought a brief discussion of “diabetic stomach” might be useful to readers.

Diabetic Stomach is also known as Diabetic Stasis and Gastroparesis, among other terms. Diabetes causes destruction to the very small vessels and thus can damage a very important structure called the Vagus nerve (and all nerves for that matter). The Vagus nerve arises from the medullary part of brain stem, travels downward and controls the peristaltic (muscular) movements of the entire digestive tract, as well as controlling the heart rate and respiration.

In Diabetic Stomach, the Vagus nerve is compromised and slows the movement of food in the stomach, which becomes rancid with bacteria, promoting bloating, decreased appetite and weight loss. The delay in the delivery of food to the small intestines prevents absorption of nutrients and can lower blood sugar levels dangerously. Conversely, when the food does go through, it can spike the sugar levels. This is an unstable situation and is a particular threat to the diabetic. Additionally, the old food may actually harden and block the pyloric sphincter, where the stomach empties into the small intestines. It is not surprising that other symptoms are nausea and vomiting. Diabetic Stomach tends to be seen in individuals who have been long-term diabetics.

Diabetes is a disorder that can be successfully managed with self-discipline and vigilance, so don’t despair!

Below is a brief 2-minute film of how diabetes can cause damage to the vessels and the nerves, causing neuropathy, and how to live with it and minimize its effects: <http://diabetes.emedtv.com/diabetes-video/how-does-diabetes-affect-nerves-video.html>

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