

## CARPAL TUNNEL SYNDROME

**1. Pre-Disposing Factors and Clinical Indicators:** Common serum changes include decreased vitamin B-6 (uric acid decreased with MCV and/or MCH normal or SGOT/AST below 10), decreased magnesium and in some cases decreased zinc. **In most cases supplemental support and manipulative treatment should be utilized for not less than 60 days before referral for invasive treatment.**

- a. Occupational stress.
- b. Wrist, elbow, shoulder or spinal dysfunction.
- c. Zinc, magnesium or vitamin B-6 deficiency.
- d. Tissue inflammation.
- e. Open ICV.

**2. Primary Supplemental Support in order of need:**

- a. **B6 Phosphate** - 4 tid..
- b. **Acti-Mag Plus** – At bedtime to bowel tolerance.
- c. **Zn Zyme Forte** - 1 tid. If **Zn-Zyme Forte** is required for more than 30 days add 1 **CU-Zyme** daily to prevent a zinc/copper imbalance. Note: Copper and zinc should be ingested at different times as they compete for absorption and insure the **Cu-Zyme** is taken with food.

**3. Other Considerations:**

- a. **Osteo-B II** - 2 tid.
- b. **HCL-Plus** - 2-3 tid in the middle of each meal.
- c. If an open ICV is present (determination made via AK testing), the correct manipulative treatment must be applied and the following supplements should be considered: **Hydro-Zyme** – 2-3 tid in the middle of the meal and **Gastrazyme** – 2-3 with each meal, increase until the stool has a green tint and then begin to reduce.