

Causes of mineral imbalances

■ **Improper eating habits:** Fad diets and diets high in refined carbohydrates, sugar, salt, alcohol and saturated fats can lead to mineral deficiencies and excesses. Even the mineral content of a healthy diet can be deficient if foods are grown on nutrient-poor agricultural lands.

■ **Stress:** Both physical and emotional stress can lead to mineral imbalances. B-complex vitamins, zinc and magnesium are lost in greater quantities when you are stressed; you also absorb less nutrients from your food. Sports people often have a higher requirement of certain nutrients.

■ **Medications:** Many deplete the body's store of nutrient minerals and can increase levels of toxic minerals. Medications such as diuretics, the oral contraceptive pill, antacids and aspirin can all cause vitamin and mineral deficiencies.

■ **Pollution:** Toxic minerals such as lead, mercury and cadmium can interfere with mineral absorption and increase mineral excretion. They build up in our bodies from sources such as: air pollution, car exhaust, cigarette smoke, unfiltered water, dental amalgams, copper and aluminium cookware, hair dyes and antiperspirants. Toxins have also entered the food chain, contaminating some of our foods. It is almost impossible these days to avoid some exposure to toxic minerals.

■ **Genetic and individual factors:** A predisposition towards certain mineral imbalances, deficiencies and excesses can be inherited from parents. Certain individuals can also inherit a higher requirement than normal for particular nutrients to maintain good health.

■ **Nutritional supplements:** Supplements can also lead to mineral excesses and deficiencies.

For example, excess calcium intake can cause phosphorus and magnesium deficiency. Continued magnesium deficiency increases sodium levels and eventually causes vitamin A deficiency.

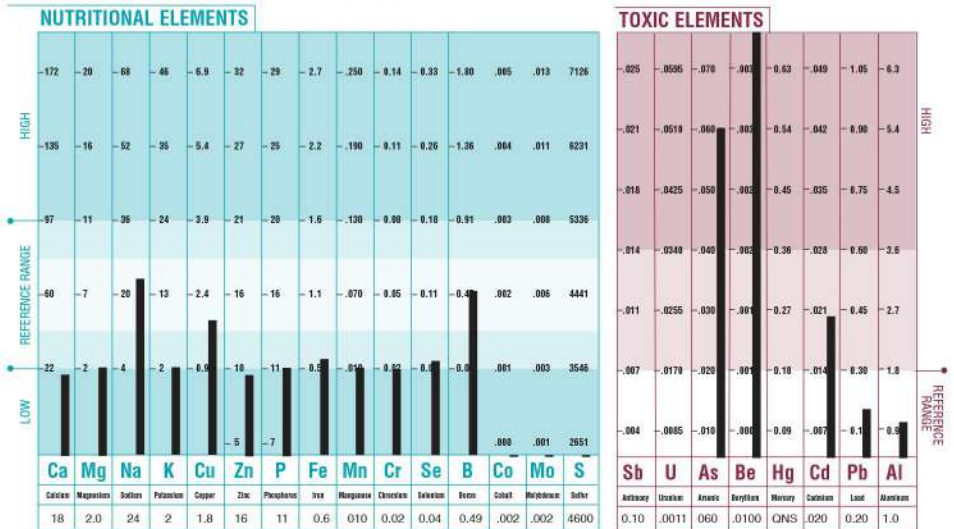
User-friendly and Reliable

- 1 Results only
- 2 Interpretative
- 3 Comparative

Our advanced interpretative reports are the best of their kind. They consist of two parts: an educational report for the patient and a more technical report for the practitioner. All reports are easy to read, comprehensive and incorporate the latest developments in nutritional therapeutics.

Our detailed reports contain a wealth of clinical data which, interpreted correctly, can provide an indication of nutrient imbalances and mineral toxicity.

Sample of nutrient and toxic mineral chart



Our reports are designed to shed light on the patient's current health status, identify potential areas of concern and direct dietary and supplemental measures to improve patient health.

REPORT FORMATS

PROFILE 1: RESULTS ONLY REPORT

This quantitative report contains only the mineral analysis results. With a graphic illustration of patient test results for at least 35 essential and toxic minerals, including reference ranges. It highlights significant mineral ratios and metabolic patterns.

PROFILE 2: INTERPRETATIVE REPORT

Our most popular and comprehensive report utilises our laboratory's expertise and extensive experience in interpreting trace mineral patterns. The report contains Profile 1 data, as well as a detailed medical discussion of the chemical results and personalised nutritional recommendations.

PROFILE 3: COMPARATIVE REPORT

This comparative report is available as a follow-up to Profile 2, comparing current and previous test results, and providing a comprehensive discussion with revised personalised nutritional recommendations.

HAIR SAMPLES

The laboratory requires 0.25gm or one tablespoon of head hair for testing.

Taking a hair sample is quick and easy. Cut hair close to the scalp. Use the first 4cm of hair, as this reflects the body's most recent metabolic activity. The hair needs to be clean, well-rinsed, untreated and uncoloured. If hair is treated or coloured, wait six to ten weeks and take a sample from the freshly grown untreated hair.

Head hair is best for testing. If head hair is not available, beard or pubic hair can be used. If there is no hair, clean fingernail clippings can be tested. These alternative tissue samples

can be used to monitor toxic mineral levels, but will not always provide nutrient mineral data that is as reliable as head hair. Do not mix different types of tissue samples, eg. head hair with pubic hair.

Benefits of an InterClinical Hair Tissue Mineral Analysis

Reliable clinical data on over 35 nutrient and toxic minerals, and over 26 significant mineral ratios.

- Fully licensed and accredited laboratory facilities.
- Safe, specialised, scientific, non-invasive pathology test.
- Valuable health information often not revealed in standard blood and urine tests.
- Excellent means of identifying potential nutrient mineral deficiencies and excesses.
- Useful indicator of toxic mineral exposure.
- Personalised interpretive test report that assesses your current mineral status, highlights areas of concern and recommends dietary changes and supplements for improved health.

Results are normally available within 10-15 days from the date we receive your sample.

