



10/14/2016

To all of our valued customers:

There is no question over the last few years that all of us have been extremely challenged to find quality, cost-effective, and practical answers for those chronically ill patients who are sometimes desperately seeking ways to improve quality of life despite their often complicated clinical presentations. For, ever increasingly, the old approaches that involve simple dietary changes and disease oriented supplemental protocols are not working as well, and sometimes not working at all.

As far as I'm concerned, the best "big picture" answer to this dilemma that has come our way over the last 10-20 years has been functional medicine. However, about ten years ago, while I continued to be a strong advocate of functional medicine from a general conceptual standpoint, I began to have significant concerns about how it was being implemented "in the trenches" so to speak. These concerns fell into three primary categories:

1. The use of functional medicine laboratory tests, which previously were considered to be adjuncts to a quality clinical exam and history, were now taking on increased prominence, increasing the costs of diagnosis dramatically for many patients.
2. The amount of supplements being recommended to many chronically ill patients were also increasing dramatically, also creating a financial hardship for all but the wealthiest patients.
3. Because of increased reliance on food allergy testing whose technologies often yielded a certain amount of false positives and negatives, more and more patients were being placed on highly restrictive diets that, for many, were impossible to follow for more than a few months at the most.

Because of the above, I was increasingly of the opinion that, even though the above approach was effective in improving quality of life in many chronically ill patients, the complexity and cost was making functional medicine "medicine of the wealthy and successful" who had the time and money that was inevitably required.

My concerns about the complexity and cost of functional medicine led me to an exploration for the fundamental underlying reasons for this cost and complexity. After several months the reasons become clear to me. Functional medicine had become highly fragmented and segmented into the functional medicine equivalent of medical specialties where, in this scenario, the specialties were detoxification, immune/inflammation, GI dysfunction, endocrine, neurophysiology, etc. In turn, each of these functional medicine "specialties" had their own diagnostic and treatment modalities. For me, while this approach made sense from an academic standpoint, from a practical standpoint, given that most chronically ill patients demonstrate dysfunction in several of these areas and, very often, most of them, the segmented approach was leading to what I just mentioned – use of several costly functional medicine lab tests and expansive, sometimes very expensive and hard to implement supplemental programs.

Fortunately, my exploration for the underlying problems with “conventional” functional medicine also led me to a surprisingly simple solution that, for me, would transform the practice of functional medicine into an entity that is just as effective for improvement of quality of life in chronically ill patients but is simpler, more cost-effective and practical for both the patient and practitioners. This solution was a systems-based approach that comes under the general heading of “allostatic load.” For me, this allostatic load approach to health care was revolutionary because it demonstrated very simply but in a very detailed manner that “specialties” of functional medicine were not isolated entities that required separate diagnostic tests and supplemental programs but different facets of a unified whole. For example, when allostatic load principles are understood, there is no need to run sometimes expensive gut permeability tests. Why? If we know that the patient is insulin resistant, inflamed, and has loss of muscle mass, all of which are relatively easy and inexpensive to diagnose, nine times out of ten increased gut permeability is inevitable. Furthermore, from a treatment standpoint, allostatic load principles tell us that, more often than not, implementation of supplemental and lifestyle changes that improve insulin sensitivity, reduce inflammation, and improve muscle mass will also improve gut integrity even though no direct gut-oriented therapies were employed.

Hopefully, having read this far into this letter, you are wondering where you can learn this systems-based, allostatic load approach that will enable you to practice functional medicine in such a cost-effective, practical manner that you can make functional medicine available to a wide variety of patients with different levels of ability to comply from both a financial and practicality standpoint. For me, there is only one functional medicine educational program that prepares students for routine daily practice in this manner, **The Hedberg Institute**, which was developed and is taught by one of the greatest functional medicine practitioners and educators, Dr. Nikolas Hedberg.

To learn more about **The Hedberg Institute** and how to get involved, please go to <https://hedberginstitute.com/about-us/>.

Sincerely,

A handwritten signature in black ink that reads "Jeffrey Moss". The signature is fluid and cursive, with the first name "Jeffrey" written in a larger, more prominent script than the last name "Moss".

Jeffrey Moss, DDS, CNS, DABCN

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