

TOUCH FOR HEALTH

SUCCESS STORIES

Submitted by TFH Instructors in Australia.

Type of injury - soreness in shoulder area, possible result of weight resistance training. The injury has been with me until April 1982 (approximate time of injury 1970). I have lived with a shoulder problem for almost 12 years, compensating for the injury in all activities that I do. I had 10 minutes TFH (reactive muscles) and the injury had disappeared after only one balance using reactive muscle testing.

I would like to tell you how TFH has helped my asthma to improve greatly in just one week. During the Instructor Training Workshop held in Perth in April 1982, my diaphragm showed consistently weak and I could hold my breath for only 18 seconds. By the end of the week I could hold my breath for 55 seconds and I did not need to use my Ventolin Inhaler. My health remains improved as I am still working on my problem. "Wow" - another win for TFH.

A patient had a liver biopsy done under local anesthetic without any prior analgesic or tranquilizers. She felt the whole procedure, which was not successful - muscle tissue was obtained, not liver. She came back to the ward almost hysterical, in pain and hyperventilating. While other staff members took her pulse and blood pressure readings, etc. I held her frontal eminences. She was then given Panadeine tablets for pain and everyone then left her alone except for me, holding her frontal eminences. Within minutes her breathing rate slowed, lengthened, and she became quite calm even though she was still in pain. She definitely equated the calming down effect with the holding of the frontal eminences and not with the Panadeine, as (at that point) she had not had any relief of pain.

I found that a patient who could not approximate her thumb and little finger (from a stroke) and therefore could not hold things, was strengthened by working the appropriate points.

A patient who was diagnosed as having tendosynovitis of the shoulder, had a weak supraspinatus, for which he was having physiotherapy treatment using ultrasound, without much noticeable effect. As he was about to be discharged I tested his supraspinatus, strengthened it, and he felt better immediately. When he came back to the clinic and called in to the ward, he stated that the physiotherapist hadn't helped much, but what I did (or rather TFH did) had helped immediately and he was still pain free!

Another patient had had an abdominal operation and a couple of days later was mobile but bent over became of weak abdominals. I grabbed a surrogate, tested the abdominals, strengthened them and the patient immediately stood up straight comfortably.

A 70 year old woman with recurrent pains in her right shoulder and neck had them completely relieved by holding the frontal eminences for 15 minutes. That was followed by a basic balance, and she bounded up with a rosy glow afterwards, no pains in the areas and a reminder of how powerful the ESR work can be.

A middle-aged lady found difficulty in walking up stairs to her flat. Some reactive muscle work in the thigh area enabled her to take the steps in her stride.

A woman who had broken both her ankles, regained more strength in the muscles of the foot that previously had been unable to test strong.

A 26 year old school teacher was found to be suffering from a thyroid disturbance and amenorrhea (cessation of menstruation). After successive TFH balancing, the following reactive muscle patterns were found: Gluteus medius was reactive to teres minor. Also - an interesting one - the whole of the digestive tract-related muscles were switching off gluteus medius. So gluteus medius was reactive to pectoralis major clavicular, the abdominals, quadriceps and fascia lata. The symptoms became clear one this aberrated energy pattern was discovered (tiredness after exercise, loss of sex urge). The thyroid is now healing and sexual function is balanced.

Female in late 30's, unable to do any situps, and loss of sex urge since having children 3 years ago: Abdominals were weak as if muscles were still in shock from labor trauma. They strengthened with standard balancing techniques but became weak whenever she thought of childbirth. ESR on childbirth and labor immediately recrified the weakness, permanently it seems, as situps no longer a problem. Circulation-sex related muscles were all reactive to abdominals, and the sex drive problem corrected dramatically (almost dangerously) after balancing.

Most ^{ck} hypoglycaemia - I call it "mock" because five people who were diagnosed as hypoglycaemic with GTT's, all classic examples of aberrated blood sugar levels, were found to have no success at all with standard treatment for hypoglycaemia, i.e. vitamins, injections, high protein diet, low protein diet, etc. TFH showed that several things were occurring. Consider the following reactivity patterns. Supraspinatus (central) reactive to pectoralis major clavicular (stomach), abdominals and quadriceps (small intestine) and fascia lata (large intestine). So whenever any food, no matter what type, entered the systems related to stomach, the small and/or large intestine, central were effected. When central became weak, the rest of the system became weak. The person then craved for glucose as an instinctive energy requirement for brain function and general survival needs. The person eats and the cycle begins again with its corresponding weakness. The use of those muscles also in exercise created the same weakness and internal imbalance. After TFH balancing, all hypoglycaemia symptoms disappeared.

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Golf injury - Piriformis muscle left side in a middle-aged woman who was injured in golf game resulting in sore hip. I.M. cortisone injected straight in piriformis handled the pain but left the lady with a numb, dragging left leg. Muscle test showed the piriformis absolutely weak and would not strengthen. The Iliacus was also weak, but strengthened. Using the reactive muscle principle, energy from the iliacus was sent to the piriformis with about 25% gain in strength. No improvement other than that mentioned was gained until ESR was done on cortisone itself, the injection and the injury and associated pain. During ESR the lady noticed feeling returning to her previously numb foot and stiffness leaving hip area. Upon standing there was no longer any dragging or numbness, and the piriformis strengthened to 100%.

Woman with constipation, edema and poor circulation could have bowel movement only once per fortnight. All muscles went weak every time she sat down, due to an auto accident. After ESR on the accident, sitting, plus daily balance the constipation changed to 3 BM's per day with the help of a feeding program based on food testing. As for the Edema in ankles, tight adductors stopping lymph drainage from legs, psoas (kidney) reactive to adductors (circulation-sex). Psoas, subscapularis (heart) and circulation-sex related muscles all switch off the supraspinatus (central). Also psoas, subscapularis, and the circulation-sex related muscles were reactive to the diaphragm! Aerobic exercise had made her worse until this was found out. Reactivity was handled immediately with TFH techniques with great improvement. Diaphragm was apparently causing the problems with other muscles due to anear drowning incident many years ago. ESR fixed that one.

Lady in mid-thirties - pyorrhea (advanced), very poor circulation, poor sleep, high blood pressure, menstrual pain. Her hands turned blue on exposure to room temperature air, so she always wore gloves. The dentist told her that the abscessed gums and decayed bone meant all teeth would be lost. She had a sugar craving and bad pain with anxiety during menstruation, BP 160/90. On testing, all circulation-sex related muscles were weak plus subscapularis and supraspinatus and central. Gluteus medius was reactive to pectoralis major clavicular, abdominals, quadriceps, fascia lata and subscapularis. Also supraspinatus was reactive to subscapularis and diaphragm, and the subscapularis and circulation-sex related muscles were reactive to the diaphragm. A 42 muscle balance plus half of the reactives were done, and cross-crawl, saunas, rebounding and strict vegetarian diet were followed for 2 weeks. Upon rechecking, all muscles were strong. Circulation 100% improvement (feels warm, needs less blankets), her period occurred without pain, she sleeps through night lost 6 lbs and BP dropped to 120/70. Awaiting dentist's report in one month, she has no pain from teeth and the abscess is disappearing.