

Message from the President

Dear TFHKA Members and Guests,

Welcome to our 13th annual TFHKA conference (30th USA TFH conference), Adventures in Healing. On behalf of the TFHKA Board of Directors, we are looking forward to seeing you again or meeting you for the first time. It's our favorite time of year in TFHKA to share moments of friendship, stories, laughter, hugs, love, energy and more, culminating an arduous past year of growth experiences for the board. This time together with our members makes our work and efforts worth the hours generously given.

As you know, our organization began in 1973 with Dr. John Thie's *Touch for Health* book and training program. It was his and his wife, Carrie's, dream to give the most unique preventative self-care program, we know of, to the families of the US and the world. There have been many changes since its inception including numerous tentacles of kinesiology programs that had their birthplace in Dr. Thie's Touch for Health system. It is exciting to log on to one of the plethora of websites that are linked worldwide just to see how many of us are "linked". by our basic "tools" of muscle testing or muscle checking or muscle monitoring, whichever you choose to call it. Nearly all the wonderful and creative websites I have perused tell the story of Dr. Goodheart and Dr. Thie. Watch for new changes to our very own website, a long time in coming. I think you will love its new look, content and mobility. (If you have other ideas for it, be sure to let us know.)

We want to express unlimited gratitude and appreciation to Anita More and Judy Williamson for planning our days together; to Hap and Elizabeth Barhydt for compiling and formatting the journal, yet one more time; to Judy Levin and John Varun Maguire for behind the scenes work; to Adam Lehman, the audio "director" (and photographer) to Valerie Biggs, our office manager and to anyone else who helped "get it together"

For graciously giving of their energy, time, talent and finances, we hold the highest respect to our speakers who have come from here in the US and from across the world to share their insights and information, that we might be renewed, inspired and more intelligent about what we do as a TFH instructor or practitioner. We hope you will take their information to use, not only yourself, but with family, friends, students and clients, as well. With you here with us in San Diego, we will have another successful conference.

Jan Cole, M.Ed., TFHKA President.

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So You Want To Be a Practitioner

by John F. Thie, DC

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It was 1964, when I first read about Applied Kinesiology in the Journal of Chiropractic Economics. That was also the year that I investigated giving up my chiropractic practice, taking my family with me and going to work in rural areas of Mexico with the poor after completing Medical Training there. In that year after spending time investigating what it would mean to me personally and to my family the decision to remain practicing in California as a Chiropractor became obvious. Even before we were married, Carrie and I knew that we wanted to devote our lives to helping others to live healthier lives. This was the primary reason I chose to become a chiropractor and focus on the value of posture.

Because of the our daughter's fatal accident in 1962, the political intrigues in chiropractic and the tragic course of our country at the time we decided to investigate another way of achieving our goals. Thus in our investigation of the practice of orthodox medicine we discovered that it was very different on the inside than it appeared from the outside. Sometimes the medical business decisions that had to be made versus the patient betterment were at cross purposes with our ultimate goal of making the world a better place for families and humans in general. We found that the freedom offered in the practice of chiropractic and the safety and efficiency of the methods outweighed the lower social status of a chiropractor at that time as compared to the orthodox medical practitioner. What was the most shocking revelation to us were the restrictions placed on the orthodox practitioner and the lack of freedom to do what the individual practitioner felt was the best for the unique patient. For the allopathic biomedical model, now and then, the prescribed protocols must be followed, the time spent is regulated,

and the fees are regulated by insurance, facilities and government regulations. None of these were present in the practice of chiropractic in the early 1960s. We had freedom to do what we felt was best for our patient in the protocols we followed, in the fees for service, and the way we described the conditions that the whole person came to us to change for the better. All these steps to wellness were up to our individual judgment with the cooperation of the patient. We returned from Mexico wiser and grateful for the freedom and vision that chiropractic offered the practitioner and patient. We became very enthusiastic about our chiropractic license and private practice in Pasadena California. We were more open to God's guidance to help those wanting a better way of living than ever before.

My meeting George Goodheart in 1965 and becoming an applied Kinesiologist was a perfect fit for the basic goal of Carrie and myself. From 1965 to my retirement from Chiropractic practice in 1992, the Touch for Health program developed and it was our constant desire that the ICAK (International College of Applied Kinesiology) would see the light and adopt Touch for Health as an official lay and paraprofessional program. Even after my retirement we have continued to encourage AK practitioners to cooperate and be a part of the worldwide Touch for Health movement. Although we began the Touch for Health approach for all the lay public it became clear that professionals appreciated the Touch for Health teaching approach as a tool to assist them through the rather complicated, continuing to be developed, AK protocols. George Goodheart was not interested in making AK a lay program, however he challenged us to write a book for lay people and he did enthusiastically endorse the idea.

When the Touch for Health Foundation (TFHF) was formed he served as Vice President for a number of years. It has been the foremost TFH desire that everyone in the world would be able to use manual muscle testing (MMT) as a tool to help families have better lives.

The medical laws in the 1960's were such that if you did anything to help another person it could be classified as the practice of medicine. Exceptions to these all-encompassing regulations were also passed by state legislatures for chiropractic, naturopathy, osteopathy, optometry, etc. Touch for Health was not meant to teach a protocol that could be classified as the practice of medicine or any other licensed or regulated health profession its purpose was to share hygienic, rehabilitative, preventive, health enhancing protocols that were safe, efficient, effective that families could use with their friends and family members. In addition that health care givers working as professionals (that is being paid for services rendered) could use the TFH methods to help their clients and patients to have healthier lives.

At the close of 2002, on December 27th, Carrie and I celebrated our 50th anniversary. In the months leading up to that event and continuing now through 2003 we are praying and considering the best way to use our energy and time God has for us on this plane. We are both convinced that there is a higher power that guides us to continue to be "on target" for the needs of others with the gift God has given us through the blessings of elder hood and the wisdom to manage our personal passage.

At the moment new beginnings are stirring for Touch for Health people and others. There is a door opening in California and we wonder how best to approach and go through it. It is the door of Touch for Health Practitioner. In California a new law went into effect January 1, 2003. The law Health Freedom Bill S577, Which passed with no negative votes in either the state Senate or Assembly allow complementary and alternative practitioners to help people without fear of being arrested for practice medicine or other licensed or regulated violation under certain circumstances. Section 1 (c) The Legislature

intends, by enactment of this act, to allow access by California residents to complementary and alternative health care practitioners who are not providing services that require medical training and credentials. This is then what you could do as a Touch for Health Practitioner. You do not need medical training or credentials for what you do in energy balancing.

What do you need to do to meet the requirements of this legislation? SECTION 3. Section 2053.6 is added to the Business and Professions Code, to read:

2053.6.(a) A person who provides services pursuant to Section 2053.5 that are not unlawful under Section 2051, 2052, or 2053 shall, prior to providing those services, do the following:

(1) Disclose to the client in a written statement using plain language the following information:

A) That he or she is not a licensed physician.

(B) That the treatment is alternative or complementary to healing arts services licensed by the state.

(C) That the services to be provided are not licensed by the state.

(D) The nature of the services to be provided.

(E) The theory of treatment upon which the services are based.

(F) His or her educational, training, experience, and other qualifications regarding the services to be provided.

(2) Obtain a written acknowledgment from the client stating that he or she has been provided with the information described in paragraph (1). The client shall be provided with a copy of the written acknowledgment, which shall be maintained by the person providing the service for three years.

2053.6.(b) The information required by subdivision (a) shall be provided in a language that the client understands.

What is legal for you to do?

2053.5.(a) Notwithstanding any other provision of law, a person who complies with the requirements of Section 2053.6 shall not be in violation of Section 2051, 2052, or 2053 unless that person does any of the following:

- (1) Conducts surgery or any other procedure on another person that punctures the skin or harmfully invades the body.
- (2) Administers or prescribes x-ray radiation to another person.
- (3) Prescribes or administers legend drugs or controlled substances to another person.
- (4) Recommends the discontinuance of legend drugs or controlled substances prescribed by an appropriately licensed practitioner.
- (5) Willfully diagnoses and treats a physical or mental condition of any person under circumstances or conditions that cause or create risk of great bodily harm, serious physical or mental illness, or death.
- (6) Sets fractures.
- (7) Treats lacerations or abrasions through electrotherapy.
- (8) Holds out, states, indicates, advertises, or implies to a client or prospective client that he or she is a physician, a surgeon, or a physician and surgeon.

2053.5.(b) A person who advertises any services that are not unlawful under Section 2051, 2052, or 2053 pursuant to subdivision (a) shall disclose in the advertisement that he or she is not licensed by the state as a healing arts practitioner. So what is the "theory of treatment upon which the services are based"?

This vague wording leaves it up to the individual practitioner to determine what they are doing is

1. Not licensed by the state already.

2. The reason and explanation of the reason they are offering the services they propose to render to the client/patient.

- 3 State these things in understandable language for the client/patient in writing.

The following is what I am using when asked for how I would describe the theory of Touch for Health to meet the requirements of the law.

Touch for Health is a model of natural health enhancement that has as its basis, the existence of a meridian system in addition to the known systems of anatomy and physiology. It is hypothesized that this meridian system can be evaluated by the use of gentle muscle testing protocols. Further it is theorized that by balancing this meridian energy as evaluated by muscle testing that the client/patient will be better able to reach their personal goals and have a more effective, efficient life. This system is available to all people and professions, is not dangerous to use, and does not require a license by the state or medical training.

So now for the first time in California I can with confidence say that if you have a gift of healing and find that you can use that gift by opening an office legally. You can help people change so they can have what they want better in their lives

Why do I recommend that you do so? The need is so great please consider the following.

"Chronic health conditions can lead to significant health problems if left unchecked, and their incidence is rising: By 2020, 157 million Americans (or nearly half the population) are expected to suffer from one or more chronic conditions. The elderly are particularly prone to having multiple chronic health problems.

"Utilizing a national sample of over 1 million people age 65 or older and enrolled in Medicare in 1999, data were obtained on chronic conditions including hypertension and diabetes. Data showed that 82% of the Medicare beneficiaries had at least one chronic condition, increasing in prevalence with age to nearly 90% in those 85 and older. On average, there were more than two chronic conditions per person. Over half of the subjects had a

circulatory system-based chronic condition. Also, two-thirds of all individuals 65 or older had two or more chronic conditions; 43% had three or more; and 24% had four or more.

"This study in the *Archives of Internal Medicine* additionally found that individuals with four or more chronic conditions were approximately 100 times more likely to have been hospitalized for a condition that could have been averted through proper primary care. Per-person Medicare expenditure increases coincided with the number of chronic conditions, from about \$200 for seniors with no chronic conditions to nearly \$14,000 for beneficiaries with four or more."

"What does all this information mean to you? Heed these numbers to avoid major health problems and big bills as you age, by simply maintaining wellness, through exercise, a good diet and doing nothing to excess."

Reference: Wolff JL, Starfield B, Anderson G. "Prevalence, expenditures, and complications of multiple chronic conditions in the elderly." *Archives of Internal Medicine* 2002:162

As I have aged and observed over the last 52 years that I have been active in delivering health care in one way or another, one of the best ways to stay healthy is to have our meridian systems in balance and have goals that we want to accomplish. Touch for Health protocols can do this for people. When you are helping people get what they want and most of the time they feel immediately better, it gives you a reason for getting up in the morning and a joy in going to your work. You know that you are making the world a better place by doing good and giving love to all those you touch. You can do this for all ages, but especially for those elderly with chronic problems.

Another reason for my advocacy of Touch for Health practitioners programs relates to my belief in these practitioners ability to enhance by using Touch for Health as hygiene such as brushing your teeth and bathing regularly, the health of the all people but especially the over 65 population. The physical touching helps and the use of the TFH energy balancing protocols will reduce the use of unnecessary

drugs and the need for hospitalization. In an article by Los Angeles Times Staff writer Jane E. Allen March 10 2003 she said "A new report has found that at least 1.9 million drug-related injuries, ranging from minor rashes to death, may occur each year among Americans older than 65. In more than a quarter of the cases, patients are simply given the wrong medication, the wrong dose or a drug known to interact with another they are taking—error that could have been prevented.

"Of the 180,000 life-threatening or fatal side effects, more than half might have been prevented according to estimates from researchers from the University of Massachusetts Medical in Worcester and Brigham and Women's Hospital in Boston." Can a person that knows TFH help prevent any of these? I believe that if the people in the USA could get balanced daily by asking each other for help and being guided by TFH Instructors and practitioners some of these bad situations could be avoided.

Another quote from Larry Dossey, MD from the 2003 Jan/Feb Vol. 9 No. 1 *Alternative Therapies* "The modern hospital is an exceedingly dangerous place. It is currently estimated that around 225,000 Americans die in hospitals annually from the side effects of medications and because of error of hospital personnel. This makes hospital care the third leading cause of death in the United States, behind heart disease and cancer.

"Experts attribute these hospital deaths to idiosyncratic physiological reactions within patients, resulting in fatal drug reactions; to poor judgment and negligence among hospital personnel; to bureaucratic complexity and miscommunication between departments; or to just plain goof-up."

Can we by training more people to use TFH as hygiene and prevention in reaching their goals prevent some of these deaths and reduce the suffering for the people and their families? Can we reduce the need for hospitalization? I think we can! Thus we can keep people safer and prevent the dangers of being hospitalized or just needing to take drugs.

A further quote from Dossey in the same editorial "healthcare professionals have been drawn to their work have an innate desire to

be healers. Yet through the process of their professional education, this instinct is devalued and often snuffed out as a result of the overwhelming emphasis on a materialistic approach to health and illness."

"Millions of physicians and nurses in America know they are living a lie. They are required to deliver a soulless, mindless, materialistic form of patient care that contrasts dramatically with the ancient art of healing, which has always been rooted in compassion, love, and the spiritual side of life that attracted them to their profession in the first place. Of 296 family physicians at the 1996 annual meeting of the American Academy of Family Physicians it was found that 99% were convinced that religious beliefs can heal and 75% believed that prayers of others can help a patient recover, though few of their physicians ever recommended these interventions."

I hope that will not be said of the TFH practitioners of the present and future. I believe that using TFH protocols can be a prayer ritual that is very effective, as I have proven for myself in the past 6 years I have been using it in this way at the Malibu United Methodist Church's Prayer and Healing Ministry as a volunteer. Can we help some of the nurses, physical therapists, physicians and surgeons to be able to live more of their truth by teaching them TFH?

What we have known for a long time as exemplified 40 years ago and equally as true today when a former drug company executive, who was also a physician, noted while testifying before the U.S. Senate that the pharmaceutical industry is "unique in that it can make exploitation appear a noble purpose" We have just gone through just such an episode with the attempt to reintroduce smallpox vaccinations, which have had disastrous results. It is estimated that the public in general in the USA has over 1 million people die or suffer from dangerous drug-induced illness every year. Can we by having more people learning TFH prevent some of these fatal or serious side reactions, that is unintended deaths and serious suffering? IATROGENIC is the name given diseases induced by doctors and their treatments. Do we see these mistakes made public? Rarely!

Not everyone should be a health care practitioner; one that is paid for helping someone have better health. Neither should everyone be any other professional unless they have special gifts in that profession. The problem is that in most professions like the arts, health care is an art, people do not get paid unless their performance is superior to the general public, because the public can judge the performance and know if they want the work of a particular artist musician, muralist, painter, athlete, engineer etc. But with health care workers this information is kept from the public, even though it is available on government records. The hospital and medical lobbies work very hard at keeping the dangerous practitioner names from the public. It not the case in the professional athlete, or other artist whose performance is on display every day they perform. It is my belief that we need people to do surgery, give drugs and attend those of us that are sick, injured and have the need for hospitalization and drugs, but I believe that these people ought to have a gift of healing like other professionals have gifts in performing their specific tasks of music, art, athletics, mathematics etc. It is time we offered TFH courses to everyone so that those that have the gift of healing can go on to be our health care professionals.

The wonderful thing about this goal is that it is already happening. Many people who have started out in TFH have gone on to be chiropractors, medical doctors, naturopaths and special Kinesiology practitioners. These are the people that have special gifts in healing and you can tell by the outcomes of their interventions.

Times are changing. A quote from the Chiropractic Report of November 2002 tells something about chiropractic in Australia, which may pertain to Kinesiology today. It quotes two chiropractors that graduated from Palmer Chiropractic College 40 years ago and have been practicing in Australia since. "The review the profound changes in chiropractic practice during their professional lives. When they entered practice there was no communication with other health professionals, the notion that health insurance would ever cover chiropractic care 'was pretty

far fetched', and Australian chiropractors were free to run their practices as the liked, "answerable to no one but our patients."

That has all changed. First came government recognition and regulation of chiropractic practice, then inclusion of chiropractic care in worker's compensation and motor vehicle accident legislation, government funding for chiropractic services for veterans, the expectation that chiropractors would participate in mainstream health care teams, the growth of patient rights and all of the new clinical record-keeping, and communication skills that these things demand.

I am like those two practitioners I graduated from Chiropractic College 47 years ago in 1956 getting my license to practice in California in March of 1957. I have also had the opportunity to watch the changes in the last 30 years of my desire to share Touch for Health Kinesiology grow from a patient education tool to a profession. Now how will the recognition of TFHK be affected by its continued growth in use and practitioners? Will the desire for third party payment and limitation of the number of practitioners by registration and licensure put a break on the wonderful creativity that is now present?

The ultimate goal of the practitioner in giving a client a TFHK balance is in some indefinable way, to impart the truth that s/he is a treasure to the entire world community, as a child of God. Our desire to the client/student know and achieve what they were created to be gives us the same realization of ourselves.

It is a mark of the best practitioners that they see the inherent value of the client by understanding that the human beings value lies within them and not with what they can do. If we authentically seek to understand the wholeness of the client we then can realize they are a mystery, to which we can listen, and help them find meaning for themselves by balancing their energies to be in harmony with the universal.

It is a certain unavoidable phenomenon that no matter how much we think we know about the client there are always some limits to our understanding.

We can enjoy our work more when we realize that we will encounter surprises in the goals clients chose and the mystery of why these choices were made gives us a way of articulating the numinous presence in our universe.

When we open ourselves to the otherness of our clients we invite our own encounter with this mystery. We can become aware of a pervading presence when confronted with the incomprehensibility. In this we come to know the sacred as different from the secular. Secular solutions alone are recognized as insufficient. Once you can realize that the client has a presence that is not defined by the physical, mental, emotional characteristics and complexities, what the client does for recreation or work and what family the client has, but by something more deeply profound we can have the joy and meaning of being a practitioner/instructor.

This will mean that the practitioner will remain a physical helper, but also becomes something else, a unique manifestation of the numinous presence that pervades all life. The teacher/practitioner's physical presence becomes a celebration of a more profound reality capable of transforming our present consciousness into sometime more. Once we encounter the client in this manner we awake to a world of wonder and pervading presence that is so much more than just helping a person get rid of symptoms and complaints. We enter into a deep sense of within-ness and a profound beyond-ness. We come to understand the client as a great celebration, a unique articulation of existence and a communion of our relationship with the individualization of the oneness of all.

So you can see we have a lot we can contribute and we can have a lot of joy, meaning and purpose in our lives as we become more efficient as instructors and practitioners of Touch for Health.

I am enjoying my working with students as an instructor and coach; I am enjoying helping people find greater meaning in their lives. I know you can also have more meaning, more joy, and more abundance by teaching and using Touch for Health. Thank you for allowing me to share with you.

Radiant Circuits/Energies of Joy/Strange Flows

Based on Donna Eden Workshop

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Doesn't matter what name is familiar to you, for me they are one of the energy systems that have a great importance for our well-being and happiness. They are our unique 4th of July and the ones that remind us of the JOY of this miracle of life that we are experiencing at this time.

We are too busy doing things and have forgotten to just BE. We are beings having a human experience. We should call ourselves being humans instead of human beings.

I am going to share information given to me By Donna Eden in workshops and from her book *Energy Medicine*.

What follow are excerpts from her book *Energy Medicine*.

Opposed of triple warmer that are your inner militia the Energies of Joy are your inner mom. They support, inspire strengthen and cajole all your organs and energy systems to functions as a tightly knit family. They are advance men, ensuring that all systems will work for the common good, redistributing energies to where they are most needed, and preparing the way for a coordinated response to any happenstance the body encounter.

The strange Flows are Psychic Circuits. If we look through the lens of evolution the strange flows have probably been around much longer than meridians. She bases this fact that are more primitive organisms as insects and few amphibians, she has examined, where she sees strange flows but not meridians. They presumably existed prior to the more aggressive defensive strategies of triple warmer.

The central and govern meridians are probably the evolutionary link between the radiant

circuits and the meridians. They jump their course like strange flows but are more efficient because they have established pathways like meridians.

They are ten Energies of Joy: The belt flow, penetrating flow, left and right bridge flows, left and right regulator flows and the four meridians central, govern, spleen, triple warmer that double as strange flows.

Using your handouts let us start demonstrating how to test and the corrections for each one of them.

From Donna Eden's Workshop, Sedona, 2001

The Individual Radiant Circuits

Why do we need to know about the specific radiant circuits when we can just stick our butts in the air and activate all of them? You can bolster the overall radiant system by strengthening its weakest links. In addition, individual radiant circuits, have, over evolutionary time, taken specific roles and they serve different functions. So you can bring about changes in habits that are entrenched not only in the psyche but also in the body by focusing on and strengthening the action of specific radiant circuits. The locations of each of the radiant circuits in their dormant state are shown in Figures 1 through 7 (these charts differ somewhat from the traditional renditions based on how the first author sees the radiant circuits) their basic functions follow.

The Yin and Yang Regulator Circuits (Figure 1) The front (yin) and back (yang) regulators circuits influence hormones, chemistry, and circulation as well as the connections among all the

systems in the body. They help your body adapt to endless assaults of internal and external changes. Hormonal imbalances and the emotional turmoil that may follow can be addressed by working with the regulator circuits. They also establish harmonies with other people and within the environment.

The Yin and Yang Bridge Circuits (Figure 2). The front and back bridge circuit connect the front and back of the body as well as the body's energetic polarities: positive and negative charges, receptive and forceful impulses, male and female qualities, yin and yang influences. Where an energy is stuck, they bridge across to its polarity and get the system back into flow. Inner schisms—alienation of body and mind, head, and heart, love and sex—may be addressed by working with the bridge circuits. In the outer world, where regulating channels support harmony between people, the bridge circuits support the exchange of information, particularly the accuracy of intuitions about others

The Belt Circuit (Figure 3). The belt circuit surrounds the waist. It connects the energies of the top part of the body and the bottom part of the body. Distributing the energies up and down is the critical physical health task of the belt circuit. It also helps all of the meridians to move in harmony and orchestrates the charkas. Psychologically and spiritually, the belt circuit is involved with how grounded we are and how inspired we are; how grounded we can stay reaching to our spiritual heights, and how high we can reach while staying grounded. Much human folly and suffering is a reflection of impairment that keeps us energetically top-heavy or bottom-heavy.

The Penetrating Flow (Figure 4). If the bridge and belt circuits connect your front and back and up and down energies, the penetrating flow brings energy to your inner depths. When moving freely, it penetrates into charkas, the muscles, the bones, the genitals, and deep into the cells. In the embryo, according to both traditional Chinese and Japanese medicine,

the penetrating flow is said to carry the energies of the ancestors and to set strength of the person's basic energetic constitution. You know this energy in the flowing warmth of an orgasm, and when and orgasm opens into spiritual experience, it is as if you are the recipient of the penetrating energies of the universe. That is how your cells must feel when they are reached by your penetrating flow. When people feel depressed or empty inside, it is often because the penetrating flow is weak or blocked. To activate the penetrating flows is to connect with and energy that brings a deep sense of purpose and meaning.

Central and Governing (Figure 5). Four of the body's radiant circuits are also meridians. They carry radiant energy and are capable of instantly moving this energy to anywhere it is needed. But unlike the other radiant circuits their energy is also transported along fixed pathway and accessible through points on the surface of the skin that show decreased electrical resistance, called acupuncture points. Central meridian's pathway flows up the front center of the body, feeding energy to the brain. Governing meridian's pathway flows up the back center of the body, feeding energy to the spine and much of the nervous system. The two meridians meet at the back of the throat, creating a single force field, and this is where they begin to behave like radiant circuits. That force field radiates outwardly, bringing strength and vitality to the meridians, the charkas and the aura. When a person is filled with confusion or self-doubt, activating central and governing can pull the cerebrospinal fluid up to the brain and calm the nervous system, eliciting clarity and confidence. When a person is over-sensitive to other people or the energies in the environment, activating central and governing often lends protection by strengthening the aura.

Spleen and Triple Stimulator (Figures 6 and 7). The two other radiant circuits that carry the properties of meridians are also paired polarities—triple stimulator and spleen. Triple stimulator's

fixed pathway goes directly from the back brain to the front brain. The back brain is primal, carrying the survival strategies of millions of years of evolution. Triple stimulator feeds the back brain while moving primal survival information into front brain. It can conscript energy from other meridian (except heart) to insure the body's survival. This is a very serious assignment, and triple stimulator is the single radiant circuit whose "personality" is more like a general in combat than an upbeat mom. Meanwhile, the mother of upbeat mom energy, the spleen meridian/radiant circuit, radiates the life force itself. Running through the pancreas, which metabolizes carbohydrates and sugars, this is the energy system that metabolizes thought, experience and emotion, as well as food. Spleen energy, in fact, resonates with and metabolizes all the other energies of the body, bringing them into harmony with one another. Together spleen and triple stimulator govern the immune system through an interplay of military and family values, and when you can keep their energies in balance, they become a powerful team for keeping your life in balance.

Even though various works (including this one) provide charts for the location of the radiant circuits, these are ultimately misleading. The radiant energies do indeed concentrate on specific lines along the body, but that is while they are relatively dormant. When they are active—and that is where the action is—they may go anywhere, and their paths cannot be reliably charted. Several books also attempt to "connect dots", showing which points to hold to activate the radiant circuits. While this can turn on the radiant circuits, linear formulas tend to go against the flow of this energy. Still, a value of the charts is that if you hold one of the points identified as an "anchor point" and then intuitively touch other points on the chart, you "hyperlink" the energies between the points, strengthening the circuit it can begin to radiate. I call this "anchor and wander". Instead of directing the flows by following some hypothesized linear pattern, using your intuition in a dance with that energy beckons it on its own terms.

Checking and Correcting the Radiant Circuits

With the specific benefits of each of the radiant circuits being so central to enjoyment of life, you might be tempted to work with all of them, and we do feel that knowledge of how to activate the entire radiant energy system should be part of everyone's education. But it is also valuable to know which are the weakest links and how to strengthen them. You may already recognize from reading the above descriptions which circuits are not operating optimally for you, and you can verify this and investigate further with other energy tests.

When you suspect that working with the specific radiant energies may be helpful, you can energy test which ones might need attention. To do the test, you will need a partner. Select an indicator muscle (see Eden, 1998 Chapter 2), check for a strong baseline, and then use the following instructions. Following each of the test instructions are techniques for activating that particular radiant circuit. You can do many of the activating techniques without a partner although, particularly for the techniques requiring that point be held, when someone else is holding the points for you, your body relaxes and you can receive more deeply.

Checking the Regulator Circuits.

For the yin regulator circuit place your thumb at the bottom of the chin bone and the finger of the other hand in the hollow at the base of the front of the neck. Pull the fingers of one hand upward and the other downward, stretching the skin over the front of the neck. Energy check before and after. For the yang regulator circuit, pinch the backs of both heels (below Achilles tendon). Energy check before and after.

Activating the Regulator Circuits.

If either regulator circuit tests weak, rub your hands together; place them on the head and, touching the body, slowly smooth over the shoulders and down the arm. Return to the throat area under the chin and smooth the energy down the sides of the body with your full hand. As you come off the ankles, pass your hands

over the top of each foot, squeeze the sides of the feet, and then firmly pull the energies off of them. Make at least two passes. Another technique for activating the regulator circuits is to lie face up while a partner stands at the ends of your feet and places his or her thumbs at the bottom of the ball of each foot between the big toe and second toe (Wellspring of Life Points), gradually pressing in and holding for about 10 to 15 seconds. Then wrap the hands around the top of the feet, pulling them back, with the thumbs still on the same points and gradually releasing the pressure. It is a wavelike movement and can be repeated several times.

With this and each of the subsequent radiant circuits, if the initial energy check showed a weakness, repeat the test after completing the treatment. If the circuit has not corrected or the correction does not hold over time apply "anchor and wander" technique (see below) or "trace" the circuit. Find the figure for the circuit you wish to trace and, with the slow full contact of yours or your partner's hand follow the solid lines in the diagram, generally moving from top to bottom.

Checking the Yin Bridge (front of the body). Place the middle fingers of each hand between your breasts (at top of thymus) and draw a "heart" by circling your hands up and then around each breast (it is not necessary to touch the body), meeting just below the sternum. Energy check before and after.

Activating the Yin Bridge. Begin with the same heart motion as used in the test. Repeat three times, and then when your hands meet at the sternum after the third go straight down the front of the body very deliberately, continue down the legs, moving toward the inside and wrapping your fingers underneath your feet. Pull your body up and away, stretching your arms. You will feel a stretch in your back. Another good way to activate the Yin Bridge is to sideways figure 8 movements over the face and then down the front of the trunk of the body. The movements extend across the width of the body, making 8s that are about 4

inches tall, and weaving them down to the bottom of the body.

Checking the Yang Bridge (back of the body). Stand behind the person and with the fingers of either hand, tap on the outer edge of the person's left shoulder. Rapidly tap three more points: the outer edge of the right shoulder, the outer each of the left hipbone, and then of the right hipbone. These four quick taps form a "Z". A strong energy check indicates that energies are bridging between the left and right sides of the back.

Activating the Yang Bridge. Do sideways figure 8 movements on the back of the head and then down the back of the trunk of the body. The movements extend across the width of the body, making 8's that area bout 4 inches tall, and weaving them down to the bottom of the body.

Checking the Belt Circuit. Place the webbed area between the pointer finger and the thumb of either hand around the waist on either side of the body. Energy check before and after.

Activating the Belt Circuit. With fingers spread, circle the hands around the side of the body at waist. Pull from the back of the body to the front and all the way across the belly and to the other side. Pull not only at the waist, but above and below as well. Do this several times with some pressure and lifting movement, alternating hands. Then firmly slide both hands down the leg on the side you are pulling toward and off the foot. Repeat on the other side of the body. With a little improvisation, you can do this one on yourself, and it is a wonderful one to do often to keep your top and bottom halves in harmony. Another belt circuit technique also stimulates the penetrating flow and is particularly effective if the energy is cut off at the top of the legs. Have the client lie face-up and place either foot against your stomach. Reach for both the client's hands so you can pull away from one another. Hold this stretch for about 10 seconds. Repeat using the other foot.

Checking the Penetrating Flow (done while sitting or standing). By placing the thumb of one hand on your navel, the fingers and palm rest on the second chakra. Raise the thumb, fingers, and hand at the wrist. Gently and slowly lower your hand one segment at a time, until the hand is flat. Continue around until the fingers point down and finally lift off. With the other hand, simultaneously or immediately following, do the same motion on the back, directly opposite the first hand. Energy check before and after.

Activating the Penetrating Flow. Masturbate. If this is not convenient, lay on your back and cross your feet at the ankles, bending your legs at the knees. Wrap your right hand around your left foot and your left hand around your right foot. Pull your feet above your head, keeping your arms straight, and rock so your butt comes off the ground. Continue for at least a minute. If a partner is available, have the client lie face down, place one hand on the sacrum, the other at the top of the back, and rock the person for 3 to 5 minutes. When completed, lift both hands simultaneously and let the person bask in the feelings for another minute. This activates governing as well as penetrating flow.

Checking Central and Governing: Push in on ("smash") the nose for about a second. Energy check before and after. This determines if the energies that run up the front center of the body and through the charkas are connecting with the energies that run up the spinal column. When these energies connect, they create a resilient force field.

Activating Central and Governing. First do a front "hook-up" by placing the middle finger of one hand into the navel and the other hand at the third eye point. Push in both fingers and pull them upward toward head. Hold for a couple of minutes. The back "hook-up" requires a partner. Lay face down. Partner places palm of one hand on your spine in the middle of your back, with fingers pointing toward your feet. The other hand points in the opposite direction. The hands cross at

the wrists so that as they push apart, the spine is stretched. Continue to move the hands in opposite directions until the middle finger of the hand facing upward reaches the indent at the top of the neck and the middle finger of the other hand reaches the sacrum. Hold for at least 15 seconds. Energy test before and after.

Testing Spleen: Rather than using the general indicator test, check the spleen meridian directly. With the client's arm hanging straight down the side of the body, thumb next to the legs, and palm facing back, the tester places two or three fingers above the wrist between the arm and the body, and pulls straight out, away from the body, for about one and one-half seconds.

Activating Spleen: Do the "spleen tap" by bunching the thumb, second and third fingers and tapping at the point on the bottom of the breast (one rib below the bra line on a woman) at the side of the ridge cage. Tap both sides simultaneously for 15 to 30 seconds. Alternatively, hold the acupuncture strengthening points for spleen (see Eden 1998 pp 118- 120)

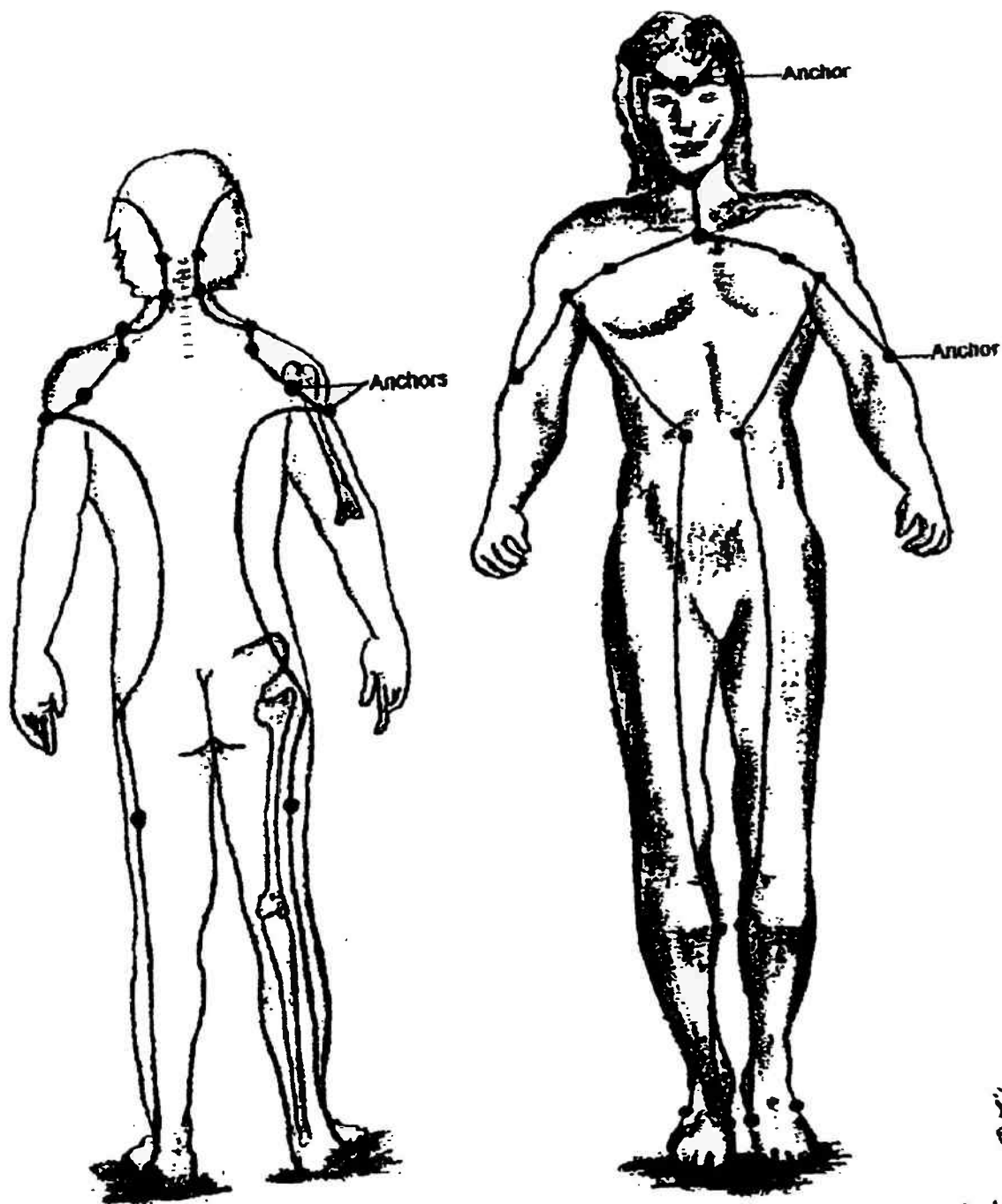
Checking Triple Stimulator: Cup either hand slightly with the fingers spread around the ears, fingers about an inch above and behind the ear. Energy check before and after.

Activating Triple Stimulator. Don't. It is probably already over-activated by virtue of the culture in which you live. The need is to reprogram it so its energies will be available when there is a real threat, whether to your health, your safety, or your state of mind. If the test showed a weakness, triple stimulator needs to be harmonized. Place one hand on the person's forehead and the other hand on and above the navel (over the solar plexus). Hold for a minute or two. Alternatively, hold the acupuncture sedating points for triple stimulator (see Eden, 1998, pp. 122).

Anchor and Wander. If you have not been able to activate a specific radiant circuit with the methods presented above, or if one

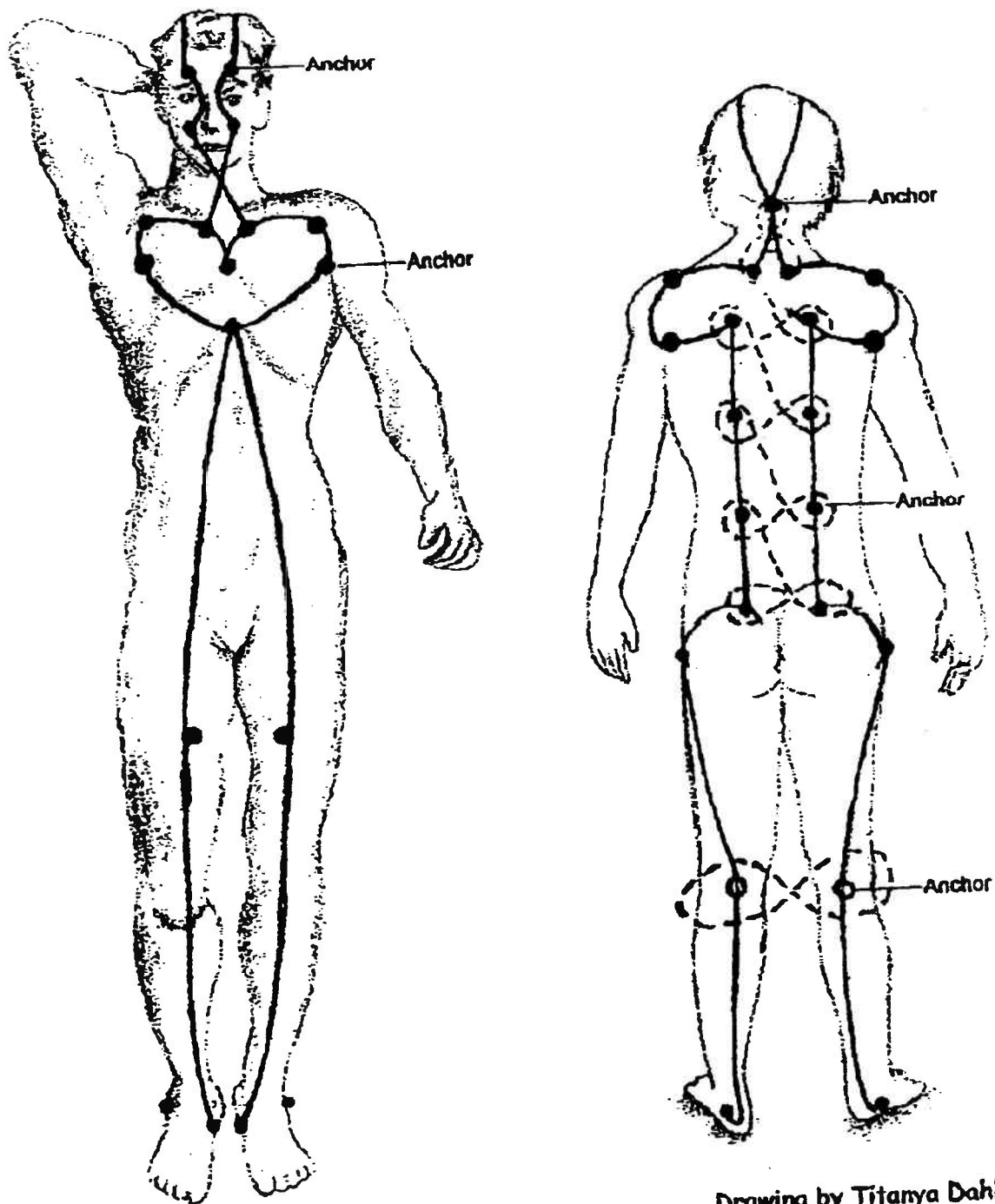
continues over time to test as weak link, use the "anchor and wander" technique. It requires more intuition and will take longer, but it is a powerful method for repairing the weakest links. Find the diagram for the radiant circuit you want to work with and choose one of its "anchor points" (for points that are paired right and left, the diagrams identify only one side, but either side can be used). When possible cross over so you "wander" to a point that is on the opposite side from the anchor point. Place the fingers of one hand on the anchor point and intuit which of the remaining points on the diagram draws your other hand to it. Tapping that point sends a pulse. If you hold the point, your fingers create an electromagnetic charge between that point and the anchor point, jump-starting the flow of the radiant energies. The length of time you need to hold is, again, determined by your intuition, but the average is 3 to 5 minutes. Holding positive images or stating positive affirmations (e.g., "I am being filled with joy", or gratitude, or peace, or love; "My heart is opening") can amplify the benefits. As your intuition becomes more attuned to the radiant energies, you can rely less on the charts. Simply sense which points to hold, and you will find that sometimes the best points for a given individual at a given moment are not the ones identified on the chart.

Figure 1
The Regulator Circuits



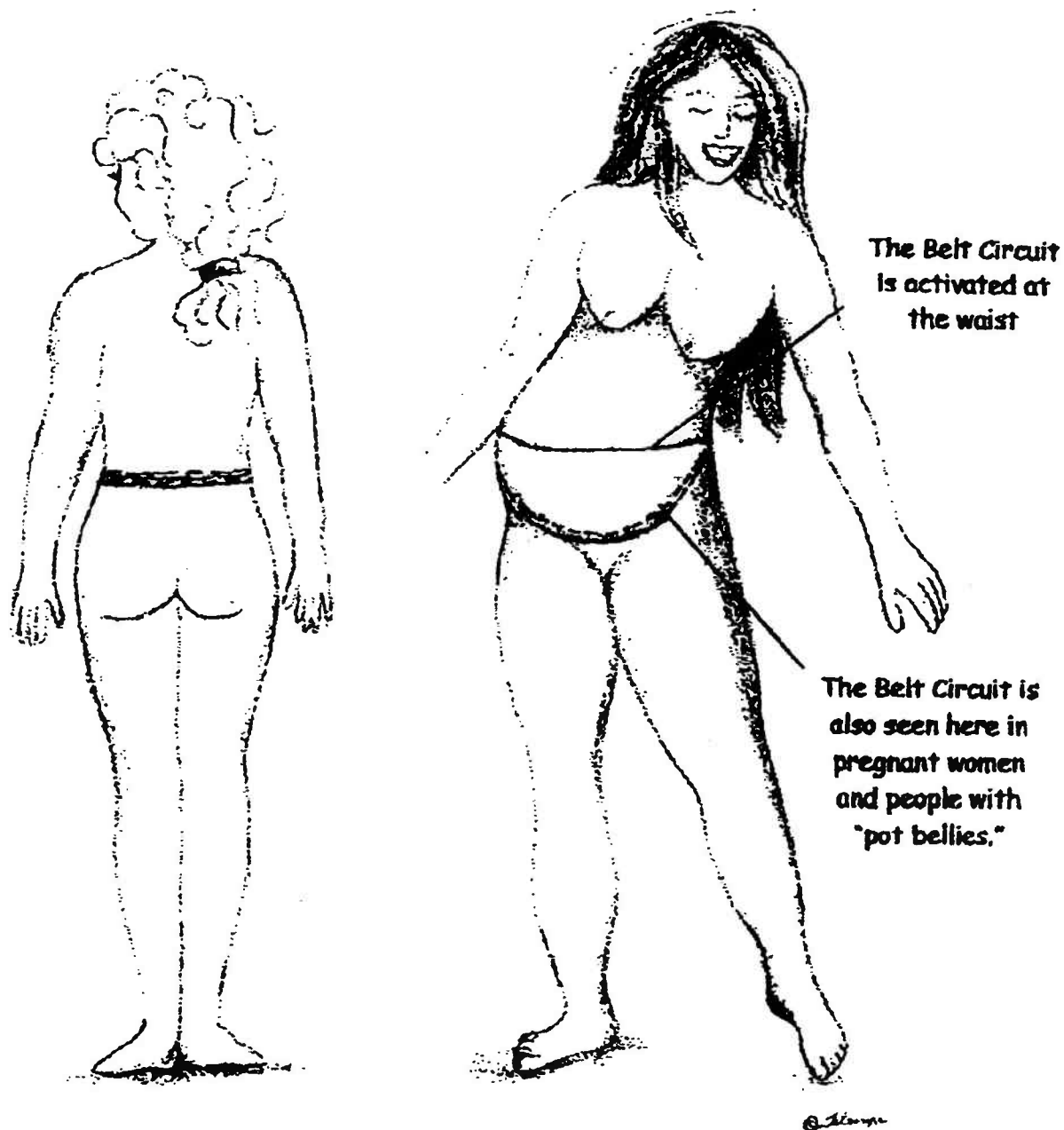
© Titanya
Drawing by Titanya Dahlin
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Figure 2
The Bridge Circuits



Drawing by Titanya Dahlin
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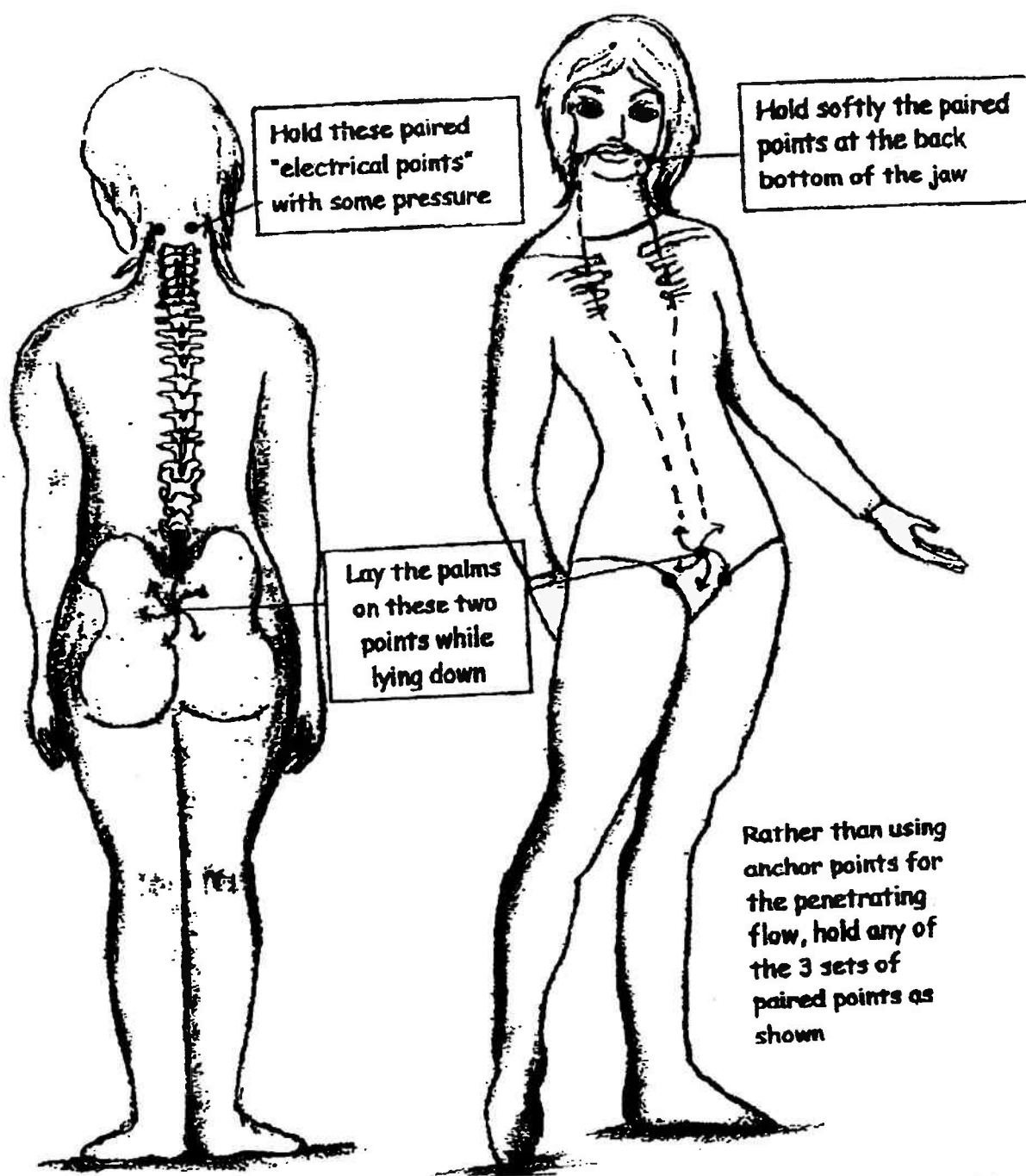
Figure 3
The Belt Circuit



Drawing by Titanya Dahlin © 2001

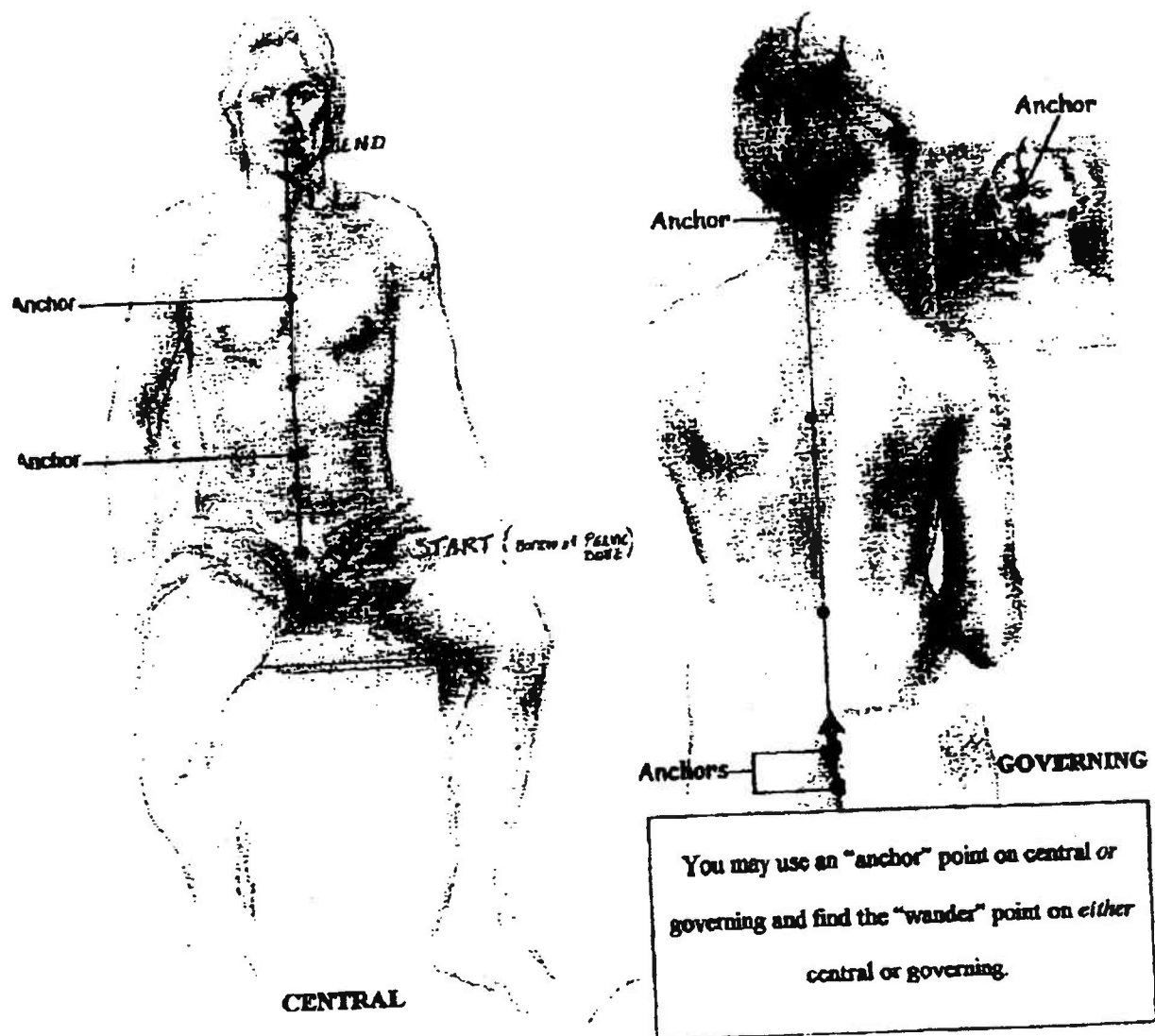
You can hold points anywhere along the belt circuit, but we have found that pulling the energies across the body as described in the text is the most powerful way to work with it. This opens all the top-bottom circuitry in the body.

Figure 4
The Penetrating Flow



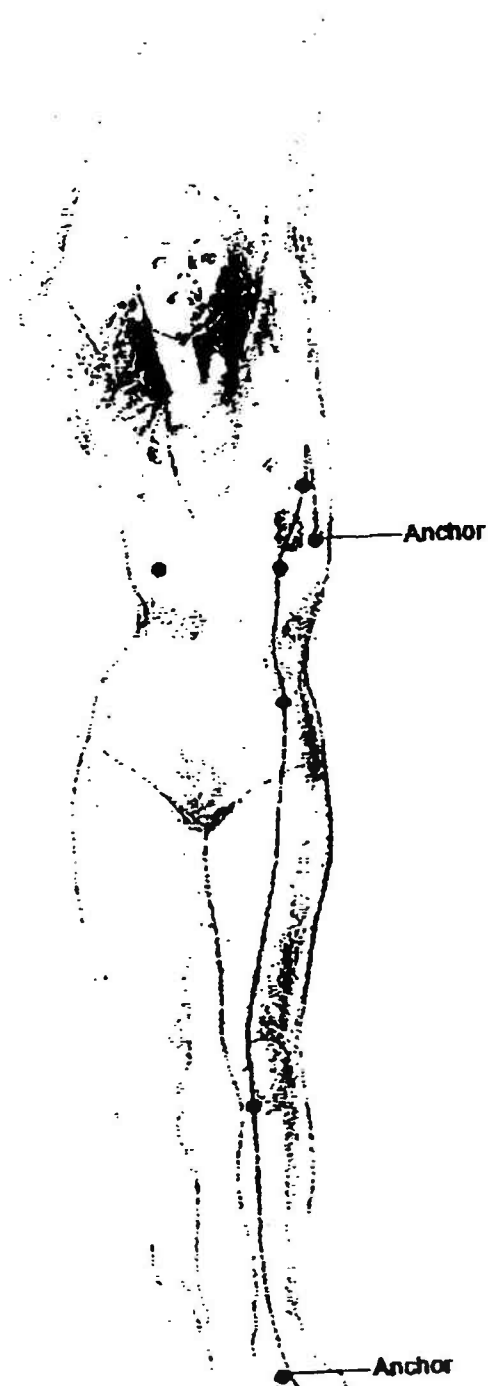
Drawing by Titanya Dahlin
© 2001

Figure 5
Central and Governing



Drawing by Brooks Garten
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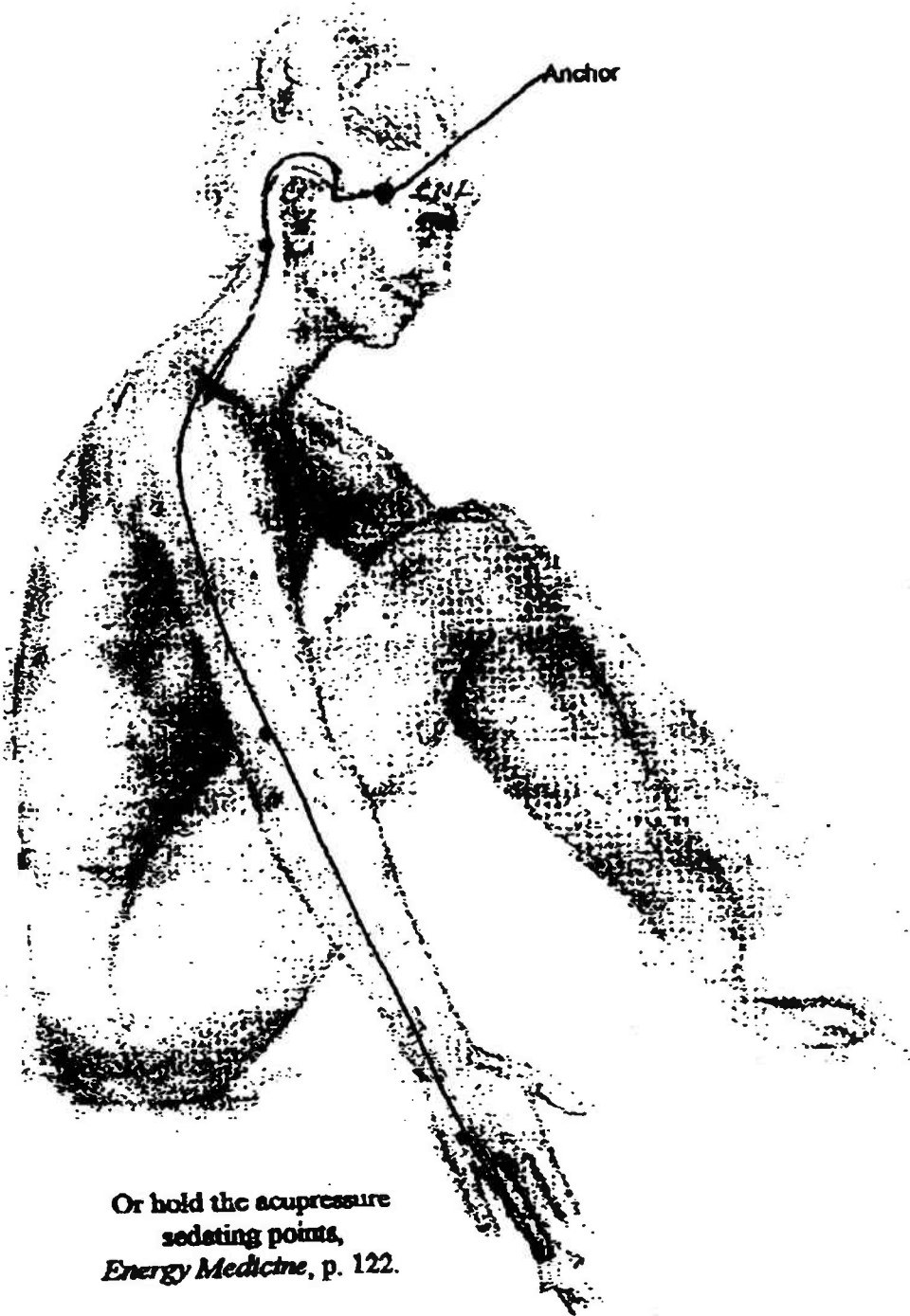
Figure 6
Spleen



Or hold the acupressure
strengthening points,
Energy Medicine,
pp. 118 - 120.

Drawing by Brooks Garten
© 2001

Figure 7
Triple Stimulator



Or hold the acupressure
sedating points,
Energy Medicine, p. 122.

Drawing by Brooks Garten
© 2001

Energy Balancing in 60 Seconds with a \$20 Laser

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How would you like to teach others a way of balancing that was so simple and foolproof, that people would actually USE the Touch For Health technology EVERY DAY?

How would you like to have a simple way to give YOURSELF a powerful TFH based energy balancing once a day IN LESS TIME THAN IT TAKES TO BRUSH YOUR TEETH?

Uncertainty is perhaps the biggest barrier to millions of people using the TFH technology on a regular basis for their personal benefit as well as for helping others. Most people just are not willing to take the time to master and implement this incredible technology we possess - and that is a tragedy!

One of my biggest frustrations and disappointments in teaching TFH classes (since 1981), is that close to 99% of those who attended would NOT use their new incredible knowledge outside of the class for more than a week or so.

Complication Produces Uncertainty and Inaction

I concluded that one of the primary reasons that TFH has not spread as it could have is because it is perceived to be too complicated and people feel uncertain about how to do it accurately.

So the natural predictable (tragic!) result is that THEY DO NOT DO IT AT ALL!

A New Paradigm

In this new approach (Energy Health Care) that I am going to teach you today, people can consistently get amazing results without any concern about whether or not their testing is accurate, or which reflex points to use or where to start, AND DO IT ALL IN 60

SECONDS, including on themselves, using just five muscle tests and a simple pointer laser.

Prevention - Think of Brushing your Teeth every day

You can do a powerful daily general balancing for preventative reasons just like you brush your teeth for preventative reasons.

People don't wait until they have pain before they care for their teeth. Why wait until you have pain before you care for your life energy?

If preventing the accumulation of plague on your teeth is important, than certainly preventing the accumulation of energy blocks (internalized stress) is even more important.

But if brushing your teeth was a complicated and lengthy procedure, and people were uncertain that they were doing it properly, how many people would be doing it at all? Sadly, that is the same challenge we have had with Touch For Health, and thus our slow growth.

The K.I.D.S. Approach

An idea will spread far more rapidly if it is simple and duplicable. K.I.D.S. is an acronym for **Keeping It Duplicable** and Simple, which is exactly what Energy Health Care was designed to be.

Energy Health Care is a super simplified version of Touch For Health that uses a simple pointer laser, only five basic muscle tests (renamed to make them easier to remember) and a SINGLE correction, yet without sacrificing the great results you are probably used to.

Energy Health Care was created to be SO SIMPLE that it can be taught and mastered in a few hours by anyone, giving a person a skill that they can use daily for the rest of their lives. The entire workshop is eight hours, and includes extensive background information on the theory of energy balancing, how to master muscle testing, ESR, psychological reversals, dyslexia, allergies, food and supplement testing and plenty of practice time.

The 52 page manual for the class is available for free to anyone at

www.EHealthCareWorkshop.com

(People are strongly encouraged to also purchase the TFH manual as a back up reference.)

I have been using this system of Energy Health Care for many years and have been

teaching this class on an average of one per month (10-40 students per class) for over two years, with phenomenal results consistently, not only when I do the balancings, but when others do them.

EASY to become an Instructor

To accelerate the spread of this simple system, I encourage everyone to teach the class themselves. To be certified to teach, they only are required to take it twice and agree to follow them EHC manual which they can copy freely.

Then they can certify others to teach the same workshop after any of their students have taken it twice from any certified instructor. I also have the entire workshop on video or DVD (6 hours) so that it does not morph or devolve into something else.

The rest of this paper consists of selected excerpts from the 52 page manual.

The five muscles we use in Energy Health Care are representatives of and surrogates for all fourteen acupuncture meridians. The page numbers in the following table refer to the TFH Manual.

#	Muscle Test Name	Latin Names used in TFH manual	Systems Associated With This Muscle
1	"Penguin"	Latissimus Dorsi muscle (pg45)	Immune System, Blood Sugar
2	"Knee Slapper"	Anterior Deltoid muscle (pg89)	Gall Bladder
3	"Down and In" or "Fig Leaf"	Supraspinatus muscle (pg32)	Brain, Emotional State
4	"Chicken Wings"	Teres Minor muscle (pg79)	Hormonal System, Thyroid, Adrenals
5	"Down and Out"	Pectoralis Major Clavicular muscle (pg37)	Stomach, Emotional Stress

Using a Laser

The common red (helium-neon) "pointer" laser shining directly at the body can be used to stimulate various types of reflex points, such as: neuro-lymphatic, neuro-vascular and acupuncture points.

The laser can also neutralize the stressful effects of toxins (pesticides, from insect bites, etc.) and allergens, including metal touching the body. It can also help alleviate many skin problems, scar tissue and moles, accelerate

healing of injured tissues, and double the potency of supplements. According to *Science News*, Oct. 5, 2002, "Laser equipment can reduce tumors, blood loss, pain, healing time and infections."

Why the Laser Works

The laser operates at a frequency of about 635-645 nanometers, which is also the basic frequency of the human body. Because of this fact, it is naturally therapeutic. According to Richard Gerber, M.D., in his book,

Vibrational Medicine, the Soviets were doing research with the helium neon (red) laser on acupuncture points back in the '70's, and even used Kirlian body scanners before and after to assess the energy states of the acupuncture points. He further states that energy introduced into the acupuncture meridian system with a laser (or sound, needles, electrical currents and even finger pressure) promotes the healing of diseases.

According to Dr. Sheldon Deal (one of my personal teachers), the author of *Advanced Kinesiology*, a laser will do in seconds what an acupuncture needle takes 20 minutes to do. The laser releases blocked energy to flow through the acupuncture meridians. It sends a surge of healthy energy down the energy pathways, clearing out the blockage like a plunger does when used on a clogged toilet.

Mayo Clinic Laser Safety Study

Researchers at the Mayo Clinic in Rochester, Minnesota, evaluated commercially available class 3A laser pointers having powers of 1, 2, and 5 milliwatts (mW). To test the lasers, the researchers used three human study participants who agreed to have the laser beam directed at their eyes for a period of 15 minutes each. All of the participants had previously been diagnosed with eye cancer and were scheduled to have their eyes removed in the near future. "Other than transient after-images that lasted only a few minutes, we were unable to document any evidence of damage to any structures of the eye," according to Dr. Dennis M. Robertson and colleagues. Similar after-images can occur after having a flash photograph taken.

"Our findings support the contention that the potential for laser pointers to cause eye damage has been exaggerated" the authors write in the November/December issue of the *Archives in Ophthalmology*. "This is a valuable study that documents how difficult it is to cause injury with a laser pointer," said Dr. Martin Mainster, a spokesperson for the American Academy of Ophthalmology, in an interview with Reuters Health. "The fact of the matter is that commercially-available laser pointers are a very weak light source," he added.

The picture on the following page shows the K-27 acupuncture points (just below the neck area) and the hypothalamic reset points (on the face) as the small circles. Just shine the laser on these points for about 1-2 seconds each. The ESR Areas are also shown in this picture (the larger white ovals located on the forehead), but we will use finger tips on them.

Doing the Correction



Have the person place the fingers of one hand around their navel, and the other hand on their heart, as in the photo above. Ask the person to focus on their physical heart and fully re-experience a time when they felt deeply appreciated. It usually helps to have them visualize breathing through their heart area as well.

Next, hold the ESR points and balance the K-27 points and Hypothalamic Reset points with the laser. This inputs the changes into the central nervous system, brings most of the meridians directly "on line" with the changes, and boosts the flow of communication between the nervous system and the meridian system. It also very effectively "grounds" the body's electrical system and links the heart strongly into the balancing, while concurrently clearing out emotional residue related to the areas and issues being balanced.



Kidney 27's and the Hypothalamic Reset Points (Acupuncture Points)

Location	Name of Point
Between the end of the collarbone and the top of the sternum at the base of the throat (one on each side). (Have the person place the fingertips of one hand around their navel as a "grounding" point, and the other hand on their heart, all the time that you are using the laser.)	K-27, The end of the Kidney Meridian (one on each side). This is referred to as "Switching points"
1/2 inch below the middle of the lower lip	CV-24, End of the Central Vessel Meridian
1/2 inch above the middle of the upper lip	GV-27, End of the Governing Vessel Meridian
Nose- In the "laugh line" 1/2 inch from the sides of the nose	LI-21, End of the Large Intestine Meridian
Eye - 1/4 inch below the center, on the bone	ST-1, Beginning of the Stomach Meridian
Eye - inside corner next to the nose	UB-1, Beginning of the Urinary Bladder Meridian
Eye - outside corner	GB-1, Beginning of the Gall Bladder Meridian
Eye - end of the eyebrow	TW-23, End of the Triple Warmer Meridian
Ear - just in front of the middle of the ear, in the indentation created when you open your mouth	SI-19, End of the Small Intestine Meridian
Ear - Entire area inside of the ear	Extra Auricular points

Balancing Yourself

You can do a general or goal balancing for yourself without even needing a partner! Simply Assess (test) your muscles, Correct using the laser (using a mirror can be helpful to make sure you are on the points), and Test (reactivate) your muscles again. Your testing does NOT need to be accurate for this to work! Remember to end with the cross crawl and humming.

Targeted or "Goal" Balancing

Balancing for what you specifically WANT

You can do an energy balancing for whatever you want as a specific goal. This can be anything (physical, mental, spiritual, etc.). First, though, you may want to do a general balancing (without a specific goal) so that you have all muscles locking in place. This is recommended because it gives you a "base line," but it is not necessary to get results.

Goal Balancing for Physical Concerns

Select a health concern or problem to address. It is preferable, though not necessary, to convert it to a positive statement. This statement will describe the ideal outcome of the balancing as if it had already happened.

Put the goal in sensory-based terms \hat{u} see, feel, taste, hear, and smell \hat{u} and make it as detailed as reasonably possible. When the person comes up with a goal, have them state it out loud so you can help to verify that it's a totally positive statement. The alternative to a verbal goal is to do a "physical goal" by doing Circuit localization (explained on the next page). For best results, create both a verbal goal AND Circuit locate at the same time.

1. Start by asking the person, "**What do you want?**" It is important to have *them* come up with the wording because it when is in *their* words, it will be more effective. *Also find out what difference it would make for them to get what they want and include that in the goal by tagging on a "so that" phrase. E.g. "so that I can walk up stairs, or hike, etc."*

Here are two examples of converting a negative problem to a positive statement/goal:

Convert this	To the following:
"I have back pain	"My back is strong and stable, moves freely and supports me so that I can...."
"I have a headache"	"My head is clear and comfortable, so that I can ..."

2. Have them rate the problem from 0 to 10 (0 is no problem and 10 is the worst it can be).

3. After the person says their goal statement out loud, test a muscle. The muscle should unlock, because the goal is inconsistent with the way things currently are -- we have not done the balancing yet. It is like saying a lie, so it creates stress that creates unlocking.

4. Do an EHC balancing (**Assess, Correct, Test**) finishing with a few seconds of humming and cross crawl.

5. Have them rate the problem again on the 1 to 10 scale to see how much it improved. Do the laser points again if you are not satisfied with the results and/or do more ESR.

Circuit Localization (CL)

If you put your hand (like a probe) or they put their hand on an area of the body that has stress, then muscle test; the muscle will unlock. This "locates" a circuit where there is blocked energy. E.g. if you "circuit locate" (CL) over the heart or liver and the muscle unlocks, you know there is stress in that area. Now you can do a regular balancing for that part of the body, either with your hand in place the whole time, or by doing a "Pause-Lock"

Pause-Lock (PL)

Pause-Lock (PL) is a way to keep a person's system focused on a particular concern while you go through the balancing process. To do a PL, have the person being tested focus on the problem or do a CL, and spread their feet apart to shoulder width. This holds or locks in the distorted energy pattern into the hip joint until they resume close that joint.

Stacking Multiple CL's

You can stack multiple CL's into the same balancing by transferring the data the PL is holding into another form kind of PL that uses the TMJ (jaw joint). E.g. CL your liver. After you do a PL, CL another part of your body, e.g. your heart. PL this by opening your jaw as wide as you can. This captures the data for both CL's. Disengage the hip PL by putting your feet back together and immediately spread them apart again (the hip PL). Close the jaw. Add another CL, such as your pancreas and PL that with the jaw, which now holds the information for all three CL's. Switch that to the hip PL and close the jaw joint (TMJ). You can keep stacking as many as you want by going back and forth. Then do the balancing.

Goal Balancing for Emotional Concerns ("Energy Psychology")

Non-physical issues are often based on fear or anger, which are the emotional components of the "fight or flight" dynamic that goes into operation whenever you are under stress. Emotional concerns can also involve grief, sadness or depression.

The cause of ALL negative emotions is a disruption in the body's energy system.

Goal Balancing Examples for Non-Physical Concerns

There are hundreds of issues one can address in balancing. Here are just a few examples, including how to convert some of them into goals:

1. Concern (anxiety about) for what other people think of you
Convert to: "I am fine with whatever someone thinks about me"
2. Fear of not being important and worthwhile (most people do not)
Convert to: "I am important and worthwhile" (you could add, "even when ... happens")
3. Fear of being stupid or dumb, or not knowing or having the right answer

4. Fear of not being good enough (for yourself, parents, spouse, God, etc.)
Convert to: "I am capable, even when I make mistakes."
5. Fear of taking risks or getting hurt
Convert to: "I enjoy adventure" or "I am comfortable in taking risks."
6. Not being able to let go of tension or anxiety (vs. being relaxed and calm)
7. Your appearance (your face, height, stomach, legs, thighs, whatever)
8. Liking or accepting yourself
9. Your gender; issues about sex
10. Concerns about your future; feeling hopeless or lost
11. Not trusting men (or women) or a certain person
12. Not feeling loved by _____ (a parent, spouse, friend, God, etc.)
13. Not being able to forgive someone (including yourself); letting go of resentment
14. Bitterness or resentment (not able to forgive yourself, parent, spouse, friend)
15. Feeling good about yourself even when _____ (describe; e.g. disrespected)
16. Phobias: fear of heights, spiders, snakes, bugs, open places, water, etc.
Convert to: "I enjoy being up high (or in the water, around bugs, etc.)"
17. Needing to be right (i.e. fear of being wrong)
18. Fear of rejection or failure
19. Feeling overwhelmed
20. Tendency to be harsh or demanding
21. Getting upset when things don't go your way (thinking that they are supposed to!)
22. Being critical or judgmental of a certain person or yourself (we all do this)
Convert to: "I appreciate and accept others (or myself) the way they are"
23. Needing to control or dominate others (or to avoid being dominated)
24. Letting go of an injustice or something in the past
25. Your boss, job or business
26. Concern about finances
27. Being indecisive

28. Lack of confidence in a certain area

29. Feeling like you need to be perfect

Convert to: "I am significant, important and valuable even when I am not perfect or make mistakes," or "I no longer need to be perfect."

30. Your biggest stress at the moment

Convert to: "I totally accept this challenge (describe it) and am at peace with it"

Some of these issues are so deep they will need multiple balancings, like peeling multiple layers off of an onion. You can also rebalance on deeper levels by making it part of the set-up: just state that you are testing and balancing on deeper levels. Though highly recommended, it is not essential that you always convert the issue to a positive goal.

Testimonials

"I've seen my stress level drop, my headaches disappear, and my energy level increase. This workshop was worth several thousand dollars to me."

Michael Jacobson (Monroe, Washington)

"Over the last year I suffered from lower abdominal inflammation and nothing the doctors could do helped. I lost weight, energy, and strength. I was vomiting twice a day. After a one minute balancing, I regained my strength and the vomiting disappeared permanently."

Brian Chappon (Idaho)

"I like having the ability to help people feel better right away. It is so easy to do."

Mary Ann Dory (Oregon)

"Three years ago I was hit by a car at 75 mph and knocked 22 feet. Since that time I have been seriously dyslexic. I am a pilot and twice during my FAA exam I started to land the airplane the wrong direction. After receiving Energy Health Care, my brain hemispheres were reintegrated. I could instantly read again, and my mind and body are finally flowing together again. Also, Energy Health Care relieved my back pain more than anything any of the doctors did."

Jerry Brandt (Minister in Tampa, Florida)

"The energy health care improved my hand and eye coordination immensely. I am not impacted by high places any more. What a difference! I have started to read in groups of words and it's becoming easier and easier. My retention is radically improved."

Jerry Crick (Pastor in Denver)

"It's been two weeks since we took the energy health care workshop. My main concern in coming was to be able to avoid surgery on my ankle, which I had broken over a year ago. Jerry and I have been giving each other daily energy health care, I do feel more strength and less pain in the ankle. Here are some of the other benefits I have experienced since the workshop, most of which were unexpected:

"Smoother moister skin

"Decreased size in the veins in my hands and less wrinkling

"Lessening of TMJ symptoms

"More energy to cope with daily responsibilities of helping raise a toddler (my grand son)

"But most significant to me is that my body is beginning to feel straighter. This must have been affecting my self image, because I didn't realize that I had stopped feeling pretty. I feel pretty again."

Barbara Crick (Denver, Colorado)

"Since Yvonne and I took your workshop, Yvonne has been able to be more focused with greater cognition and I've been more energized. For the past two years, I've struggled to get things done. I've simply had no energy. Since the workshop I am now aggressively tackling things that I simply wouldn't have even thought of before because I have the ENERGY! Thanks Ray!"

Dick McDaniel (California)

"This *Energy Health Care Workshop* will help thousands and thousands of people to have better, healthier lives. It is quick, safe and easy. It will help you have greater health and reach more of your goals. I urge all of you reading this to balance your energy daily."

John F. Thie, D.C. (Author of *Touch For Health*)

Couples, Communication and Kinesiology

by Warren Jacobs, MD

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Communication is essential in the quest for peace, harmony, efficiency, satisfaction and in affording a lasting quality relationship. This is true for nations, religious groups, government agencies, family members and certainly as well for couples.

Miscommunication is more commonly encountered than good communication especially when one or both parties is under stress. Who among us has not experienced the sad event of loss of communication under stress? This problem is universal regardless of education, culture, gender, or station in life.

Understanding what it is that blocks communication and the use of kinesiology in regaining effective communication is precisely what this presentation is all about.

Now, the format that is most comfortable for me is one of demonstration - an experiential process rather than a didactic lecture. This method is much the same as I use in my daily practice with couples. For some reason this work with couples has in recent years become a large part of my practice. This brings to mind the adage, "We teach what we need to learn." My wife, Phyllis, would possibly approve of that quotation. First, I have two questions to ask of each of you

This works best for me with a male and female kinesiologist working together as co-facilitators so I am now going to ask Renate Kraft of Basel to come up here and join me. Now, I ask for a couple to volunteer and come forward at this time - a couple who wish to improve their communication skills.

Thank you for your courage in coming forward.

First - I have two questions that I would like to be answered by each of you.

1. What would you like to happen in the time you are up here together?

2. What would you like different in your life together?

Now I listen to the answers. Does each answer the questions asked?

I repeat what I heard in the answer and check that I have heard correctly. This may appear to be tiresome but actually is basic to this exercise. Making assumptions as to the meaning of the remarks of the other is an all too common pitfall leading to miscommunication. So the watchword is ASSUME NOTHING. Prior to responding from what is within myself, I first confirm what I have understood the other to have said. This is to be certain that I have heard correctly. Only then I proceed with my input.

Let me digress for a moment to suggest why I hold this exercise to be of such importance.

We all come together with the accumulated experience of our lives to that point in time. This collected experience, with its highs and lows, its joys and its sorrows results in what can be called an "attitude" relative to the experience of the moment. We relate to the other on the background of this "attitude". Some one once said "attitude" is more important than the facts, look and listen. Furthermore, we may not be aware of this "attitude" and even more probable is that the other is even less likely aware of this attitude. What a setting for miscommunication, confusion, distrust, suspicion and disharmony. This attitude with its source hidden from the other and often from ourselves is the energy driving us apart. What we can do to improve this state of affairs is what is to follow.

This often hidden energy is what drives our response. This is often a somewhat

bewildering, frustrating and irritating situation for the one who has just spoken. This is the place to stop, look and listen. Seek clarification. Ask, "What did you hear me say?". You might say, "May I check with you to see if I heard you correctly?"

Can you see how it is that miscommunication is so common, especially when we are stressed? I suggest this is preferable to responding to what you feel you heard. What we feel we heard is all too often provoking a response in us that is defensive polarizing, even attacking - all very inflammatory. These "gut" responses when regularly repeated can result in isolation, distancing, bedlam, and in the extreme a rupture of the relationship. Is this what we want?

Perhaps this is a good point to stop and see just what it is that we want? Remember, ASSUME NOTHING. "I want a closer more loving, intimate, passionate, harmonious relationship with X." MT (Muscle Test).

If this tests weak, you might go on with, "I am not sure that I want a closer, more loving, intimate, passionate harmonious relationship with X." MT

Should this test weak, this opens up a very different line of questioning, and so we proceed with questions to uncover just why the person is unsure such a relationship is wanted. You might ask just how we know to go in this direction. Actually the clue for the needed direction is provided by the patient. **The job of the kinesiologist is to be in touch with himself and in touch with the client or patient.** To me, being focused on a complex structure or methodology is a hindrance to this "being in touch". I prefer to work with a very simple method and some basic principles of kinesiology as I am attempting to demonstrate here. Returning to the process at hand - why I am unsure of wanting such a relationship.

I am unsure because of:

something I heard or saw in a book or a movie MT

something I saw in the life of others MT
or something I experienced in my own life MT

If something in my own life:

with this person here before me MT

with a relationship with a friend MT

with someone in my family MT

If in the family holds

in the family of origin MT

in my present family MT

If family of origin holds

in my own generation MT

in the older generation MT

in the twice older generation MT

If in the older generation holds

male MT

female MT

mother MT

father MT

MT as appropriate

What is most often found is that the blocks to having the desired relationship are coming not from the present situation at all. "We all come to our present relationship with a collection of fears, angers and resentments from the past. What we have in our present relationship is the opportunity to remove these blocks from the past and to get on with our lives." -after Hendricks

As we consider communication difficulties between individuals what I often find to be of great help is to first establish the purpose of our communication efforts. That is, to establish that our objective is to have a dialogue rather than a debate.

This is so basic, but unfortunately is lost sight of in the heat of the moment when there is conflict. Now, conflict is not really the problem. It is natural to have conflict because we are all somewhat different. Each of us views the world from a perspective that is factored by the accumulation of all our experience to that moment in time and this attitude is naturally different for each of us. I repeat - CONFLICT IS NOT THE PROBLEM. Tools, or BEING WITHOUT THE TOOLS to resolve conflict is more the problem.

What follows now is some thoughts in progress about DIALOGUE VS. DEBATE.

DIALOGUE

The goal of dialogue is increased understanding of myself and others

I listen with a view toward understanding.

I listen for strengths so as to affirm and learn.

I speak for myself from my own understanding and experience.

I ask questions to increase understanding.

I allow others to complete their communications.

I concentrate on others' words and feelings.

I accept others' experiences as real and valid for them.

I allow the expression of real feelings (in myself and others) for understanding and catharsis.

I honor silence.

DEBATE

The goal of debate is the successful argument of my position over that of my opponent.

I listen with a view toward countering what I hear.

I listen for weaknesses so as to discount and devalue.

I speak based on assumptions made about others' positions and motivations.

I ask questions to trip up or confuse.

I interrupt or change the subject.

I focus on my own next point.

I critique others' experiences as distorted or invalid.

I express my feelings to manipulate others; I deny their feelings as legitimate.

I use silence to gain advantage.

Once we have established that the two persons involved are actively moving toward better communication and have their goal of a more harmonious, mutually satisfying relationship (this confirmed by muscle test) we review the above contrasts between dialogue and debate.

Now we can engage in the exercise of communication between the two. We begin

with one stating what he would like different in the relationship. This person speaking is on send and hopefully the other, the listener, is on receive.

The kinesiologist monitors the communication and intervenes when appropriate

Improving Vision Naturally

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Abstract: This article is designed to be used as a reference, and provides background information on the anatomy of the eye as well as pathophysiology concerning vision. It includes information on homeopathic intervention and proper nutrition to maintain and enhance vision. The categories of nutrition which have been addressed are nutritional supplements and herbs. The presentation will be a workshop of exercises including acupressure points, which are designed to improve vision and prevent what we generally consider to be the natural deterioration of our eyesight.

Although vision is considered by most persons to be the most cherished of the five senses, most of us do not do enough to preserve our sight because we have accepted the notion that our vision should deteriorate over time. After much research, I have concluded that we DO have power over this process of deterioration. Retaining our youthful eyesight requires maintaining a healthy lifestyle, as well as taking a few minutes per day to do some simple exercises.

It is important to note that in Chinese medicine visual disturbances are often equated with congested liver chi. Dark circles under the eyes indicate a malfunctioning liver. In addition to the energetic connection between the liver and the eyes, a healthy functioning liver is necessary for adequate digestion to provide the proper nutrition to support the eyes and allow for good vision. Balancing the energy in the liver is the first step in improving vision, regardless of the pathology.

A review of the anatomy of the eye is necessary to understand the pathophysiology (see Illustration 1). The eye consists of three layers. The outermost layer is comprised of connective tissue and forms the sclera, known as the "white of the eye". In the front the outer layer becomes the cornea, which is the transparent covering over the colored part of the eye known as the iris. The middle layer of the eye is the blood vessel enriched part called the choroid, which in the front forms the iris. The iris is a muscle which has a central opening known as the pupil. The pupil

appears as a large black circle which varies in size as the iris contracts and expands to modulate the amount of light entering the eye. Behind the iris the choroid forms a muscular appendage known as the ciliary body. The ciliary body is where some of the fluid of the eye is produced. Behind the pupil lies another structure which should be transparent and is known as the crystalline lens. The ciliary body is connected to the lens by ligaments. Contraction of this ciliary muscle changes the shape of the lens which in turn alters the angle at which the light enters the eye. This process serves the purpose of directing the light so that it focuses on the back of the eye regardless of the distance from which an object is being viewed. The inner layer of the eye is known as the retina, and is located at the back of the eye. It is made up of the photoreceptors known as the rods and cones, named for their respective shapes. Their function is to turn the light waves into nerve impulses to be interpreted by the brain as visual images. The cones are concerned with daytime vision, central vision and detailed vision, and the rods are concerned with night vision, peripheral vision, and contrast. The cones are situated in a higher density in the central portion of the retina, and the rods are more abundant in the periphery. There is a central portion of the retina which is known as the macula that contains a high concentration of photoreceptor cells, especially cones. The central pit of the macula contains only cones and is known as the fovea centralis. (refs 1, 13, 20, 22)

ILLUSTRATION 2

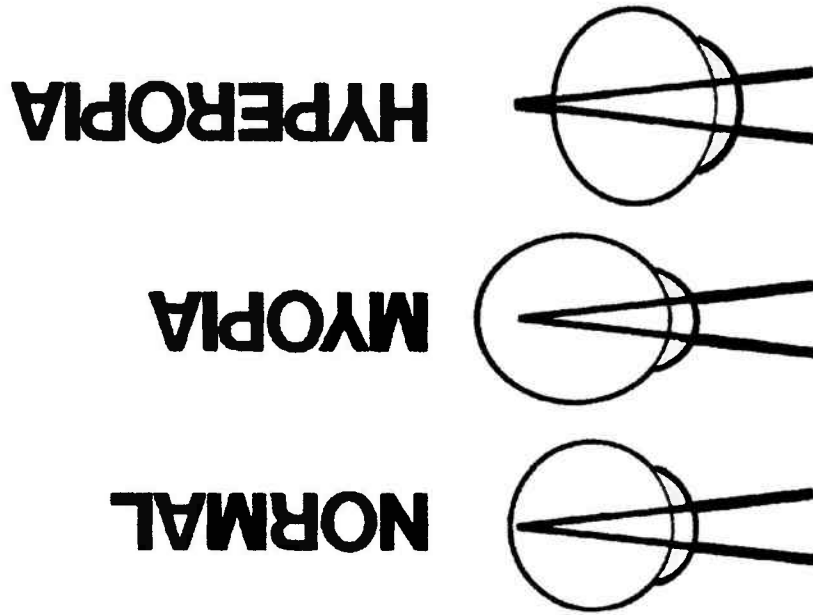
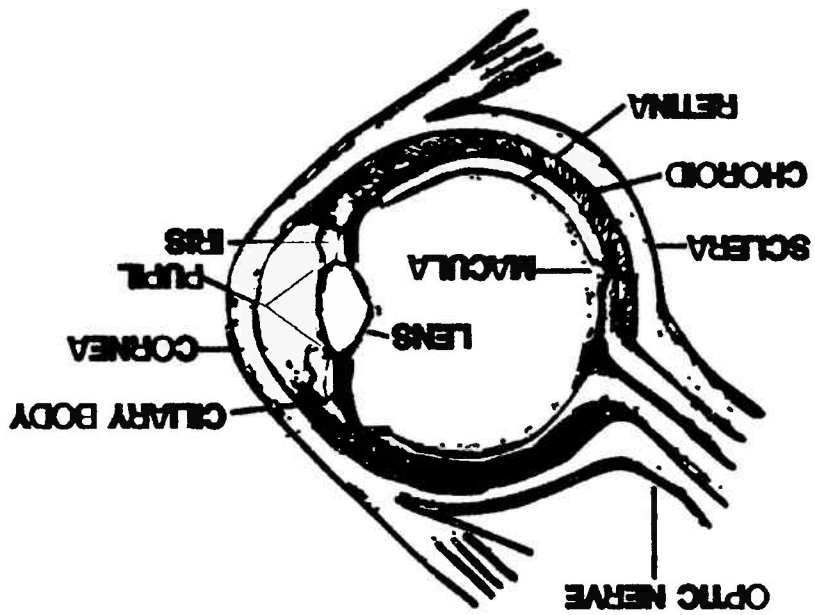


ILLUSTRATION 1



The measure of visual acuity is most commonly done with a Snellen chart, which is the familiar chart with the large E at the top. 20/20 vision means that you see from 20 feet away what a normal person would see from 20 feet. 20/30 vision means that you see from 20 feet away what a normal person could see from 30 feet away. There are persons with vision considered to be better than normal, such as 20/15. (ref 1)

The two most common visual abnormalities are **myopia** and **hyperopia** (see Illustration 2). Myopic persons can see well up close but not from a distance. This condition is also known as nearsightedness. It is caused by the eyeball becoming elongated, which causes the light to focus in front of the retina. According to Sussman (ref 20), myopia increases the likelihood of retinal detachments, cataracts, and glaucoma. It is believed that myopia is caused by tense eye muscles which eventually distort the shape of the eye. Poor nutrition can make the eye more susceptible to the effects of these tense muscles. (refs 1, 20, 22)

Hyperopia, also known as farsightedness, is the opposite of myopia. This is a condition in which the light focuses beyond the retina. Persons who are hyperopic can see well from a distance, but not up close. Their eyeballs are flattened in appearance. Hyperopic individuals are more likely to develop difficulty with accommodation, which is an inability to change the shape of the lens to assist in the focusing of light. This eventually will necessitate correction for both distant and near sight. It is also believed that tense ocular muscles leading to distortion of the shape of the eye causes this condition. (refs 1, 20, 22)

Visual disturbances can also be caused by a condition known as **astigmatism**. This is caused by an uneven curvature of the cornea, which leads to the rays of light from different directions entering the eye at various angles and therefore focusing at different places in reference to the retina. A small amount of astigmatism can be compensated for by the layer of tears over the cornea. More problematic cases can be corrected with lenses. (ref 1)

Presbyopia is a condition that often begins to occur in middle age and involves the loss of

the ability of the lens to change shape. Changing the shape of the lens is necessary to focus the point of convergence of the light rays which enter the eye. It is generally thought that presbyopia occurs from a lack of proper nutrition to the lens. The lens contains no blood vessels, and relies on the ciliary body and aqueous solution (the liquid in the front of the eye) to supply it with nutrition. If the lens continues to deteriorate, cataract formation ensues. (ref 1)

Cataracts are by definition an opacity of the lens of the eye. They are caused by free radical damage to the proteins of the eye causing them to clump together. Traditionally, surgical removal of the lens is the treatment for a cataract. Sometimes an intraocular lens is inserted. Correction post cataract extraction can also be achieved through glasses with aphakic lenses or through contact lenses. The intraocular lens is shaped to either accommodate near or far vision, and the opposite is achieved through external corrective lenses. However, nutrition and homeopathy have been shown to not only prevent but to reverse cataracts. (ref 1)

Another condition of the eye which can gradually lead to blindness is macular **degeneration**. According to Abel (ref 1), the macula occupies only about 2% of the visual field, yet because it is so highly concentrated with cones it stimulates about half of the brain's visual cortex. This area is also known as the "yellow spot" due to the yellow pigment from carotenoids. Under the retina is a layer called the retinal pigment epithelium. Macular degeneration involves a degeneration of the macula and this layer beneath it. It is believed to be caused from an accumulation of metabolic wastes resulting from improper nutrition. The symptoms include wavy appearance to parallel lines, blurred vision, or a dark spot in central vision. Genetics is a factor in macular degeneration, but the disease process can be slowed considerably with proper nutrition. (refs 1, 13)

Retinitis pigmentosa is also a degenerative disease of the retina. It is usually hereditary and leads to a gradual loss of vision. It has been shown that increased cortisol levels (which are produced in the adrenals in response to stress) have been associated with

retinitis pigmentosa, and that improvement is noted with administration of anticortisol drugs. Stress reduction is therefore a necessary component of treatment of this disease. This is not considered one of the diseases of old age, as it can be detected in young children as well. The compromised vision begins with the peripheral fields and progresses to include central vision. A cataract may also develop. Dietary supplementation for this condition has shown to be helpful. (ref 1)

Diabetic retinopathy is becoming more common as the population in America consumes more and more sugar. The rate of diabetes is on the rise and the age of onset is decreasing on the average. Diabetic retinopathy is caused by the deterioration of the blood vessels which begin to leak into the vitreous (the liquid in the back part of the eye). This free floating blood blocks the light from entering the eyes, casting shadows on the retina and causing large black spots in the vision. If there is inadequate oxygen to the eye, the body responds by growing new blood vessels which usually tend to be fragile and leak more. Sometimes the blood is absorbed without intervention. Other times this bleeding can lead to scarring, causing the retina to detach from the blood vessel rich choroid. This causes a permanent blind spot in the vision and the detachment has to be repaired surgically. Another surgical intervention for diabetic retinopathy is a vitrectomy. The indication for this surgery is when the vision is substantially impaired by the shadow casting effects of the blood. The surgery involves removing the vitreous from the eye and replacing it with a mild salt solution called normal saline. (refs 1, 10)

Adequate nutrition is absolutely necessary for good vision. One classification of nutrients that preserve sight is the antioxidants. These are vitamins and other nutrients which counteract the effects of free radicals. Free radicals are oxygen-containing compounds produced in the body and utilized by the body to sustain life. However, due to the configuration of the oxygen atom, even when oxygen is combined with other atoms there is a free floating electron in the outer shell. Electrons prefer to travel paired with another electron. These free floating electrons in the

oxygen-containing compounds tend to gain partner electrons by scavenging electrons from healthy tissue, causing damage to the tissue. Antioxidants sacrifice electrons to these free radicals to prevent damage. The three vitamins that are considered to be antioxidants are Vitamins A, C, and E. (refs 1, 19)

Vitamin A is not only important to protect eyes from free radical damage, but has functions specific to the eye. In preventing free radical damage, it is recommended to both prevent and treat macular degeneration. Vitamin A is a primary nutrient for the rods which are concerned with night vision. It also is necessary for the production of tears, which serve to lubricate the eyes. Vitamin A is a fat soluble vitamin which means it is stored in the body, primarily in the liver. Fat soluble vitamins can become toxic in large doses. According to Dr. Abel (ref 1), a toxic level would be reached by taking at least 30,000 IU every day for a year. (refs 1, 13, 18, 19, 20)

The precursor to Vitamin A is **beta-carotene**. A safer way to assure an adequate intake of Vitamin A is to consume foods rich in carotenes. Other carotenes are also necessary nutrients for the eyes. The other two most important ones are **lutein** and **zeaxanthin**, which provide the yellow pigment found in the macula. This pigment serves to protect the macula from the effects of ultraviolet light. (refs 1, 19, 22)

Vitamin C has been found to be important to many aspects of vision. Vitamin C helps protect the lens from free radical damage and has been shown in a 1998 study done at Tufts University in Boston to decrease the rate of cataracts by 77 percent. It is also useful in building collagen which strengthens the walls of the blood vessels which nourish the retina and other parts of the eye. Vitamin C can be used to allow the cornea to heal following injuries. An optometrist from New Jersey named Dr. Ben Lane has found a correlation between low levels of Vitamin C and increased intraocular pressure. Vitamin C has also been shown by him to decrease the level of eye fatigue. In reducing free radical damage, it also helps prevent and treat macular degeneration. As a water soluble vitamin, Vitamin C is not stored in the body, and is readily excreted. In excess, Vitamin C can

cause bloating, gas, and/or diarrhea. (refs 1, 18, 19, 20)

Vitamin E is a fat soluble antioxidant vitamin which is found in both the retina and the lens. One of its functions is to preserve the essential fatty acids in the cell membranes. It also has been shown to reduce the incidence of cataract formation and strengthen the blood vessels. Inadequate levels of Vitamin E leads to the reduction of the pigment in the retina, causing decreased visual acuity. Since free radical damage has been shown to be a contributing factor in macular degeneration, Vitamin E is also one of the recommended supplements to both prevent and treat this disease. (refs 1, 18, 19, 20)

Another classification of nutrients necessary to support vision is amino acids. These are the building blocks for proteins. The essential amino acids are not produced in the body, and therefore must be included in the dietary intake. (ref 1)

One of the most important amino acids to promote healthy vision is **taurine**. Since it can be produced in the body from cysteine, taurine is not considered an essential amino acid. It is found in abundance in the retina and is thought to protect it from damage from ultraviolet light. Taurine levels are found to be deficient in diabetics so it is hypothesized that low levels may contribute to diabetic retinopathy. It is also believed that age-related macular degeneration is at least in part due to taurine deficiency, and it has been shown that supplementation can improve this condition. Taurine is used at the Beechwold Natural Clinic where my practice is located in a nutrient intravenous solution formulated specifically for improving vision. (refs 1, 18, 19, 20)

Another amino acid which should be considered important for this topic of discussion is **N-acetyl-cysteine**, or **NAC**. This amino acid boosts the production of glutathione, an enzyme necessary for good vision. (refs 1, 19)

Enzymes are complex proteins produced in the body for the purpose of catalyzing biochemical processes. These act as the body's main antioxidants.

The most significant enzyme for vision is **glutathione**. It has been found to be abundant in healthy eyes, but deficient in the presence of cataracts. It has also been found to reduce the effects of macular degeneration. This enzyme is composed of the three amino acids cysteine, glutamine, and glycine. It is not recommended that the supplement glutathione be administered directly, but rather be obtained by consuming a number of nutrients which contribute to glutathione production. Those may include selenium, alpha lipoic acid, NAC (N-acetyl-cysteine), and Vitamin B-2 (riboflavin). (refs 1, 19)

A classification of nutrients also considered important for good vision is minerals. These are not produced in the body but are necessary for many processes that occur within the body. Although there are numerous ones which could be considered necessary for vision, only the most important ones will be presented.

Calcium is one of the minerals which contributes to healthy eyes. Calcium levels have been demonstrated to be lower in children with myopia, and increasing the intake can alleviate the symptoms. Not enough calcium can also lead to the presence of floaters and eye twitching. (refs 1, 19)

Magnesium is another important mineral necessary to maintain good vision. It has been demonstrated that supplementing with magnesium improves the vision of persons with glaucoma. Diabetics with higher magnesium levels are less likely to develop diabetic retinopathy than those with low levels. (refs 1, 19)

Selenium is important as a precursor to glutathione. Deficiencies in selenium have been shown to promote cataract formation. Selenium also helps prevent macular degeneration. (refs 1, 19)

Zinc is a mineral which has been demonstrated to be crucial in eye health. Zinc levels are found to be higher in the retina than in any other organ in the body. Deficiencies cause visual disturbances, and supplementation improves vision in persons with macular degeneration. (refs 1, 19)

There are several herbs that have been shown to improve vision. **Eyebright** is the most popular of these, and is considered the universal eye tonic. In cleansing the liver, it serves to promote clear vision and strengthens the eye. (refs 19, 22)

Dandelions can be used to improve either myopia or hyperopia. **Dandelion root tea** helps with seeing better from a distance, and **dandelion leaf tea** improves close vision. (ref 22)

Several herbs that help with night vision are **blueberries**, and **bilberry** and **raspberry** teas. Bilberry in combination with zinc and ginkgo has been shown to slow visual deterioration. Bilberry also improves accommodation in both day and night vision. **Parsley** improves day vision by supplying B-2 (refs 19, 22)

There are also several Chinese herbs used to improve vision. **Chrysanthemum**, **Chinese Lychii berries**, and **celosia seeds** all cleanse the liver and enhance vision. Chrysanthemum also clears floaters and aids in blurry vision. Celosia seeds help to reduce cataracts. (refs 1, 19, 22)

Homeopathic remedies are another natural treatment for eye disorders and visual disturbances. These can be multifunctional and will be listed in alphabetical order with effects pertaining to vision. **Calcareo carbonica** Sensitive to light. Dimness of vision, as if looking through a mist. Farsightedness. Easy fatigue of eyes. Cataracts. (ref 11)

Causticum-Drooping of eyelid (right). Weakness of eye muscles. Double vision, improves looking right. Sparks and dark spots before eyes. Objects look large. Cataracts with motor disturbances. (ref 11)

Magnesia carbonica-Black motes before eyes. Eyes feel large and sensitive to pressure. Cataract. Opacity of cornea.(ref 11)

Phosphorus-Sensitive to light. Eyes feel large and stiff. Inflammation of the

choroid. Fatigue of eyes without much use. Pain in bones around eyes. Atrophy of optic nerve. Double vision due to deviation of the

visual axis. Narrow field of vision. Green halo around candlelight. Sensation as if something pulled tightly over eyes, as if everything covered with a mist or veil. Black floaters. Patient sees better by shading eyes with hand. Letters appear red. Colored vision then migraine. Clots in retinal vessels and degenerative changes in retina. Eyes turned outward. (ref 11)

Silicea-Spotted vision. Objects appear pale. Aversion to light, especially daylight. Sharp pain through eyes. Cataract in office workers after suppressed foot sweat. Inflammation of the iris and choroid. Vision confused, letters run together on reading objects, as if in fog. (ref 11)

Sulphur-Inflammation of retina caused by overuse of eyes. Obscure vision like black gauze or motes before eyes. Halo around lamp. Objects seem more distant than they are. Opacities of vitreous. (ref 11)

A Touch for Health Balance will also assist in improving vision. For the sake of emphasis I would like to reiterate that **BALANCING THE LIVER MERIDIAN IS A MUST**. Since tense muscles contribute to myopia and hyperopia and stress is a factor in retinitis pigmentosa, a general balance with stress reduction techniques, (ESRs, metaphor work, or other emotional balances) is in order. A balance will improve digestion and assimilation of food which is necessary for proper nutrition of the eyes. Balancing also improves circulation and lymphatic function to enhance delivery of nutrients to the eyes and removal of wastes from the eyes.

Bibliography

1. Abel, Robert Jr., M.D. *The Eye Care Revolution*. New York: The Kensington Publishing Co., 1999.
2. Bates, William, M.D. *Method for Better Eyesight Without Glasses*. New York: Henry Holt and Co., 1940.
3. Bellevue, James. *Improve Your Eyesight*. Reno, Nevada: Avid Reader Press, 2002
4. Beresford, Dr. Steven M., Muris, Dr. David W., Allen, Dr. Merrill J. Young, Dr. Francis A. *Improve Your Vision Without*

Glasses or Contact Lenses. New York: Fireside, 1996.

5. Boericke, William, M.D., *Materia Medica with Repertory*. (Ninth Edition) Santa Rosa, California: Boericke & Tafel, Inc., 1927

6. Christopher, Dr. John R. *School of Natural Healing*. Springville, Utah: Christopher Publications, Inc.

7. Deal, Dr. Sheldon C. *New Life Through Natural Methods*. Tucson, Arizona: New Life Publishing Co.

8. Goodrich, Janet. *Natural Vision Improvement*. Berkeley, California: Celestial Arts, 1985

9. Gregory, R.L. *Eye and Brain* New York: McGraw-Hill Book Company, 1966.

10. Havener, William, M.D. *Really Need Eye Surgery?* 1975.

11. Homeopathic Study Group Notes-*Cataracts*, June 2002.

12. McCabe, Vinton. *Practical Homeopathy*. New York: St. Martin's Griffin, 2002

13. Mogk, Lylas G., M.D. & Mogk, Maria. *Macular Degeneration, The Complete Guide to Saving and Maximizing Your Sight*. New York: Ballantine Books, 1999.

14. Murray, Michael T., N.D., *Encyclopedia of Nutritional Supplements*. Roseville, California: Prima Health, 1996.

15. Murphy, Robin, N.D. *Homeopathic Medical Repertory*. Pagosa Springs, Colorado: Hahnemann Academy of North America, 1998

17. Quackenbush, Thomas R., *Better Eyesight*. Berkeley, California: North Atlantic Books, 2001.

18. Sardi, Bill. *Nutrition and the Eyes; How to Keep Your Eyes Healthy Naturally*. CA: Health Spectrum Publishers, 1994.

19. Scientists See Sight-Saving Results in New Discoveries Like Lutein and Zeaxanthin

along with A, B, C & Herbs" September 2002, American Council on Collaborative Medicine, Inc., Vol. VIII, Issue 9.

20. Sussman, Martin. *Program for Better Vision*. Berkeley, California: Cambridge Institute for Better Vision, 1998.

21. White, Linda B., M.D., Foster, Steven. *The Herbal Drugstore U.S.A.*: Rodale, Inc., 2000

22. Zuraw, Robert A. & Lewanski, Robert T. *The Inner Secrets Behind Perfect Eyesight, The Art of Improving Vision Naturally*. Troy, Michigan: Taoist Publishers, 1998

Jet Lag and Touch for Health

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Jet Lag can occur following a flight when the energy body lags behind the rapid movement of the physical body in the course of the flight. The "physical body" is the first to arrive at the destination with the "energy body" lagging behind, arriving hours or even days later. During this interim we may experience *Jet Lag*, i.e., a disassociation of our energy body from our physical body. We not only fly around the world, we also fly through time zones. *Jet Lag* wastes our best resources, time and vitality. Every year hundreds of millions of dollars are lost through bad decisions, faulty communication, accidents, and impaired productivity as a result of *Jet Lag*. With the help of the following method it is now possible to avoid the negative effects of *Jet Lag*. In a gentle and simple way one can tap specific acupressure points on the hands, knees and feet.

What is Jet Lag?

Jet Lag is not an illness. It is a special form of electromagnetic impairment that occurs only in situations where one travels at high speed through a series of time zones. As one changes geographic position in relation to the electromagnetic energy field, this impairment is often expressed through symptoms of headaches, indigestion, tiredness and sleep disturbances. These symptoms can last for hours, days or even weeks.

In searching for the scientific basis for *Jet Lag*, many believed the solution to be involved with the sun within the polarity of light to darkness. It is now considered to be more a function of the influence of the electromagnetic waves of solar energy upon our planet. Even at night, in darkness, there is no place on earth that is free of the electromagnetic wave energy of the sun. This constant radiation influences all life on our planet.

The electromagnetic system of the human body was discovered some 3000 years ago. This is known today as the Acupuncture Meridian System. There are 12 main pairs of acupuncture meridians. Each pair of meridians has a right and left member. The influence of the sun on the rotating earth results in a flow of electromagnetic waves through the 12 meridian pairs every 24 hours. When one travels rapidly through different time zones this flood effect either slows or speeds. Our biological clock is then out of sync with the time zone, leading to the phenomenon known as *Jet Lag*.

Traveling east is more of a problem than traveling west. Traveling contrary to the movement of the earth (in relation to the sun) results in a greater change in the electromagnetic system of the human body. The effect is one of speeding time for the traveler. The electromagnetic "flood" moves more rapidly through the meridian system of the body. For example, one can imagine a film that is running at greater than normal speed.

It is easier to travel in a westerly direction, where the movement of the earth relative to the sun is slowed. The impression is that time is also slowed. The electromagnetic flood passes more slowly through the body. As an example, imagine a film that is played in slow motion.

This meridian tapping method is very gentle and risk free, assisting the electromagnetic system while it moves toward your destination. Normally this process of adjustment can take a matter of hours to days depending on the length of the travel and the health of the traveler. By practicing the tapping method this change can be affected more rapidly and in an orderly manner while sitting on the plane. By tapping specific acupressure points, the meridian system can be stimulated

in such a way that upon arrival in the new time zone the body has already adjusted. The new electromagnetic flood effect is also in sync with the body.

What is Jet Lag not?

There are other negative side effects of flights that are falsely attributed to *Jet Lag*. These negative effects can be accentuated by the existing *Jet Lag* even though the roots of these other negative forces lie elsewhere. Traveling in a northerly or southerly direction does not bring about *Jet Lag*. Symptoms similar to those of *Jet Lag*, which may be encountered in traveling north or south are not due to *Jet Lag* but may be due to dehydration, decompression or hypoxia. Recovery from these symptoms may occur rapidly because there is no electromagnetic *Jet Lag* stress involved.

Dehydration often occurs in flight because cabin air typically contains only 9% humidity and therefore is relatively dry. Most flights travel at high altitude, above clouds, where the outside temperature is very low and the humidity of the outside air is also very low. This dry cabin air draws moisture away from the body, negatively affects metabolism, and dries the eyes, lips, and skin.

Decompression and hypoxia result from the lower air pressure at higher altitudes. Most flights are conducted with a cabin pressure corresponding to the pressure normally found at 1800 meters above sea level. At such a low pressure the oxygen saturation of the cabin air is reduced in relation to that at sea level. This results in slowing of metabolism, reduction in stamina, and collection of fluid in the tissues. This can be recognized by how tight our finger rings become and the need to loosen our shoelaces.

Often there is a disturbance in our sleep cycle with *Jet Lag*. One usually adjusts more rapidly to a normal sleep cycle at the destination if *Jet Lag* stress is gone. The greater the distance you travel to the east or west, the greater the change in your sleeping cycle. The act of tapping in this method helps to normalize the sleep cycle as you avoid electromagnetic *Jet Lag* stress.

Jet Lag Tapping

What does Jet Lag come from?

The internal meridian clock, that each of us has, is connected with the time of day. Each meridian remains active for two hours, and then the next meridian comes into play.

When traveling to other time zones, our meridian clock continues to work in a two-hour cycle which no longer fits with local time, leading to the problems of Jet Lag.

What can you do about this?

You can reset your meridian clock. If you are traveling in a westerly direction, you can slow it down or set it back. Traveling to the east, you can speed it up or set it forward by stimulating the corresponding meridian. Tapping the appropriate acupuncture points can accomplish this.

How do you do it?

Ideally every hour you would spend one minute tapping the meridian points that correspond to the local time. However it is not easy to know what the local time is on a long flight. But knowing the local times of departure and arrival and the length of the flight, you can figure this out. Going clockwise around the meridian chart, divide the flying time between the meridian points corresponding to departure and arrival.

Example 1: Traveling in a westerly direction

Flight from Zurich, Switzerland, to Los Angeles

Departure time: 12 noon => HEART meridian

Arrival Time: 2 pm => SMALL INTESTINE meridian

Flying Time: 12 hours

In this case there are only two meridian points between departure and arrival time. Dividing the hourly tapping between them, tap the HEART meridian points every hour for one minute during the first six hours of the flight and the SMALL INTESTINE meridian points for the remainder of the flight.

Example 2: Traveling in an easterly direction

Flight from Los Angeles to Zurich, Switzerland

Departure time: 3 pm => BLADDER meridian

Arrival time: 11 am => HEART meridian

Flying time: 11 hours

In this case there are 11 meridian points between departure and arrival time. Dividing the hourly tapping between them, you have to tap every hour new meridian points, starting with the BLADDER and ending with the HEART meridian points.

Sleep during the flight and arrival

If you fall asleep on the flight and miss the regular hourly tapping, you can catch up with the meridian clock by tapping the points in their proper order one after another without waiting, until you arrive at the meridian that corresponds to the local time.

Once you have arrived at the local time, you can help your body adjust to the new time by continuing to tap the corresponding meridian points at two-hour intervals.

Explorations of the Hologram: A Single Meridian Focus

by Adam Lehman, ND

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Abstract: There are times when a specific meridian of Chinese acupuncture is under considerably more stress than others. It may be beneficial to focus on that meridian as a means assisting its return to homeostatic balance relative to the whole system. Applied Physiology's Can Opener Hologram is a powerful way of focusing on a single meridian for thorough balancing.

Introduction

Starting with early Energy Kinesiology training, we learned that the meridian system functions as a whole; that an energy deficiency or excess creates stress throughout the system. By balancing the whole system, the energy flow becomes normalized, and the being returns to health. However, there may be times, usually as a result of injury, trauma or disease, that a particular meridian (and often its associated organ) becomes so out of balance, that systemic balancing is not enough. At those times, it may be beneficial to focus on the specific meridian to help bring its energy to a level where it can then participate effectively within the entire system, and return to health through overall energy balancing.

In the Applied Physiology (AP) holographic approach to energy balancing, the practitioner is always looking at the relationships between meridians – not just overtly, but intrinsically. In other words, rather than just looking at where the under and over-energies are in the *overall* meridian system, once an out of balance meridian is identified, AP can look at the relationship of that meridian to each of the other meridians within the context of the single meridian's imbalance. One method in which Applied Physiology approaches this focus is called the Can Opener.

Why the Can?

There are many reasons why it might be beneficial to take this focused approach to a meridian. Often it is because of a physically related issue that puts a specific meridian's organ under stress.

For instance, maybe a client has been a smoker for many years. This constant attack on the lungs has put an inordinate amount of stress on that specific organ, more so than others. Another client may have a diseased kidney and be facing dialysis. Another may have drunk too much alcohol, been subject to hepatitis, or had to take a lot of medications that stressed the liver. Yet another may have had to deal with irritable bowel syndrome or Crohn's disease. While there are certainly reasons to look at the systemic imbalances involved with all of these scenarios, it may be necessary to focus on the single meridian in order to bring it back enough to participate in systemic balancing.

Applied Physiology's Can Opener approach provides the practitioner with a means of examining a single meridian's relationship to all the other meridians, thereby potentially offering a great deal of extra information that might not be otherwise as easily available.

In this paper, I will present a version of AP's Holographic Can Opener that will allow

practitioners of any kinesiology discipline to access this type of balancing. This requires, however, leaving out certain details of Applied Physiology's system that are certainly beneficial to the process. If this method of balancing is of interest to you, I highly recommend attending the AP Agape Quest series or intensive to further learn how beneficial this approach can be to your clients.

Opening the Can

In past years, the background of the AP Hologram has been presented, with theory and application. I will therefore not repeat here, in any depth, that extensive information, but rather draw from it. If you are unfamiliar with this, I refer you to the journals of the past three years, particularly the 2000 journals of Touch for Health and ASK-US – "Applied Physiology Made Easy."

The main concept behind the holographic approach is that each piece contains the whole. This is seen in holography when a piece of holographic film is cut up into many pieces. When a light is shone on cut-up piece of film to reveal the image, you still see the whole image! Don't try this with your favorite photographs at home!

When applied to muscle monitoring, this may be applied by monitoring a muscle throughout its range of motion. With seven positions in each direction (contraction towards extension and back again), the muscle's meridian is related to all 14 meridians – the 12 bilaterals as well as Central and Governing. As there is a specific formula for identifying which meridians belong to each position for any given muscle, I will not go into detail here regarding this. The previously mentioned reference explains this in detail.

While monitoring a muscle in the specific position related to found imbalances is an important step, a lot may still be done without doing so. The procedure detailed here will give the practitioner the basic ability to "open the can" of a single meridian, without the specific muscle monitoring step. If you have experienced AP, or are comfortable with the process of position monitoring and its associated meridian relationship as detailed in

prior papers, then entering this step will add considerable depth to your balance.

The key to opening a meridian's can is *Can Opener Hologram Mode*. By pause locking (P/Ling) the mode, you alert the body that you are going to be looking at a single meridian and its relationship to several other meridians. This is different from AP's generic Hologram Mode, where the body presents an *object meridian* (the meridian that is the main point of focus) and its related *reference meridian* (the meridian in direct relationship to the object meridian). With Can Opener, there is only one object meridian, and it is examined in relation to several reference meridians.

Setting Up the Can

To initiate this type of in depth balancing, the practitioner simply P/Ls Can Opener Mode. The mode is the thumb pad over the distal knuckle (closest to the fingernail) with a light touch (generic hologram mode uses the same hand position, but with a medium touch). An indicator change (I/C) is not necessary, as this is often the practitioner's choice to initiate, and more information is necessary before the client will indicate stress through an I/C.

Because, as mentioned above, the choice to "do a can" is the practitioner's, based on his/her knowledge of the client and the client's issue, the meridian is also usually known. Therefore, with the mode in P/L, the practitioner circuit locates (C/L) the alarm point of the meridian in question. You can C/L just one side's alarm point, or bilaterally. This is based on the individual circumstance of your client. For instance, if the client has one bad kidney, you might just C/L that side's kidney alarm point.

In order to further specify the meridian that is to be "canned", the practitioner also puts that meridian's muscle into its contracted monitoring position. In Applied Physiology, this is called position #1. It is the same position as you would have learned in Touch for Health. For instance, if "canning" the heart meridian, you would put Subscapularis into its monitoring position. You do not, however, actually monitor it!

While the client holds the muscle in its position, the practitioner C/Ls the alarm point(s) and adds this to the circuit via the pause lock mechanism. (For an in depth discussion of pause lock, see the paper from the 2001 journal).

The body is now setup to look at the meridian to be canned as it relates to each of the other meridians, and determine which ones have stress that requires balancing. It is possible that at this point, you still may not have had an indicator change. This simply means that, even with the imbalance that exists within this meridian, the body has compensated to the point where it doesn't recognize there is a problem.

Looking in the Can

It is now time to see where the imbalances really exist with the meridian being canned. To do this, once more C/L the alarm points – **with a light touch**! Remember, light touch on the alarm points shows over-energy imbalances. These are the ones that the body is compensating for – bulling its way through in order to continue to function. The first priority I/C is the first relationship to be examined. Pause lock the alarm point, and note it.

C/L the alarm points again with light touch until you get another priority I/C. P/L and note it. Repeat this process until no more alarm points give an I/C.

If you know how to determine and monitor the muscle position for each found reference alarm point, then do so after you find each alarm point. Remember that, because you are canning a single meridian, the muscle you monitor will always be the same. Only the position you monitor it in will change. In AP, this is known as “entering the hardware”, and is an immensely useful step if you know how to do it.

If you monitor the muscle in its various positions, note as well whether the muscle is under- or over- facilitated (in contraction) or inhibited (in extension). If you are familiar with the AP concept of *powers of stress*, enter that at each step along the way as well

(powers of stress is also detailed in the 2001 conference paper).

When no more alarm points show with light touch, then go through them again **with deep touch**. The under-energy imbalances that using deep touch shows, are the really long-standing stressors that are now resulting in energy exhaustion in the meridian. However, after finding a deep touch stressor, it is important to check the alarm points with light touch again before doing another round of deep touch. Only after no light touch alarm points show is it OK to do one round of deep touch. If after doing a round of deep touch you find no light touch, then you can check deep touch again.

When no light touch or deep touch alarm points show on consecutive passes, then the can setup is complete.

Thinking Can

Let's pause for a moment and consider the implications of the information you've gathered in this process.

First, consider what you might have done in another circumstance. Suppose someone came in with emphysema, and you wanted to focus on the lungs. You might monitor either anterior serratus or middle deltoid in contraction to find stress. Some might also monitor the muscle in extension. You then would balance until the muscles monitored as being in homeostasis. The information you receive would come mostly from the balancing modalities that showed in the process, without any further initial information other than the state of muscle imbalance in contraction and extension.

When you setup a can, you immediately get an enormous amount of information before you even begin to balance. By looking at the object meridian (the one you've chosen to can) in relation to all the reference meridians that show through the alarm points, and whether they've shown as over or under energies (light and deep touch respectively), you've already been given very valuable insight into the nature and history of the imbalance.

In our lung example, suppose you find, in order, the following meridians: light touch

liver (Lv), pericardium/circulation/sex (Pc), deep touch central vessel (CV), light touch lung.

Very likely, the person was a smoker, so it's not surprising that lung showed up, with the smoking having a direct effect on the lungs and the lung meridian. CV showing indicates the potential distress on the brain, which needs large amounts of oxygen to function. The fact that this showed with deep touch indicates that the brain has maybe suffered more than other areas as a result of the imbalance. You might ask if the person is experiencing any cognitive difficulties or other effects of brain stress. This might become a place to focus some attention at a later point. Pericardium showing indicates other possible circulation stressors that can affect any number of other parts of the body. Exploring the heart, kidneys and spleen might be some things to think about further on down the line as a result of this. The liver might be indicating some toxicity involvement. You might ask if the person has been on any medication that could be causing stress, and follow that up with some balancing to relieve the stress of the medicine.

So as you can see, just from the physiological standpoint, you already have considerable information to work with that may or may not have come out otherwise, offering choices about further balancing that might be helpful later on, or even in the context of the balance you are about to perform.

Sometimes looking at the emotional relationships of the meridians and their corresponding elements can provide valuable insights as well. Whether you use the Touch for Health metaphors, traditional 5 Element emotions, or other means, you are now able to ask specific questions based on the meridian relationships found in the can setup, rather than wait for these emotions to come up (or not) in other parts of the balancing process.

One of the wonderful aspects of the holographic system of muscle monitoring, as seen here in the can opener process, is the empowerment of the practitioner to *think*, both logically and intuitively, about the information being gathered, and use that information to assist in the balancing process,

rather than rely on the client's body to always lead the way. When imbalances are so severe, the body has lost its way, and no longer recognizes that it has become so imbalanced. The compensations have gone on so long that the imbalances have become status quo. It needs the direct questions offered by hand mode and acupoint formatting in order to see that the status quo is not necessarily how it should be.

Now What?

A fine question! Well, now it's time to balance!

While Applied Physiology has a plethora of powerful balancing options, its real contribution here is that of the setup. So now that it's time to balance, you can use any balancing method that you have at your disposal.

It is beyond the scope of this presentation to go into the various possibilities that AP offers specific to balancing a Can Opener setup. However, just going into general balancing at this point will still accomplish some wonderful results due to the setup itself. However, I'd like to offer a couple of specific ways that AP uses some traditional Energy Kinesiology balancing techniques applied in a holographic manner.

NeuroLymphatic Balance

If you would like to balance with NeuroLymphatic (NL) reflex points, as likely originally learned in Touch for Health, this can now be done in a new holographic way.

Instead of using just the NL of the meridian being balanced, you now will use the NL of the can meridian in conjunction with the NLs of the reference meridians.

Have the client rub the NLs of the can (object) meridian as you rub the NLs, one pair at a time, of each reference meridian in the order they showed up. You are now directing the energy of the NL balance to the specific relationships that were indicated in the can setup.

NeuroVascular Balance

This is virtually the same as the above NeuroLymphatic balance, except that the client holds the NeuroVascular (NV) while the practitioner holds the reference NVs, one at a time, in the order they showed up.

Spinal Reflex

As in Touch for Health. Usually used for bilateral imbalances. So if the reference alarm point showed on both sides, this might be helpful. Because it is most likely difficult for the client to rub their own object spinal reflex, the practitioner can do this with their dominant hand while the client touches that arm of the practitioner. Then, with the non-dominant hand, the practitioner rubs the reference spinal reflex.

Reflexology

Particularly helpful in toxicity cases, rub the reflex area of the object meridian while rubbing simultaneously each of the reference areas, one at a time, in the order they showed. You can use traditional reflexology charts to determine the areas. This can be applied on the feet or the hands. Hands tend to be better for long term toxicity issues.

There are a few other guidelines for using these balancing methods in context with the hologram that are beyond the scope of this paper (but are taught in the Agape Quest and other workshops), but significant benefit can be derived from these applications as described above. And, with this as a template, you might think of other ways of applying balancing techniques you've learned from other experience in a holographic context. Be creative!

Conclusion

The purpose of this paper/presentation has been to offer a means of delving deeper into a meridian that has a history of imbalance that requires more attention, has had difficulty staying in balance, or is under inordinate stress that may be caused by trauma, injury or disease. It is rarely the first thing you would do with a client, but provides a powerful direction to go in as you work with a specific issue over time.

The Can Opener Hologram offers the practitioner the means of gathering helpful information that might not otherwise be easily attained, and applying balancing techniques that are directed to the specific relationships identified in the Can Opener setup. The results achieved by following the procedure (detailed more concisely in the appendix) have proven over time to be quite amazing.

Power vs. Force: An Anatomy of Consciousness

by John Maguire

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In his breakthrough book, *Power vs. Force*, David Hawkins, MD., Ph.D., discusses a map of the energy fields of consciousness. On a scale of 0 - 1000, where 700 - 1000 is enlightenment, he calibrates levels which correlate with specific processes of consciousness - emotions, perceptions or attitudes, world-views and spiritual beliefs.

Map of Consciousness

Log	Level	God-view	Life-view	Emotion	Process
700-1000	Enlightenment	Self	Is	Ineffable	Pure Consciousness
600	Peace	All-Being	Perfect	Bliss	Illumination
540	Joy	One	Complete	Serenity	Transfiguration
500	Love	Loving	Benign	Reverence	Revelation
400	Reason	Wise	Meaningful	Understanding	Abstraction
350	Acceptance	Merciful	Harmonious	Forgiveness	Transcendence
310	Willingness	Inspiring	Hopeful	Optimism	Intention
250	Neutrality	Enabling	Satisfactory	Trust	Release
200	Courage	Permitting	Feasible	Affirmation	Empowerment
175	Pride	Indifferent	Demanding	Scorn	Inflation
150	Anger	Vengeful	Antagonistic	Hate	Aggression
125	Desire	Denying	Disappointing	Craving	Enslavement
100	Fear	Punitive	Frightening	Anxiety	Withdrawal
75	Grief	Disdainful	Tragic	Regret	Despondency
50	Apathy	Condemning	Hopeless	Despair	Abdication
30	Guilt	Vindication	Evil	Blame	Destruction
20	Shame	Despising	Miserable	Humiliation	Elimination

All levels below 200 are destructive of life in both the individual and society at large. All levels above 200 are constructive expressions of power. Levels of consciousness are always mixed, so that a person may operate at one level of consciousness in one area of life and on a different level in other areas.

These figures do not represent an arithmetic, but a logarithmic progression. Therefore 300 is not twice the amplitude of 150; it is 300 to the tenth power. An increase of even a few points therefore represents a major advance in power. People who resonate at high levels have a tremendous effect on the entire consciousness of the planet. As more and more people lift their consciousness, the entire world becomes affected.

Everything affects your vibratory frequency and state of consciousness. Your beliefs, world view, self esteem, friends and family, diet and lifestyle, language and reading material, home and work environment, spiritual practices, career, sports and leisure activities, movies, music and television, the political system you live in and where you put your focus (giving to others vs. trying to get things from others) all influence where your consciousness resides.

The Physical and Emotional Effects of Being in States Below 200

A person's physical and emotional health is affected by the consciousness they are resonating at. If someone is vibrating at a level below 50, they will have very low self esteem and feel responsible for the mess their life is in. They will often experience low energy and poor health. Their beliefs will reflect and support this state of consciousness and will further perpetuate their lack of worthiness and powerlessness. One way to help free a person from these states is to have them tap specific acupressure points(SI 3) as they state, "I deeply and completely love and accept myself (which pulls them up above 200) even though I feel Ö (guilt, shame or whatever the emotion they are stuck in)."

A person resonating around 75 may have lost a loved one and be stuck in grief. Perhaps they decided that life was not worth living because their loved one is no longer with

them. If they stay at this level of consciousness, cancer and other degenerative diseases can develop. They can create a more empowering meaning of their loved ones passing to raise their vibration and free themselves from their grief. One belief they could hold is that death is the moving from the physical form into the spiritual realm, like a caterpillar becoming a butterfly. It is a journey we all will eventually take and one day we will be reunited with our loved ones when we make that journey. Focusing on this belief will not only ease their emotional pain, but also clear energetic imbalances to support health and well-being.

Those who resonate in a state of fear (100) will often see situations and people around them as threatening. They may experience nervous disorders, gastrointestinal upset and kidney problems. Their outlook is that something bad is about to happen and they will try to do what they can to avoid that. To rise above 200 they could shift their focus to the good that surrounds them. By being proactive and focusing on positive emotions and expectations they will actually have more power to draw good into their life.

A person resonating at 150 in a state of anger will tend to see people as threatening to their control. They will try to manipulate others and situations to go the way they want them to. If things don't go their way they get angry and upset, blaming others for their misfortune. People who hold onto anger often develop heart disease, liver problems or other maladies. By raising their consciousness to levels above 200 and focusing on acceptance, forgiveness and understanding, true healing can begin to take place both physically and mentally.

The two most important factors to raising your consciousness is where you put your focus and the meaning you make of things that happen to you. In states below 200

people's focus is primarily on themselves. Above 200 their focus is primarily on others. Buckminster Fuller once said, *"The older I get the happier I become, because I am getting less and less preoccupied with myself."*

People in states below 200 tend to hold onto past events and create a disempowering meaning about them. In the states of 200 and above, the focus is more on being accepting and present to what is, without coloring it with the past. People in these states accept the past and look for opportunities to create new possibilities in the future.

Power vs. Force Applied to Various Aspects of Life

True power lives in states above 200. Force, which exists in the states below 200, does not have lasting power. An example of this in politics is Gandhi. He is a great example of how the power of one man resonating at a very high vibration can defeat the force of an entire army. His power came not in weapons of destruction, but in kind words. He did not come from fear, anger or greed. His actions were born of love, reason and reverence for all life.

Martin Luther King followed in Gandhi's footsteps preaching nonviolence and tolerance in his approach to equal rights and dignity for blacks. There was no room for anger, hatred and aggression in his powerful message of freedom for "all God's children".

The Power vs. Force can be applied to personal relationships. The lower states contain judgment, blame, aggression, fear, greed and separateness. The only way to have a truly successful and satisfying relationship is to come from the higher states where love, acceptance and respect are natural expressions.

A business which resonates below 200 is doomed for failure, whereas one that is based

in the higher states is more assured to be a success. Wal-Mart vs. Enron is a case in point. The spirit of the Wal-Mart company resonates at a very high vibration driving its success. When you walk into one of their stores, there is an employee at the door greeting you with a loving smile. The employees of Enron were shown the door by the executives who were filled with greed and deceit. Enron's approach to business had no power to create or sustain success. To be successful in business focus on serving others, not yourself. Zig Zigler says, *"Help enough other people get what they want and you will get what you want."*

A "war" on drugs can never be won. If our approach to clearing up the drug problem is based on aggression and a lack of acceptance and understanding, it will perpetuate the occurrence of drug use. The 12 Step Programs, which incorporate principles from higher states of consciousness, have been tremendously successful worldwide in helping people free themselves from a state of desire (125), where addictions are born. This organization, which resonates above 350, has tremendous power to lift up people who follow its principles to states above 200.

Attractor Fields

Hawkins discusses what he calls attractor fields, which are magnetic resonances of consciousness which draw energy towards us. When we vibrate at a level of love and joy, we attract people, events and circumstances that are in harmony with that state of being. Coming from a state of fear, anger or grief often results in further events and situations that will reinforce that state.

From this perspective our game in life can become one of raising our consciousness to draw health, happiness and success to us, rather than dwelling in a state of discontentment trying to manipulate the outer world to try to make us happy. Tony

Robbins says, "*Happily achieve, rather than achieve to be happy.*"

If you resonate in a state of desire (125) and try to acquire more material objects thinking that this will bring you more peace and joy, you will remain in a state of desire. Even if you get what you are looking for, fulfillment of those desires will not bring lasting peace. Once the fleeting gratification wears off, fear of loss of what you've attained or desire for something else will fill the void.

A person who truly lives in a state of inner peace is not dependent on outside circumstances to assure lasting peace. Attaining this state is one of the quests of all spiritual disciplines, finding the "kingdom of heaven" within.

The Use of Muscle Testing

Hawkins suggests using muscle testing to calibrate the vibratory rate of anything you wish to test. He makes statements such as, "This person's overall consciousness calibrates at a level higher than 200." Test. "Higher than 250." Test, etc. By testing a strong indicator muscle to see if you get a strong, "yes" response, or weak, "no" response, you can continue testing until you find the highest number which tests strong to determine the level on the relative scale from 0 to 1000. Remember that we can resonate at one level in our business life and an entirely different level in other aspects of our life. When checking for overall consciousness it is an average.

If you have a major decision to make, such as a career choice, you could state as above, "This career for me calibrates at a level greater than 200." Test. Check all of your career choices to get more input as to which move would be in your highest good.

This testing can be applied to anything, such as: the people we associate with, our beliefs, our language, books and reading material,

spiritual leaders, political candidates, television and movies, sports and leisure activities, food and beverages. In most cases it is sufficient to test whether you get a strong response (indicating what you are testing is resonating above 200) or a weak response (indicating it resonates below 200). The bottom line is to avoid things that are below 200 and incorporate things above 200 into your consciousness.

With a yes or no test of an indicator muscle, where a "yes" is a strong response and a "no" is a weak response, ask whether any specific food, person, activity, etc. is good for you. With language and belief, you can state the word or the belief, and then test a strong arm with the intention that it will be strong if the word or belief enhances your level of consciousness and weak if it drops you below 200.

Summary

Our states of consciousness are vibrational. The levels can be calibrated on a relative scale of 0 – 1000, where below 200 are states which are destructive of life in both the individual and society at large. Above 200 are states which are constructive expressions of power. Everything, especially our beliefs, focus and identity affects our level of consciousness, either bringing us up or down in frequency. Our experience of life is an expression of our level of consciousness. Achieving lasting health, happiness and peace comes through attainment of higher levels of consciousness. We can measure our success not by what we get, but by what we give.

For further information visit website at <www.kinesiologyinstitute.com> where you can sign up for free email newsletter.

"Those of you who are truly happy are those who have sought and found a way to serve."
Albert Schweitzer, MD

Love Your Back Muscles

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About Back-Balance

In 1996 a client of mine asked me whether I could assist him in a training course for dentists he was giving on "Ergonomics and Back-Prophylaxis for Dental Practitioners" by presenting some aspects from the field of Kinesiology. From then on I started work on developing a special Back-Balance technique. I mainly chose muscles relating to the shoulder blades and the lumbar area. In combination with the Five Chinese Elements I selected the following muscles: The **Supraspinatus** (ZG) and the **Teres major** (GG) were given. For the **Earth-Element** I spontaneously chose the **Latissimus dorsi**, one of the biggest back muscles. Its form reminds one of a butterfly, which fits the Earth-Element very well. These three muscles all have their insertion on the **upper arm**. The hardness of the **Metal-Element** is comparable to the muscle pain in the **Quadratus lumborum**. Who doesn't know the feeling of piercing pain in the lumbar area? This muscle stabilizes the lower part of the back. The **Sacrospinalis** consists of several groups of muscles and connects the pelvis to the spinal column, the back of the head and the neck. It is an important muscle for the back function, mainly because it is emotionally often under heavy strain. The assignment of our daily fears to the **Water-Element** makes sense. The **Rhomboides** muscle is put under strain when we are facing anger; then we spontaneously draw the shoulder blades together and grit our teeth. At the Badminton Swiss Open in Basel I have often had to treat the Rhomboides area of players who were suffering from pain in the shoulder blades. Especially after a defeat there tended to be much pent up trouble in this muscle area. It is an important muscle in the **Wood-Element**. Finally, we have the **Fire-**

Element. Lacking joy for life coupled with back pains often has its origin in weak **abdominal muscles**. Thus, this group of muscles too has to be taken into consideration in a back balance.

Why have a Back-Balance?

It is a good way of making kinesiology palatable to massage clients.

With only a few muscle tests one is able to cover the whole back, at the same time paying attention to all muscle layers.

The pleasure of working with Tfh techniques, and doing muscle work in general.

Of course such a Back-Balance does not substitute for a 14 or a 42-muscle test.

BACK - BALANCE

With the Touch for Health-Techniques

Pre-tests

Test the **water-household** (spiritual-chemical) with a strong IM, carry through the **up- and downwind** (emotional) and pinch the **muscle** (structure). Of course, further familiar pre-tests can be carried out too.

Divide the back into seven sectors. The practitioner tests with a strong IM:

Back of the neck

Left shoulder blade	Right shoulder blade
Left middle part	Right middle part
Left lumbar region	Right lumbar region

The practitioner touches these zones with one hand. Should the strong IM give way upon touching one or several of these spots, touch

the ESR-points (client). If the IM becomes strong, this Back-Balance can be carried out. Whilst touching the ESR-points the client tells everything that comes to his or her mind in relation to his or her back. No questions are asked. When the client has had enough, re-test the seven zones. The IM should now hold; if not, check what else could be needed (e.g. **water**).

Process of the Back-Balance

During the testing stage, the client is asked to think about his or her back.

Test the *Supraspinatus* (ZG) and the *Teres major* (GG) according to the manual TfH I. If necessary strengthen these with Neurolymphatic Massage Points, Neurovascular Holding Points, Meridians, Muscle Origin/Insertion etc.

Test the following muscles. In case muscle response is weak correct this straight away following the TfH-manuals. During the correction stage it can be helpful to use Dr. John F. Thie's Metaphor-Chart. Many of the metaphors relating to the back-muscles deal with the issue of **posture**.

Latissimus dorsi (TfH I), Spleen-Meridian, **YIN**, assigned to the **Earth-Element**.

Quadratus lumborum (TfH II), Large Intestine-Meridian, **YANG**, assigned to the **Metal-Element**.

Sacrospinalis (TfHII), Bladder-Meridian, **YANG**, assigned to the **Water-Element**.

Rhomboideus (TfHII), Liver-Meridian, **YIN**, assigned to the **Wood-Element**.

Straight abdominal muscles (TfHII), Small Intestine-Meridian, **YANG**, assigned to the **Fire-Element**

(In case of pain in the lumbar area test carefully or leave out).

Complete the sequence by massaging all NLMP of all seven back-muscles. At the end it has also proven beneficial to apply the Lying Figure Eight or to activate the Bladder-Meridian (Following or tapping).

A nice ending is to read the passage "I love my back" from the book by Louise L. Hay "Love your Body".

This Back-Balance is carried out in different positions. First lying on one's back (*Supraspinatus*, *Teres Major*, *Latissimus Dorsi*, *Quadratus Lumborum*), then lying face down (*Sacrospinalis*) and, finally, sitting upright (*Rhomboideus*, straight abdominal muscles). This is important as, with every change of position, the back is **moved**.

It is quite usual that a further topic for a next kinesiology-session develops out of a Back-Balance.

I wish you much pleasure and success in applying this Back-Balance.

Kinergetics Optimum Support

by Philip Rafferty and Barbara Papillo

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Abstract: The Optimum Support technique is taught in Kinergetics Level 7. It facilitates and supports greater depth of access to imbalances, and therefore greater depth of correction. Inherent in this technique is the Kinergetics system of hydration. Optimum Support can be used when the Indicator Muscle response is no longer indicating that there is anything out of balance when the body is challenged in relation to a specific aspect. It is used for any specific aspect: - structural, glandular, emotional, muscular, hydration, light bodies, chakras, or a format.

The **Optimum Support technique** can be used for:

- Something the client wishes to work on, but the Indicator response is showing there is no Imbalance.
- Something that you as a practitioner can see is out of balance, but the IM response does not indicate any imbalance.
- Something that you have worked on, and the IM response indicates that there is now no imbalance to work on.

Sometimes the body does not indicate an existing imbalance if:

- There is insufficient **hydration, energy, nutrition or elimination** necessary for the integration of further or deeper rebalancing of energy.
- It is unable to keep functioning at a safe level in relation to its available **hydration, energy, nutrition and elimination** resources.

The Optimum Support technique:

- Enables you to achieve a greater depth of balance on anything that you specify.

- Enables this increased depth of balance through gaining an IM response when none seems to be available.
- Achieves this greater depth of access through both energetically and physically supporting the body, so that it can safely indicate its imbalance and provide access to deeper levels of information. .

By giving support in all aspects as the body indicates the need, the body may then be sufficiently physically and energetically supported, to accept a deeper rebalancing.

Part of the structure of Kinergetics, including the Optimum Support technique, is to actively keep the body hydrated throughout a circuit and in between circuits. This is accomplished by energetically balancing the main Riddler Points in their relationship to the body's electrolyte balance, distribution and assimilation, and by using formatting to gain access to areas of imbalance in relation to hydration, dehydration and water. Deep access to body information can then occur, and the body can efficiently re-hydrate after energy pathways are re-opened.

**The Kinergetics
Optimum Support Process**

1. PRETESTS Complete your Pretests.

**2. No IM change on
Specific Imbalance** You have reached a point in your balancing,
where the IM is not Indicating an Imbalance
on the Specific Aspect you are working with or want to start
working with.

For example:

*"Access 100% Priority Survival on All Levels and
Dimensions" – No IM change.*

3. SUPPORT Correct the Support Access to give the body the support it
needs to be sufficiently balanced physically to be able to
support and give access to the next level of imbalance of your
Specific Aspect of Imbalance.

Correct the SUPPORT ACCESS to enable the IM to indicate an
Imbalance.

An IM change on Hydration, Energy, Nutrition or Elimination
signifies the type of Correction required to support the body to
then be able to access and show the Specified Imbalance.

SUPPORT ACCESS

Verbally Challenge this SUPPORT ACCESS for your Specified Imbalance.

**"To enable maximum (Specified Imbalance) exposure, access optimum
support to maximise hydration, energy, nutrition and elimination."**

Note the IM change - Hydration, Energy, Nutrition or Elimination.

4. SUPPORT CORRECTION The body has chosen the type of physical support it needs to enable it to be balanced sufficiently to indicate greater depth of a Specific Imbalance.

Hydration Hydration - Scan Hydration Scan List.
Your preferred correction.

Energy Energy - Your preferred Energetic Correction.

Nutrition Nutrition - Scan Riddler Points.
Balance relevant Point.

Elimination Elimination - Test bottom third of Tensor Fascia Lata -
Lymphatics. Rub firmly bilaterally.

5. ACCESS SPECIFIC IMBALANCE After the Support Correction the body should be able to indicate an Imbalance for your Specified Imbalance.

Verbally Challenge:

"Access 100% (Specified Imbalance) on All Levels and Dimensions."

STACK the IM change. If the IM does not change, the body might need another Support Correction. Repeat Step 4.

For example, Challenge:

"Access 100% Priority Survival on All Levels and Dimensions." STACK as IM changes.

You have now gained deeper access to your Specified Imbalance (Priority Survival on All Levels and Dimensions (ALD)) enabling you to Correct it.

6. CORRECT SPECIFIED IMBALANCE Correct Specified Imbalance that you are now holding in Circuit – Use your preferred Correction.

For Example:

Correct "Access 100% Priority Survival on ALD."

7. RE-TEST SPECIFIED IMBALANCE Re-Test the Specified Imbalance.
For Example:

"Access 100% Priority Survival on ALD"

If the IM changes - Correct the Specified Imbalance again –
Repeat Step 6.

If the IM does not change -

Repeat the Support Access and Correction again.

Repeat Step 7 until there is no IM change at Step 3.

HYDRATION

Within the structure of Kinergetics balances, and especially when we are aiming for deep access of information, the techniques used to keep the client's hydration balanced throughout each circuit are:

- Energetically balancing the main Riddler Points relating to the Electrolytes.
- Sending energy through the palm of the hands into the client's kidneys.
- Correcting the Hydration Scan List.
- Verbally challenging "Water," "Hydration" and "Dehydration."

These Hydration techniques:

- Enable the body to rehydrate areas where energy pathways have been re-opened and cleared.
- Ensure that the body has water available so it can safely indicate a deep dysfunction to be brought into balance.

We feel that this aspect of supporting the body through our hydration techniques is vitally important whenever we have the aim of:

- Gaining deep access to any imbalance. Eg. Suppressed imbalances, Imbalances with related Sabotages.
- Achieving fullness of information in relation to the cause of the imbalance, and all related information pertaining to the imbalance.

Electrolyte Correction for Water:

A simplified version of one of the Kinergetic's Procedures for maintaining optimum Hydration.

1. Verbally Challenge

"Water, Nutrition Minerals"
Hold this in Circuit.

The body will now access these Points in their relation to electrolyte balance only.

2. Check these Riddler Points.

An IM change indicates an imbalance.

Left Check Accesses Sodium Imbalance

Right Check Accesses Potassium Imbalance

Throat and Clavicle Accesses Trace Minerals, Calcium, or Iodine Imbalance

Navel Accesses Magnesium or Manganese Imbalance

3. Correction

Send energy into the Point that caused the IM to change.

Send energy with the palm of your hand into the Point that caused the IM to change – until the IM indicates the Correction is complete.

4. Re-Test all Points.

Correct, as above, all Points that cause the IM to change. Correct one at a time.

"Water, Nutrition Minerals" must be held in circuit for each Correction, identifying electrolytes as the area being balanced.

Special Note: After presenting at 16 conferences in five countries I have demonstrated many aspects of Hydration and TMJ. For a change I have decided to present some of the more advanced Kinergetics. The Optimum Support Correction is an unusual concept and is aimed at more advanced Kinesiologists. If you have questions about the technique please email me at philip@kinergetics.com.au.

For more understanding of the power of Kinergetics Hydration visit our website www.kinergetics.com.au. This website has 15 testimonials under the heading HYDRATION/ WATER, as well as hundreds of general testimonials that hydration would have played some part in.

The Message from Water

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Words, words, words!!! We communicate questions, feelings, and answers BUT, did you know words not only affect us as human beings, they also affect inanimate objects as well? We are going to explore the affects that words, music, prayer and pictures have on water. The connection between all of this is that our bodies are 75% water and our brains our 85% water. (Ref: *Your Body's Many Cries For Water* by F. Batmanghelidj, M.D.). Water is very sensitive to frequencies and changes easily and quickly. Because our bodies contain so much water, our very type of existence is affected by our thoughts and speaking patterns.

The words we use everyday affect the frequency of everyone around us and our own bodies. Even the words we use when we have a thought or a feeling go through our mind has an effect on us and on the other people around us.

Raymond Holliwell said in his book, *Working With The Law*,

"Our thoughts travel 930,000 times faster than the sound of our voice. No other force or power in the universe yet known is as great or as quick. It is a proven fact that the mind is a battery force, the greatest of any known element."

When you think of a force that travels 930,000 times faster than the sound of a voice speaking, is it any wonder that when you walk into a room or stand next to someone you get a feeling from them. It is time to look and see the effect the words are having on the water, because all words have a frequency to

them whether they are spoken, thought or read. There are words which resonant at high frequencies while other words resonant at low frequencies. Some words seem to make us feel confused or even shattered while others take us to new heights and make us feel whole and complete.

When we change a word or two, possibly adding a word or rephrasing a phrase the change in a response from another person or within a person is amazing. This also needs to be considered in our thought patterns because these patterns affect us greatly. If we start out dreading a situation that might happen, we have already put ourselves in a low frequency. On the other hand if we believe we are going to be in a good situation, we have automatically put ourselves at a higher frequency which gives us more energy and attracts positive things to us.

The effect music, prayer and pictures have on water is amazing. Just by putting water on a picture of a smiling girl, water will create a beautiful crystal. Also when we pray it may raise the frequency of our body 10-15 Mghz. Listening to positive music may help our bodies to heal or create a healthier state.

All these things tell what type of people we are because we carry a frequency around with us. When we walk into a room we can change the frequency to a higher one or lower it. As my mother has often said, "There are some people you are happy to see come and there are some people you are happy to see go". By becoming more aware of how words, music, prayer and pictures affect us we are more capable of creating a positive frequency for ourselves and others around us.

**You tell on yourself by the friends you seek,
By the very manner in which you speak,
By the way you employ your leisure time,
By the use you make of dollar and dime.
You tell what you are by the things you wear,
By the spirit in which your burdens bear,
By the kind of things at which you laugh,
By the records you play on the phonograph.
You tell what you are by the way you walk,
By the things of which you delight to talk,
By the manner in which you bear defeat,
By so simple a thing as how you eat.
By the books you choose from the well-filled shelf;
In these ways and more, you tell on yourself.
So there's really no particle of sense
In an effort to keep up false pretense.**

Author Unknown

The Body and the Belief System

by Gordon Stokes

THREE IN ONE CONCEPTS

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We started Three In One Concepts in 1982. At that time we were teaching talking to the Body verbally and getting answers through muscle biofeedback. We also taught in 1982 that we could use muscle feedback to discover information from clients about what was going on from conception because as a fetus, we heard and felt what was happening in the body of our mother.

The **PRINCIPLE**: The whole body mirrors the inner aspects of our thinking. It mirrors itself in every organ and cell. The body has a mind – a “body mind.” Our body exists only as a community of cells, and each community of cells is born to perform their many tasks.

ORGANS HAVE BRAIN CELLS.

Medical doctors now write that brain cells, the same cells we have in our cerebellum, have been discovered in the organs.

In Mexico, a doctor transferred cells from one of a man's organ to his brain. He had been diagnosed with Alzheimer's disease. The cells were accepted by the man's brain and he regained much of his lost memory.

If organs contain brain cells then these organs must “think”. There is certainly some intelligence for the liver to know its job and the same must be true of the spleen, heart, kidney and all of the other organs in our bodies. Also, our organs and cells must know what is going on within the whole body.

Cells taken from the mouth of a man were transported to a place seven miles away. The cells were then attached to some sensitive instruments. The man was given pornographic pictures to look at and the cells, seven miles away, instantly responded to the emotions the man was feeling.

What if the intelligent cells in the immune system are eavesdropping on our self-talk, listening to what we say about our lives and what we say about our bodies.

An example: If you are going to give a presentation, and this is new for you, you might say to yourself, “Giving this presentation is scary for me.” The body listens and turns on “scary” chemicals. When you are sad, depressed or happy, the body listens and turns on the appropriate chemicals to mirror your beliefs.

We know that the Subconscious Mind accepts as true any ideas or suggestions given with intention and will record these feelings in the body cells' memory.

Your suggestions are reinforced by repetition, and each repetition grooves a deeper and deeper impression. Once the Subconscious Mind accepts your mental suggestion, it takes an action by creating a physical manifestation – positive or negative.

THE BODY WORKS ON OUR BEHALF

The Body/Mind will take suggestions or instructions, if given with intention, and sends messages to the organs or cells to stimulate them to greater activity in creating harmony within the cells, hence to the organs, muscles and tissues.

To reach the mind of cells or organs:

- 1) You give verbal suggestions to the cells or organs involved with your intention directly.
- 2) Your attitude and visualization of the organ is “it is working in harmony, getting better and better”.

- 3) The strength of any suggestion you give depends on the degree of your intention and focus.

Stress doesn't make people sick; giving up their inner adaptability to stress does. The greatest threat is having nothing to aim for or not knowing what choices to make. Being passive is the most detrimental attitude for being sick and degenerating the body.

Deepak Chopra talks about research done with mice to see what stress does to the body. Two mice were tied together so only one was FREE to walk around, eat when it got hungry, slept when it wanted to. The other mouse was just passively dragged around. It was not long before these two mice looked entirely different. The mouse that had the freedom of choice was very healthy while the other mouse disease prone and aged very rapidly. The mouse that was dragged around had no physical abuse but what brought on its destruction was not having FREEDOM OF CHOICE.

When a person feels things are unpredictable and he/she has no control or outlets for his/her frustration this brings on stress. If in the defusion you detect any of these things happening with your client helping them to appreciate and consciously use their power of individual CHOICE, which is power.

GROWING UP BACKGROUND

In growing up, know where your client was in the family

First born: Usually feel they needed to be perfect. They received a lot of attention. They were bought clothes and if they got them dirty they were changed. Because parents feel they are a reflection of them, they want them to also do well in school so spend special attention to their grades and see that they do their homework.

If your client is the only child in the family he/she is probably around many adults and tend to act more adult. With no children to play with they may feel they didn't have much of a childhood.

If another child comes along two, three or four years after, the older child has a tendency

to be jealous for the younger child is taking away some of the attention. Messages to the oldest child may be "You're to be a model for your younger brother or sister." They may also feel that the other children in the family gets away with a lot of things they were not allowed to do.

Second born: Usually looks up to their older brother or sister and wants to be like them and do the things they do. They can be disappointed when the oldest one doesn't want them around, especially with their friends. If they are sandwiched in among other brothers and sisters they may wonder "Where do I belong in this family?" They can't be number 1 because that position is taken and they can't be "the baby" of the family because that position is also taken and may go outside the family to relate as the older one usually relates more to the mother and father.

Last born: Usually is the charismatic one or maybe even the joker to get the attention they want. Being smart is usually the position of the first born, so they try others ways to get attention and be accepted.

Find out how they got attention in that family. Sometimes getting sick gets them the attention they want and can be carried over even into adulthood.

Many affirmations are made in childhood, either for survival in the family or getting attention in some way. These affirmations made in the past may not be profitable for them now is Present Time although under stress they will duplicate them.

SELF TALK:

Listen to the self-talk of the client for that will give you a clue as to where his/her focus is. If their focus is in the past then they are bringing the past in as if it were Present Time. It also will let you know his/her self-esteem and what they *believe* they are. This belief about themselves is the result of messages from parent, teachers, environment, etc., and according to their belief is the way they perform. The belief system they have adopted is a lie, however they role-play it as if it were

true. What they are doing is to limit their potential.

The body is always listening to their self-talk, and matching it with appropriate emotions. People usually feel the emotions are creating how they think about themselves, but it was their programming in the first place that created this. The body learned to carry out the programming fed into it by you. Much of the programming was unconscious, brought about by beliefs and assumptions

PRESENT TIME:

How much of the time is the client in PRESENT TIME? If they are mostly in the past (the emotional side of the Barometer) they are powerless to change. Why? Because the only power they have is in Present Time. Events have happened in the past that they can do nothing about. They are not 5 or 10 years old anymore they should forget it — to be in Present Time is taking care of their lives NOW. To lose awareness of Present Time is to lose intelligence; to lose intelligence is to lose control over the body. If you want to change your body, change your awareness first. If your client is focused on the future with wishes and ideas of what they want to do, and have not taken any action to materialize these thoughts they still do not have any power. The Power is in Present time so the question to them would be what are you going to do NOW? When life is concentrated in the present, it is most real, because the past and future are not impinging upon it. In reality this moment exists and past and future are only mental projections. Nothing is happening when someone is living in the past or trying to control the future. Wilber Smith wrote in *When the Lion Feeds*, "The past was lost — and he knew then that you can never go back. Nothing is the same, for reality can exist at one time only and in one place only. Then it dies and you have lost it and you must go on to find it at another time and in another place."

"When a traveler gets a thorn in his foot, he is wise he plucks it out — and he is a fool who leaves it and 'I will keep this thorn to prick me so that I will always remember the road upon which I traveled.' It is better to remember with pleasure than with pain."

STRESS:

If you are in an emergency situation, the body goes into survival mode and the entire body's attention goes to work to solve the situation. Once it is over, the body then goes back into a balanced state. The problem is focusing on the situation long after it is past. Once that memory is brought up, the body once again goes into survival mode as if it were real. Maybe not to the same extent but the chemicals are still activated as if this situation still existed. What people don't realize is that this body is very adaptable to stress and when confronted with a problem and handled — taking an action, making Choices and solving the problem, the body will then go back balancing itself again. Not handling the situations is creating the stress.

Confronted with a problem, take the attitude of "the right answer will emerge." Usually the idea of the following three choices can be helpful: Leave the situation, handle it by confronting the situation or person, or forget it.

As a Facilitator, help the client to creatively respond to changes and situations. Encourage them to integrate new insights and create new things — then their lives will change.

INTENTION:

What is visualized with a clear focus and intention will reflect back as a result. The intention needs to be specific and definite but not a lot of attention to the details. It should be something that a person has a passion for and expects results. No anxious attachment to the result but a confidence in the outcome. If you doubt the outcome you are sending out a self-defeating intention, which will undoubtedly cancel out the first intention. When we use intention, we are like a magnet, attracting whatever is sent out — positive or negative. Be open to the feelings or feedback that comes to you either from inside of you or from the environment. Do not send out a "don't want" intention, such as "I don't want cancer." Reword the intention to a positive such as "I want a healthy body filled with energy with continued improvement on all levels." The feedback may come back in unexpected ways, but something will always be produced.

THE STRUCTURE EQUALS FUNCTION CONNECTION

There's an intimate correlation between mind and body – and between what we feel and its outward expression. In the last 30 years, psychologists have focused our awareness on the non-verbal communication signals that mirrors attitudes and states of mind.

A closed mind, for instance, mirrors as a "closed body" in terms of position. Gestures turn inward – crossed legs, folded arms, leaning back in the chair – such physical expression usually indicates a "no" attitude of some kind such as disbelief, antagonism, the desire to control, hostility or negation. Vice versa, an open mind is most often reflected in more open physical expression – outward focused gestures and the "unlocking" indicators, such as uncrossing of arms and legs, leaning forward, reaching out – which mirrors in attitude of acceptance, willingness or interest.

The non-verbal catalogue is a long one, but it centers completely on outward signals – physical action of some kind – not on the actual bodily structure itself. Without an awareness of what that structure AS A STRUCTURE means, we're dealing with effects, not cause. The cause is in the actual physical structure of the individual human being as modified by a conditioned belief system.

Everything about us has a profound meaning. Every comparative cell proportion – and that's what makes us individuals – relates directly to some kind of function, and that function is INNATE, determined by the DNA code in each cell of our body. From the moment of conception to the moment of death, our structure has been individualized – guaranteed by cell proportion to function uniquely and automatically unless we consciously choose an alternative pattern. Even when that choice is made, the body itself inclines to return to the original blueprint.

Our general "style" – choice of clothes, voice quality, hair arrangement, and posture – mirrors the belief system we've come to hold valuable. That's the result of the choices we've made in life – and it is subject to change as what we value changes. Being able to read "style" is enormously valuable. Still, when we do so, our perception is limited because we're dealing with effects.

The cause is inherent, established for life by the DNA code of our individuality. To those aware

of the human structure-equals-function connection, the physical being tells more than words or gestures or body position ever can. Human structure – that person right there before you – speaks louder than any words spoken.

Just by looking at comparative cell proportion, you'll know – and know in depth – what that person may not even know; how that human structure is built to function UNDER STRESS. More: you'll know how to relate to that inborn trend of expression and see through "style and body language" to the deep, true nature of that person's individuality. Most of all, you'll get a glimpse of your own inborn nature – the part of you no one has clearly realized before (maybe not even yourself!)

To us at Three In One Concepts, the human structure-equals-function awareness is the first and – until now – missing step to a real understanding of how to release our true potential. Until structure-equals-function was developed, all we could observe was how a person expressed inner attitudes. With structure-equals-function, we can observe beyond attitudes to the genetic cause of individuality and instinctive personal needs as well as expression.

BEHAVIORAL BAROMETER BASICS

The right side of the Barometer is **EMOTIONAL**, and gives a good indication of the Belief System.

The left side of the Barometer is **STATE OF MIND**. It is what the person wants.

If the person **AVOIDS** the emotional side, they deny the state of mind side and from there will go into depression. Depression is not an emotion, but a depression of the emotion.

The feelings from both sides needs to be accepted 100%, or the person feels stuck. Going through the feeling is the way to learn what needs to be known and from there move on.

OPTIONS FOR USING METAPHORS

- **Goal Setting:** *Develop and check IM* with an emblematic phrase, formulated as true in the present time, which represents the transformation of negatives- symptoms, pains, lack- and the perception and realization of positives-- achievements, feelings, experiences.

- **Finding an Emotion** related to goal (check IM for Element, Aspects of Emotion, Orientation of Emotion, e.g. self, others, circumstances, things)

- **Emotional Stress Release** (*Thinking symbolically* about 5 senses, etc. related to stress/issue)

- **Color Balance** (check IM for Element, Aspects of related Emotion, clear with ESR)

- **Sound Balance** (check 14 Meridians and assess key Element, MAKE RELATED SOUND)

- **Food Testing/Food Balancing** (think about, see, hold, chew, smell, taste & *check IM*, consider possible symbolism of food as well as literal potential sensitivity)

- General Metaphor Balance "*As-You-go*" (based on each given muscle/Meridian/Element)

- General Metaphor Balance with **24 hours Element Assessment** (based on key muscle/ meridian/ Element)

METHODS OF FINDING/ DERIVING/ DEVELOPING METAPHORS

- Noticing- Free association and symbolic thinking

- Checking an IM while thinking, saying, visualizing, feeling, hearing, tasting, etc.

- For a given inhibited muscle, contemplating related muscle/meridian/element

- Checking 14 Meridians and contemplating metaphors of **Key Muscle/Element**

CLEARING/BALANCING MODALITIES USED WITH METAPHORS IN TFH

- Noticing, Awareness, (color)Visualization, Checking IM

- ESR

- Verbalization, Dialogue, Vocalization/ Listening, Tasting/Eating

- Touch Reflexes (SR, NL, NV, Meridians, O/I, AHP)

CATEGORIES OF METAPHORS:

MUSCLE METAPHORS

- Functional Metaphors: mechanical/physiological function seen as symbol

- Action/Association Metaphors: symbolic interpretation of action/range/gesture, personal memory device or association with muscle action.

MERIDIAN (ORGAN) FUNCTION METAPHORS

- Symbolic potential of traditional Chinese meridian names,

- Western Idiomatic or Physiological associations with related Organs/Systems

FIVE ELEMENTS METAPHORS

- The 5 Senses (including Touch/Fortification Metaphors as symbolic of literal aspects of goals/symptoms)

- Symbolism of the 5 Elements, Seasons, and the environment, nature

- Seasons, Life Cycles/Personal Power,

- Cognitive phases/Belief Systems

A PROTOCOL FOR FIX-AS-YOU-GO BALANCING

Using Metaphors as a Primary Intervention

1. **Establish a goal** that you feel enthusiastic about and you believe is possible.

2. Do any pretests that you normally do, (**Optional: Find related emotion**)

3. **Check and correct the Central and Governing meridians**, using the usual reflexes (i.e. Spinal Reflex if bilateral

weakness is found, then NL, NV, Meridians, etc., or use circuit location if you prefer)

AND--- as you use the touch reflex, refer to the metaphors for the Central and Governing meridians

Example, Central: "What subtle, small thing do you need to let go of?"

Example, Governing: "What burden do you need to release?"

4. Check and correct the rest of the meridians using the following guidelines for using metaphors

4a. Before using any touch reflexes, **offer the word or concept** of each metaphor and see what idea or meaning it suggests to the person being balanced in the context of his or her life/goals.

4b. **Present the metaphors as only possibly meaningful.** Clarify your own understanding of the traditional meaning of the metaphor, or of your interpretation in this context only to get ideas flowing.

4c. It may be fruitful to talk over all of the metaphors if it feels appropriate for both people, but it isn't necessary to talk about all of them. **Sometimes just one metaphor "rings the bell".**

4d. **Recheck the muscle** to confirm that it is now strong. If the muscle has remained inhibited, see if **contemplating the other metaphors** rings a bell for the person. Finally if you've exhausted the metaphors and the muscle is still weak, **continue with the touch reflexes.**

5. Repeat for each of the 14 meridians until no further imbalances are indicated by muscle tests.

6. Reassess your goal and how you are feeling, noting whether any of the metaphors will be valuable for you to hold in mind to enhance your ongoing awareness, dynamism, and balance.

A PROTOCOL FOR ASSESSMENT BALANCING

Using Metaphors as a Primary Intervention

1. Establish a goal that you feel enthusiastic about and you believe is possible.

2. Do any pretests that you normally do. (Optionally, find the related emotion)

3. Check and correct the Central and Governing meridians, using the usual reflexes

4. Check the rest of the indicators for the remaining meridians, recording results on the 5 element diagram, or the Midday Midnite/24Hour "Wheel". (4b. Use the Alarm Points to establish over-energy pattern.)

5. Assess the best place to begin balancing according to the 5-Element or 24 Hour cycles.

6. Once you've chosen the appropriate meridian to start with, refer to the metaphors associated with muscle/meridian/element, **following these guidelines:**

6a. Offer the word or Concept and see what idea or meaning it suggests to the individual

6b. Present the metaphors as only possibly meaningful. Traditional meaning doesn't dictate meaning.

6c. Sometimes just one metaphor "rings the bell", sometimes read several or all of the questions.

6d. Recheck the muscle. If inhibited, contemplate other metaphors; continue with the touch reflexes.

7. After correction, recheck all (under-energy) muscles to confirm that they are now facilitated. Correct any which may have remained inhibited, **repeating steps 6a-6d.**

(7a. Recheck alarm points- Use AHP for sedation of any over-energy which may have remained.)

8. Reassess your goal and how you are feeling, noting whether any of the metaphors will be valuable for you to hold in mind to enhance your ongoing awareness, dynamism, and balance.

Energetic Kinesiology, Conception and the Placental Chakra

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Abstract: Richard Utt in Applied Physiology, developed the notion of formatting. In Energetic Kinesiology we developed these concepts further. The minor or extraordinary chakras are formatted by holding the chakra mode on each hand or double chakra mode. The placental chakra, which we consider to be the first chakra, is also considered as one of the extraordinary chakras.

To understand formatting better I have developed a model of formatting and the treatment triangle that states that formatting captures an energetic imprint of stress on a particular structure. This enables the practitioner to access and balance the stress very precisely.

Formatting can add further depth to balancing muscles in Touch for Health. In Brain Formatting it is possible to format areas of the brain and then use supraspinatus and teres major to correct the format. Supraspinatus and formatting can be used for balancing the cerebral cortex and the limbic system, and teres major and formatting can be used for correcting the brain stem and spinal cord.

I have developed an energetic model of conception that states that the first cell – which comes from the union of the ova and sperm from the mother and father – has energetic properties from the mother and father, such as Ida and Pingala.

Part 1 The Balance Triangle

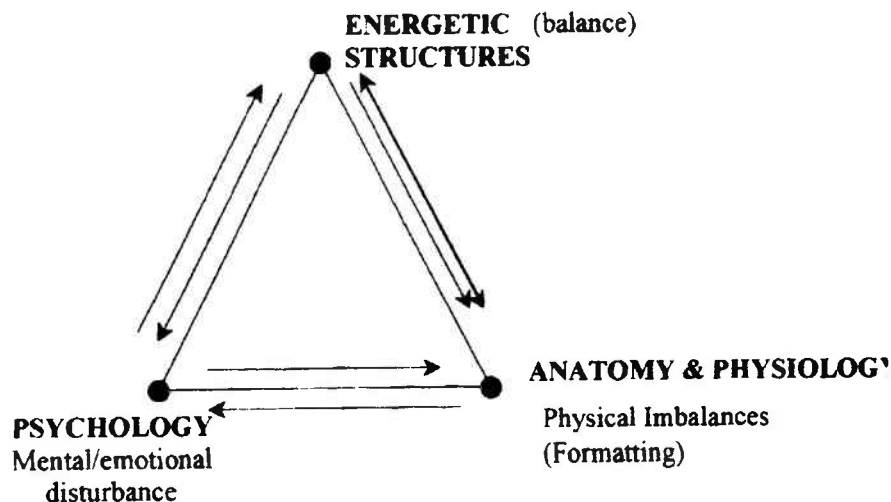


Fig 1 The Balance Triangle.

Every psychological imbalance has a physical imbalance. The psychological imbalances can appear as temporary mental/emotional

imbalances or as more chronic mental disorders. An example of this is feeling sad or lonely to having a full blown panic disorder.

These, in fact, have the same underlying neurology. They are just different degrees of innervation.

The physical imbalances associated with the psychological disorder are in both the anatomy and physiology. Every psychological disorder, whether it is a temporary feeling or a chronic condition has a neurological imbalance. This manifests in the neurotransmitters endocrine system etc. There is also an imbalance in the chakra system that accompanies this. The chakras, in fact, is where the imbalance is held.

For me, in Kinesiology what we do is remove stress. This allows the client to adjust and deal with the stressor and heal themselves. This raises the question how exactly do we remove the stress? Well the first step is to access the stress, and how is this done? There are many ways of doing this, and some of them require the practitioner to have a high degree of expertise and personal development.

Part 2, Formatting

Richard Utt in Applied Physiology developed a major breakthrough for the Kinesiologist called 'Formatting'. This has turned out to be, for me, the greatest gift that Kinesiology has to offer, because it allows the practitioner, no matter how well they are trained, to access the stress on a particular piece of anatomy or physiology. It also allows the practitioner to assess just exactly where the stress is held in the chakra system.

Formatting uses a combination of acupoints and finger modes. This draws on the Chinese tradition of acupresse and the meridian system, and the Indian tradition of finger modes which are derived from mudras. Using a combination of these, the energetic stress pattern of any anatomy and physiology can be accessed.

If music is an analogy, then the finger modes and acupoints are notes and the format is a chord.

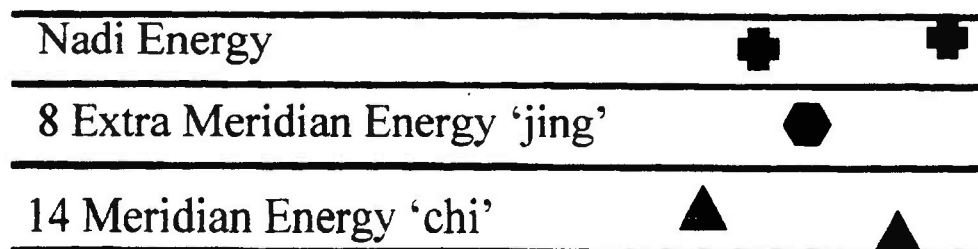


Figure 2: The format 'chord', a format is made up of individual 'notes' of acupoints and finger modes'. Source: Tobar 2002, Brain Formatting

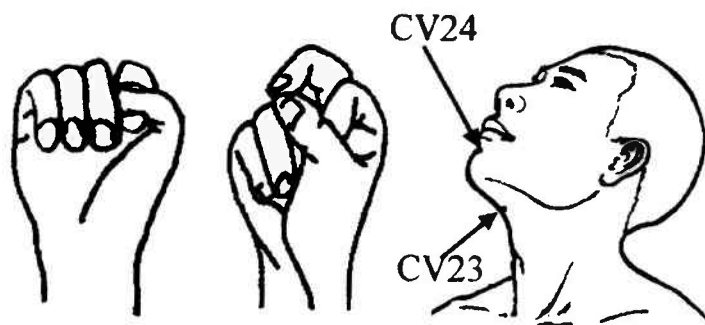


Fig 3, The Limbic Format, which uses the finger modes for Anatomy and Gland and the Acupoints CV23 and CV24. This is used for balancing the limbic brain (the emotional brain).

Part 3, The Triune Brain

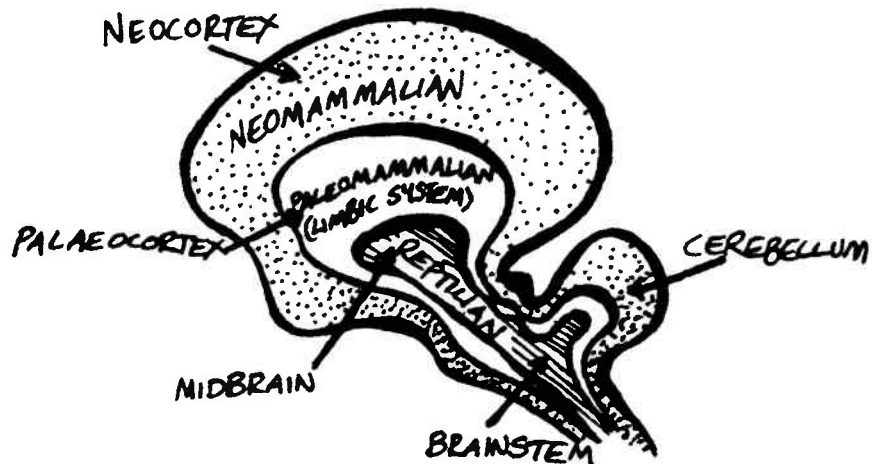


Figure 4: The Triune Brain

Reptilian Brain

Brainstem and cerebellum, reflex motion and instincts. Basic motor plans especially axial or whole body movements, including primitive behavioural responses related to fear, anger and sexuality that are elaborated by specific neural circuits. Innate behavioural knowledge: basic instinctual action tendencies and habits related to primitive survival issues.

Old Mammalian Brain

Limbic system or the visceral brain, habits and emotional brain. Contains newer programs related to various social emotions, including maternal acceptance and care, social bonding, separation distress and rough and tumble play. Affective knowledge: subjective feelings and emotional responses to world events interacting with innate motivational value system.

Neomammalian Brain

Neocortex, thinking brain. Can be influenced by emotions and can influence emotions by various appraisal processes. It is not a fundamental neural substrate for the generation of the emotional experience. Declarative knowledge: propositional information about world events derived especially from sight, sound and touch.

Part 4: Conception and the Placenta Chakra

Before conception, the five 'out of the body' chakras are there, joined by Sushumna, the major nadi. Conception brings about the union of an ova and a sperm. This union brings about the first cell. This first cell is the initial existence of a human being in this physical plane.

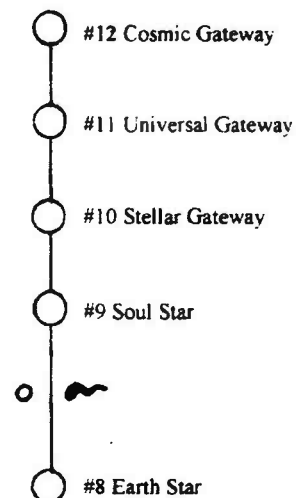


Fig 5, The five out of the body chakras that exist before conception. Sushumna is the major nadi that is represented by a line joining the five heavenly chakras. The moment just before conception is represented by the sperm and the ova between the Earth Star and the Soul Star.

Earth Star is the chakra below the feet, the other four are above the head.

This one cell, has the first of the physical chakras – the placental chakra. The placenta is an endocrine organ, therefore there has to be a chakra associated with it. This first cell eventually differentiates into the fetus and the placenta. The placenta receives all the nutrients necessary for the development of the fetus, while the placenta chakra transduces all the etheric energies that the fetus needs, while the other physical chakras develop. Ida and Pingala are also there on the first cell which are brought in from the Ova and the Sperm.

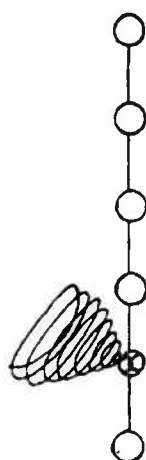


Fig 6, The moment of conception, the placental chakra is indicated by the spiral vortex which spirals into the first cell. Ida and Pingala are represented by the lines on the first cell. The five Heavenly Chakras are the same as in fig 5.

In the Tibetan tradition, they say that at conception you receive an indestructible red drop from your mother and an indestructible white drop from your father. This occurs from the mixing of the semen of the father and the blood of the mother. They also say that where these drops mix is where the individual consciousness enters. This, according to the Tibetans, is the heart chakra.

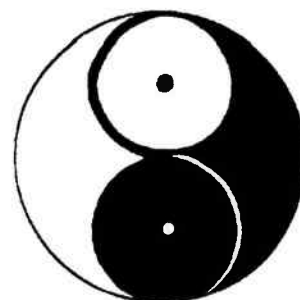


Fig 7, The Yin Yang of conception, this represents the first cell. Ida and Pingala are represented by the internal curved lines

The white drop then ascends to the crown chakra, and the red drop descends to the navel or solar plexus chakra. It is through the navel that the umbilical cord connects the fetus with the placenta. The crown chakra is our connection with the heavenly father, and the navel is our connection with the divine mother.

There is also a nadi that flows along the umbilical cord, this is called the Umbilical Nadi. This brings in etheric energy that is transduced for the fetus by the mother.

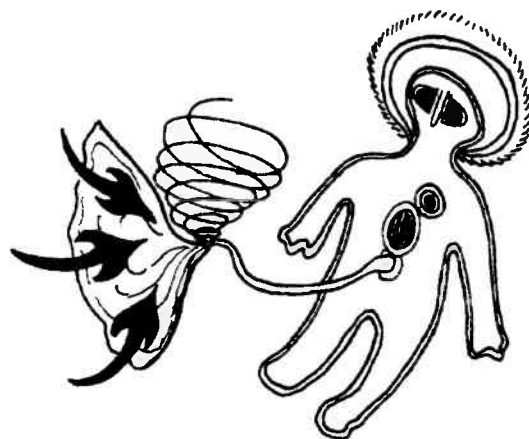


Fig 8, the fetus in the womb, with the umbilical cord, the placenta and the placental chakra. The black arrows represent the flow of etheric energy from the mother.

The sperm and the ova also contain the beginnings of Ida and Pingala. They join together with Sushumna to form the three major nadis, which are the mechanism for raising kundalini. Ida and Pingala are vital at

this stage for holding etheric energies in the developing fetus.

The union of the ova and the sperm also bring about the merging of the genetic material. Then cell differentiation leads to the separation of the placenta and the fetus.

The placental chakra allows time for the formation of the seven 'major' chakras and the numerous other 'minor' chakras. The seven major chakras form a system of psychology on their own.

At birth, the first thing that is done is to cut the cord. This practice does not allow the etheric energy to finish flowing along the umbilical nadi, or the placental chakra time to integrate into the navel or solar plexus chakra. Chakra Hologram practitioners have found that the stress of the individuals placental chakra can be found at the navel or solar plexus chakra.

The placental chakra often contains issues with the mother, how you give and receive from your mother.

There is now a practice called the 'lotus birth', where the cord is not cut, but allowed to break naturally. This allows the flow of energy along the umbilical nadi, and blood along the umbilical cord to finish flowing of their own accord. This not only allows the proper intake of energy and nutrients, but also empowers the individual to let go of the placenta of its own accord.

Procedure for balancing the Limbic Format

1. Test and correct Supraspinatus
2. Pauselock Limbic Brain Format::
Anatomy x Gland x CV24 x CV23
(See figure 3)
3. Retest Supraspinatus
4. Correct as necessary, using TFH skills

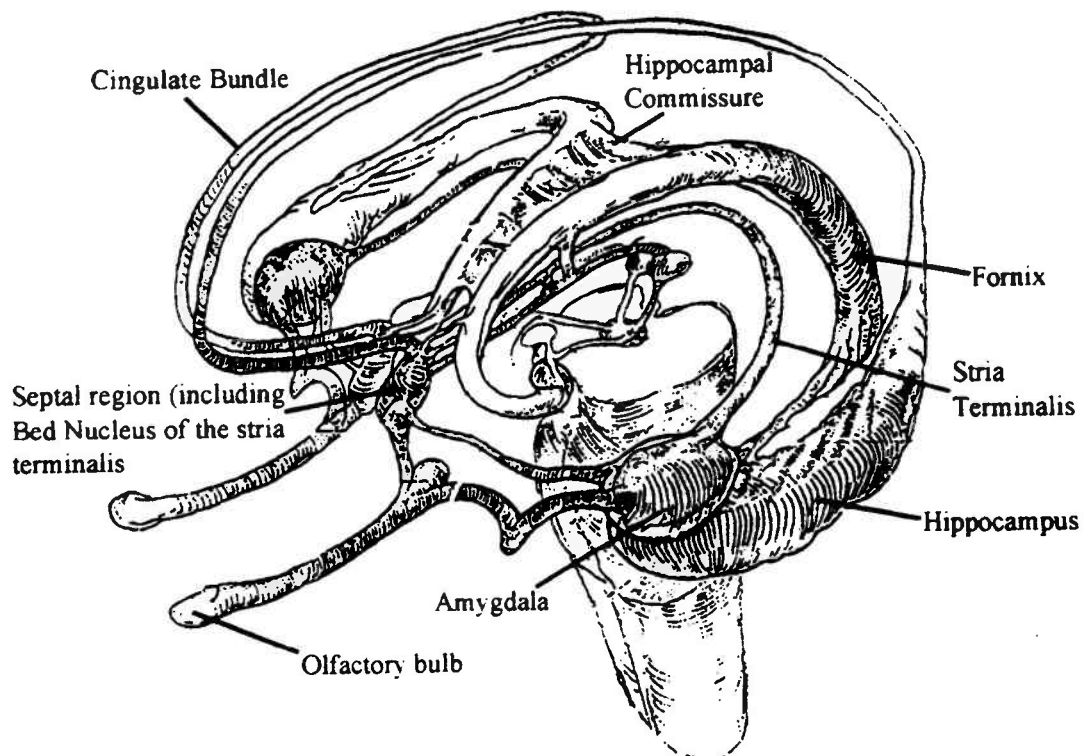


Fig 10, Diagram showing key areas of the limbic brain

Procedure for balancing the Placental Chakra

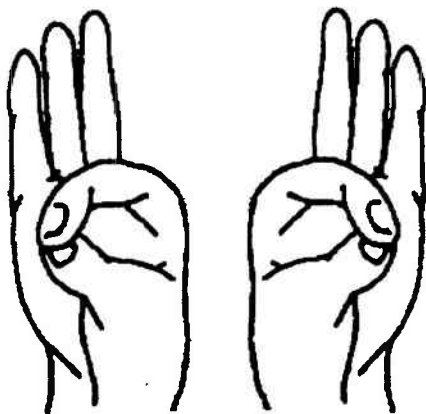


Fig 11, Format for the minor or extraordinary chakras is double chakra mode

1. Pauselock extraordinary chakra format, as above

2. Test whether balancing the yin or yang aspect as follows:

Yin aspect: Heart and Liver Alarm Points Simultaneously

Yang aspect: Small Intestine and Gall Bladder Alarm Points Simultaneously

3. Pauselock the priority aspect and explore the relationship

4. Find the priority correction technique, e.g. sound use AP tuning Forks, acupressure, coloured light, etc

Minor Chakra	In left		Out right		Anti C/W left		C/W right	
	Luo	Horary	Luo	Horary	Horary	Luo	Horary	Luo
Placenta	Ht5 Liv5	SI5 GB41	SI7 GB37	Ht8 Liv1	Ht8 Liv1	SI7 GB37	SI5 GB41	Ht5 Liv5

Acupressure for the Placental Chakra

Bibliography

Krebs, C.T. & Utt R.D., Anatomy and Physiology of the Brain and AP Formatting for Brain Anatomy and Physiology, 1994, Melbourne Applied Physiology, Melbourne, Australia.

McFarlane, K., & Tobar, H.O., The Chakra Hologram 2, 1999, Esoteric Kinesiology, Melbourne Australia

McFarlane, K., & Tobar, H.O., The Chakra Hologram, 1998, Esoteric Kinesiology, Melbourne

Paramhansa Yogananda Autobiography of a Yogi, Original Edition reprint, 1997, Jaico publishing house, Mumbai, India.

Powell, A.E., The causal Body and the Ego, 1992, Stellar Books, Manilla

Powell, Arthur E., The Etheric Double, 1969. The Theosophical Publishing House, London.

Swami Sivanada Radha, Kundalini Yoga 1st Ed. 1992. Motilal banarsidas, Dehli, India.

Swami Sivananda Spiritual Experiences 6th ed 1995, The divine life society, Shivanandanagar U.P. India.

The Academy of Traditional Chinese Medicine, An Outline of Chinese Acupuncture, 1979. Foreign Languages Press, Peking, China.

Tobar, H.O. Brain Hologram, 1999, Kinesiological Institute of Neurological Systems, Melbourne, Australia

Tobar, H.O. Neural Emotional Pathways, 2nd Ed, 1999, Kinesiological Institute of Neurological Systems, Melbourne, Australia

Tobar, H.O., Sacred Physiology, 2001, Mt Warning Kinesiology, Murwillumbah, Australia

Utt, R.D., Attitude with Essence, 3rd Ed., 1994. International Institute of Applied Physiology, Tucson, Arizona.

Utt, R.D. The Seven Chi Keys Workbook, International Institute of Applied Physiology, Tucson, Arizona.

A Case for Using Stress Release to Decrease Chronic Illnesses and Improve Hospital Survival Rates

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Abstract: Researchers found that patients with the greatest amount of change occurring in their lives were at greater risk for illness, and they were likely to have chronic illnesses, whereas patients with lower levels of change were more likely to have minor illnesses, and they were likely to be acute. Cardiovascular surgery outcomes can be predicted with pre-surgery interviews. Stress Release and Energy Kinesiology procedures could be of great value to such patients and an asset to complementary medicine.

During my first few years using Touch for Health, I recognized that some of the simplest techniques were the most effective. This especially applied to the Emotional Stress Release (ESR) technique and motivated me to write *Stress Release* in 1985 as my attempt to get this relatively simple psychological first aid technique into more hands. In this book we described modifications to the ESR technique to broaden its scope and to make it a useful primary tool to address any emotionally-distressed situation. Testing indicator muscles (IMs) on both sides of the body allowed us to look for incongruence between the left and right brain hemispheres. The brain integration and eye rotation techniques provided ways to defuse the stress.

In *Success Over Distress* (1990), I included topics such as goal setting, time management, and procrastination that are typical of orthodox stress management courses but incorporating muscle testing to build a bridge between what we do and orthodox stress management. I see an increasing need for more and more of our kinesiology-based stress management.

The Social Readjustment Rating Scale

In 1949, Thomas H. Holmes, M.D., a professor in psychiatry and the behavioral sciences at the University of Washington School of Medicine, began to study the case histories of more than 5,000 patients to see if

there was any correlation between the timing of major events and major illnesses. Out of that research has arisen the well-known Social Readjustment Rating Scale (*Success Over Distress*, p. 20), first published in 1967. The authors, Dr. Thomas Holmes and Richard Rahe listed 43 "Life Events" constituting various interactions of people with their environment and considered to make up essentially all the changes in life situations with which we have to deal. Many of the life events listed are desirable (e.g., marriage, outstanding personal achievement), some may be positive or negative (e.g., gain of a new family member, change in financial state, retirement), some are negative (e.g., death of a spouse, jail term, minor violation of the law) yet all such events, whether deemed to be positive or negative, require us to cope, adapt, or change to some degree. The points assigned to each life event represent the amount, duration, and severity of change required to cope with each event, averaged from the responses of hundreds of people. Marriage was assigned a value of 50 points, (50 Life Change Units). Thus losing a spouse by death (100 points) requires, on the average, twice as much readjustment as getting married.

The more changes you undergo in a given period of time, the more points you accumulate, and the more likely you are to

have a health change (serious illness, injury, surgery, psychiatric disorder, or pregnancy).

Magnitude of Life Events and Seriousness of Illness

In subsequent research, Wyler et.al. (1971) ranked various illnesses from least severe (headache, acne, psoriasis, and eczema) to most severe (manic-depressive psychosis, schizophrenia, heart failure, and cancer). When they took the mean average Life Change Units in the two years preceding the illness, they found that those persons experiencing least severe illnesses had the lowest scores, and those with the most severe illnesses had the highest scores. This makes sense, but this was the first research that I was aware of that was able to quantify the relationship.

Generally, the more Life Change Units you accumulate within a certain fixed period of time:

- 1) the greater your chances of becoming ill as a consequence; and
- 2) the more serious the illness is likely to be.

Therefore, your client's various symptoms and illnesses could result from the accumulation of life events which they have been experiencing. Doing ESR on those events will decrease their impact. If a client presents with a serious condition such as cancer, a safe assumption is that they have experienced high impact life change units during the six months to two years prior to diagnosis. The resulting stress weakens the

immune system so that the body is less able to protect itself from the development of cancer. Doing ESR on those life events should cause a positive change in the immune system just as has been proven by the Pennebaker technique (Dreher, 1992).

Is There a Place for Energy Kinesiology within Hospitals?

In 1969, a fascinating study appeared in the *Journal of Thoracic and Cardiovascular Surgery*. Fifty-four patients slated for open-heart surgery were interviewed and divided into four categories:

I. "Adjusted" These patients vowed the impending surgery as desirable and necessary and were optimistic that the operation would be a success.

II. "Symbiotic" These patients were achieving secondary gains from their illness. They didn't really want to improve, nor did they want to get worse.

III. "Denying Anxiety" These patients denied or minimized symptoms and signs of their illness. They couldn't talk about the surgery or death.

IV. "Depressed" At the time of the surgery, all of these patients were clinically depressed. Most felt hopeless. Their motivation for surgery was characteristically verbalized as "The doctors thought I should have it."

Three to fifteen months after the open-heart surgery, these were the results:

Group I (Adjusted)	No. of Patients 13	Improved 9
Group II (Symbiotic)	No. of Patients 15	Unchanged 8
Group III (Anxious)	No. of Patients 12	Dead 4 (3 during surgery)
Group IV (Depressed)	No. of Patients 15	Dead 11

The results speak for themselves. The majority of those patients who were optimistic about the surgery improved as a result. The majority of those patients receiving secondary gains from their illness did not improve as a result of the surgery. Of the 12 patients who couldn't talk about the impending surgery, 4 died, 3 during the surgery. Almost all the patients who were clinically depressed and had the surgery because the doctor thought they should – died!

Think of the incredible impact energy kinesiology interventions could have made in changing those outcomes. We have relatively simple, fast techniques for eliminating anxiety, depressed states, and identifying when clients don't trust the surgeon, the surgery, or their body's ability to respond positively. When eventually energy kinesiology practitioners can balance patients pre- and post-surgery in hospitals, everyone wins. Hospitals, doctors, and patients will all have more successful outcomes, and we could play a complimentary role in an expanded more integrated health care system.

References

- Dreher, Henry, "The Healing Power of Confession." *Natural Health*. July/August, 1992.
- Holmes, Thomas H., and Richard H. Rahe. "The Social Readjustment Rating Scale." *Journal of Psychosomatic Research* 11 : 213-8, 1967.
- Kimball, M.D., Chase Patterson. "A Predictive Study of Adjustment to Cardiac Surgery." *Journal of Thoracic & Cardiovascular Surgery*. December, 1969.
- Topping, Wayne W. *Stress Release*. Bellingham, Washington: Topping International Institute, 1985.
- Topping, Wayne W. *Success Over Distress*. Bellingham, Washington: Topping International Institute, 1990.
- Wyler, Allen R., Minour Masuda, and Thomas H. Holmes. "Magnitude of Life Events and Seriousness of Illness." *Psychosomatic Medicine* 33 : 115-22, 1971.

The Quirk Balance

Take the Stress Out of Your Relationship

Treat Your Relationship Like a China Cup

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Successful relationships are a hard thing to come by, given that two in four couples divorce and that three-quarters of people seeking therapy do so because of a failed or failing relationship. The primary cause of illness is disconnection and alienation. Illness is often driven by stress caused by feelings of helplessness, disconnection from others and loss of meaning. Resolution of the psychosocial stressors and concerns over feelings of isolation facilitates the healing process. Relationships often a cause feeling of helplessness and disconnection – the loneliest time is when one is with someone with whom one is disconnected from - or when we are disconnected from ourselves. Much of that disconnection is feeling unacceptable to our partners. We can feel unacceptance by others and by ourselves. Unhappy relationships are a **primary cause of stress**. Proper care for one of the most important aspects of our lives, our relationships, is virtually ignored or unknown. I believe relationships are more precious than your most precious possessions – your diamond ring, an expensive antique, your crystal, and your china. Think about the care you give them: You put them in safe places. You don't put them in the dishwasher; you don't take them on a picnic. If one gets chipped, it is ruined or will need a very special craftsman process to restore its usefulness and finery.

If you think of your relationship in the same way that you think of your precious items, you will have a greater chance of having a successful

relationship. Elloree Findley, a China Restorer, commented:

"1) once a cup is repaired, it is not the same, it is for decorative use only.

2) The major obstacle in restoring cups is that, frequently, they "spring" when broken. It's very labor intensive and expensive."

The same can be said for relationships.

Maybe Rhett Butler said it best when he told Scarlett O'Hara in *Gone With the Wind* "Scarlett, I was never one to patiently pick up broken fragments and glue them together and tell myself that the mended whole was as good as new. What is broken is broken—and I'd rather remember it as it was at its best than mend it and see the broken places as long as I lived..."

The relationship itself should be considered a *China Cup*. Respecting its preciousness is the very best circumstance under which it can grow. Nicking the relationship (the *China Cup*) with blame, harsh words, criticism, derision, sarcasm, and defensiveness may leave cracks in it. You may choose to keep the cracked *Cup* but it will never be the *Cup* it was before the crack. When a relationship is cracking or in danger of being cracked, the victims of this demolition seek help and we, as practitioners of mental and physical health will see these people in our offices. The state of "cracked ness" is an extreme state of stress.

Ten rules for maintaining a successful relationship (ref 9) are the following:

Rule #1 Don't talk your partner out of loving you.

Rule #1a Keep secrets! Do not play true confessions about past relationships or negative thoughts about your partner.

Rule #2 Learn to love your partner's quirks.

Rule #3 Respond positively to your partner's requests 70% of the time.

Rule #4 Be a partner who creates a safe haven.

Rule #5 The partner who brings up the issue needs to be heard completely before the other partner brings up any issues.

Rule #6 Let your partner know you are going to make a complaint before you launch it.

Rule #7 Always respect your partner's input, as an option.

Rule #8 When an "ouch" is over, it must really be over.

Rule #9 Honor both your own need and your partner's need for space without violating the space.

Rule #10 Make sure every day of your relationship is better than the day before.

Let's take Rule #2, "Learn to love your partner's quirks." It is amazing how many people fall in love, or make a partnership of some kind based on the persons assets, ignoring their liabilities and then proceed to try and change those traits (positive or negative) once the relationship is established. When I see a couple I ask them what drew them to each other. More times than not, it is the very thing that now brings them in to counseling. Those unique, special qualities somehow become irritants.

Habits and personality traits are deeply rooted. You've got them, your partner has them and they probably aren't going to change, let them be. You are not going to change who your partner is. If quirks are constantly challenged, the relationship will fail. Knowing your partner's quirks is like having a map to your partner's heart. Learn

to love, to joke, and laugh about them together. Knowing your partner's quirks and having them irritate you is one thing that will not take care of the relationship. It is like knowing there are stains on your *China Cup* and hating the *China Cup* for those stains. Knowing your partner's quirks and honoring them is a way of taking care of the relationship. Knowing that there is a stain and appreciating it or dealing with it as best you can will preserve the *China Cup*.

I find that most couples consist of a "neat-nick" and a "less than tidy" combination; one who folds the towel in half and the other who folds it in thirds; one who puts the toilet roll on with the paper flowing over the top and supraspinatus or subscapularis. "Do relevant brain integration or eye rotation corrections."

Ian White (ref 10) states, "...bring forth the positive qualities that reside deep inside every one of us. Their activation allows us to replace fear with courage, hatred with love, insecurity with self-confidence, etc."

10 When the conflict or reversal is resolved, or needed essence is positive. Then check the trait that was to be changed. MT. If strong, the quirk balance is complete.

11 Check to see if balance has held (5 finger over navel – MT and correct imbalances)

Wayne Topping (ref 9) explains the necessity of this, "Because the personality trait statement was so deeply held, reprogramming it will usually create a number of imbalances..."

12. If the MT is weak, check for that trait in past relationships, with members of family of origin, with self. Repeat for each that is weak on MT. Repeat procedure. The other who prefers the paper hanging down from under the roll; one who is always on time and the other who feels time is relative; one who often doesn't feel a meal is complete unless there is a desert and the other who never eats deserts; one who often comes from a family who opens presents on Christmas Eve and

the other who has never opens packages until "after Santa has come;" one who prefers opening birthday presents whenever and the other who may have a ritual that everyone in his or her family has followed for generations; one who likes salad dressing on the side and the other who cannot imagine a dry salad. These positions are not right and wrong, they are quirks in a person – they are preferences. They are differences.

After studying couples for over 20 years, John Gottman (ref 3) wrote **The 7 Principals for Making Marriage Work** and reported that 69% of arguments are the same arguments that the couple always has. Gottman calls these perpetual problems. I suggest that some of the perpetual problems are quirks that your partner has not accepted. A partner needs to have an interest and delight in knowing these quirks and totally accept them. Don't expect that they will change – Quirks are part of the person that you fell in love with. They existed before you met. They will exist while you are in the relationship and will exist after you, should the relationship end. Learn to accept the quirks. If you are lucky you can learn to love them and find delightful humor in them.

Personality traits and preferences form our uniqueness and make us the persons we are. Each of us takes care of our selves in ways we feel are best for our health and well-being. Sometimes the ways we choose to manage our health may seem quirky, but we have to do what we feel will be the best for ourselves. It is fascinating to ask your partner, without any preconceived idea or judgment, to explain why he/she chooses to do a particular thing. You might be delighted and surprised at the reason – you will get to know your partner better!

Every partnership, at one time or another has arguments, disagreements, criticisms, defensiveness, and stonewalling. Arguments and disagreements may be a healthy part of a relationship. Sometimes they mean that there is something to argue and disagree about that is important to each partner. Criticism, defensiveness, stonewalling and contempt are the reasons that make a relationship fail – Gottman calls them the "Four Horsemen of the Apocalypse." He calls "contempt the

sulfuric acid for a relationship." Many times criticism, defensiveness and stonewalling are a result of trying to change your partner and not accepting your partner's quirks. If and when attacks and/or defensiveness enter the relationship, the damage needs to be repaired. Some of the perpetual issues, quirks in the relationship will never be resolved – and that is OK – but they do need to be regulated in an atmosphere of friendship and deep respect. Gottman calls this moving from gridlock to dialogue.

When two people get together and identify the quirks, can accept them and can even joke about them, there will be a happy relationship. The acceptance of quirks is a basic way of respecting a person for who he/she is.

This is not new news. So why do we try and change our partners? Kinesiology is a way of discovering what is going on inside of us that pushes us to crack *our cup*.

The Quirk Balance

1. Pretests
2. 14 muscle, fix as you go balance (or any other balancing techniques) (ref 8)
3. Think of a trait, in your partner, you would like to change. MT
4. If it is strong, think of another trait you would like to change – or think of a trait your partner would like to change in you.
5. If it is weak, check for the emotion. MT the following statements and clear, using steps 6-9 before going back to the quirk.
 - "I am willing to release the need for the problem."
 - "I am willing to benefit from the positive change."
 - "I am willing to implement the goal." (ref 2)
6. **MT for conflict, reversal or needed essences.**
7. If it is a conflict, one effective technique is to use the Luescher Color Conflict procedure. (ref 5) Check for the emotion when the conflict is discovered.

Alfred Schatz states, " The five conflict colors show us where the problem is. Many years of experience in psychosomatic clinics have shown that (muscle testing with) the Luscher conflict colors can be used to point out a way for the solution of conflicts With the Luscher conflict colors it is possible most of the time to unravel unconscious causes of conflicts in private and professional relationships." See Appendix on Luscher Conflict colors,

8. If it is a reversal, one effective technique is to use Callahan (ref 1) "Despite this reversal, I deeply and profoundly love, appreciate and accept myself" 3 times while tapping SI-3 + TW-3 (Gamut Spot). Check for the emotion for the reversal.

Callahan uses the phrase, "I profoundly and deeply accept myself with all my problems and all my shortcomings." He stresses, " The temporal nature of the affirmative statement suggests that the individual who is "corrected" when he repeats it is deficient in self-acceptance and denigrates himself excessively, at least in the area where he is reversed."

9. If an essence is needed, one effective technique to ask whether Bach (ref 4, and 6) Bush (ref 10), Perelandra (ref 11) or Barometer (ref 7) essences (or any other essence that you use) would be helpful. Find the specific essence. MT. Test for number of drops needed either under or on the tongue or at what level of aura and use the

References

- 1-Callahan, Roger *Five-Minute Phobia Cure*. Wilmington, DE: Enterprising Publishing, 1985
- 2-Gottman, John. *The Seven Principles For Making Marriage Work*. New York: Three Rivers Press 1999
- 3-Hyne Jones, T.W. *Dictionary of The Bach Flower Remedies, Positive and Negative Aspects*. Great Britain: The C.W. Daniel Company Ltd. 1991
- 4- Luscher, Max. *Luscher Color Test for Conflict Situations*. As presented at the 1990 Touch For Health Annual Meeting and adapted by Alfred Schatz, p. 154
- 5-Stokes, Gordon/ Whiteside, Daniel, *Orchestrating Structural Kinesiology*. Burbank, CA: A Three In One Concepts Publication. 1989
- 6-Schasfoort, Coby, *The Hof van Axen BAROMETER ESSENCES*. Burbank, CA: A Three In One Concepts Publication.
- 7-Thie, John F. / Matthew A. *Touch For Health pocketbook with Chinese 5 Element Metaphors*, Malibu, CA: Touch For Health Education Publishers. 2002
- 8-Topping, Wayne W. / Topping, Bernie. *What Makes You Tick, Is What Makes You Tick. Personality Traits and Their Relationship to Illness*. Bellingham, WA: Topping International Institute. 1987
- 9-White, Ian. *Australian Bush Flower Essences*, Sydney, Auckland, and Toronto, New York: Bantam Books. 1991
- 10-Whiteside, Daniel. *THE PERELANDRA Garden and Rose Essences*, Burbank, CA: Three in One Concepts Publication.

Appendix

Luscher Color Test For Conflict Situations

CONFLICT – COLOR BLUE

Cause of the Conflict: A conflict has arisen because deep inside you feel that there is no longer mutual trust in a once trusted relationship.

Suggestion: When mutual trust no longer exists in an important relationship and you hear an inner warning that something is wrong and feel like withdrawing, it is important that you do not withdraw. Put aside your own interests and intentions until you learn what is going on with the other person. "Walk in the other person's shoes" until you completely empathize. Take the time necessary to understand this person's situation and the reason that the person is acting the way that he/she does. Understand and accept this with a relaxed calmness until you can accept their actions as if they had been your own. (Note: Understanding does not mean to agree or to go along with.)

CONFLICT – COLOR GREEN

Cause of the Conflict: The cause of the conflict is that a person in your life is trying to dominate you through manipulation. This person demands that his/her way is the only way and expects that you respect his/her authority completely.

Suggestion: If anyone tries to manipulate you into believing that they feel is absolutely correct and demands that you blindly follow, you must internally free yourself from that person totally. It is essential that you keep centered and maintain your independence. Under no circumstances should you be tempted to try and have that person see things your way. You must not expect acknowledgment or approval because, if you do, you make yourself dependent upon whether or not they approve or acknowledge you.

CONFLICT – COLOR ORANGE

Cause of the Conflict: The cause of the conflict is that you are disturbed and irritated because of all the time, effort and perhaps

money, you have put into a goal that has not been achieved. You are not experiencing satisfying results.

Suggestion: If all the effort you have put into this goal has not given you satisfying results; change your intention or at least your attitude. Instead of continuing to commit yourself further into the attainment of this goal, distance yourself from it and take another look at what you are hoping to achieve. Step back and see what develops. Trust that what is to happen will happen. What will be will be.

CONFLICT – COLOR VIOLET

Cause of the Conflict: The cause of the conflict is that there is a lack of agreement with an important person. You two are not on the "same wave length."

Suggestion: Go in tune with the other person and feel his/her emotions in order to understand and consider them more closely. Once you have clearly heard the other person's point of view and that person knows that you know, then you must speak openly about your own desires and feelings. It is important that the other person understands your position as well, but it is not necessary. If, in spite of all your efforts, no mutual understanding takes place, then you should tolerate and respect the peculiarity of the other person. Detach yourself completely from the wish for mutual understanding. It must be OK to completely disagree once the individual positions are completely clear. Agree (within yourself) to disagree.

CONFLICT – COLOR YELLOW

Cause of the Conflict: The cause of the conflict is because what you hoped would happen has already been disappointed.

Suggestion: Stop wishful thinking. Your hopeful expectations will be disappointed. Stop forcing what is not possible and free yourself from the illusions that make life seemingly more comfortable. Your real inner freedom will come from a "solid dose" of reality testing. Only with this inner freedom will you be able to recognize the possibilities life can and will bring you. Free yourself from the illusions and you will be free to choose and act in new directions.

John F. and Matthew A. Thie's Carpal Tunnel Syndrome Correction (ref 1)

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About 10 years ago Alice began suffering with Carpal Tunnel Syndrome. It began when she was running during her workouts in the morning. Her hand would be numb. She would shake her hand and it would subside after a few hours. A year or two later it began to interfere with her tennis. During a long rally her hand would get numb to the point of the racket coming out of her hand. About that time Kate Montgomery spoke at the TFH Conference about CTS.

She defined CTS as "...an entrapment and compression of the median nerve due to a structural and postural misalignment brought on by the overworked and over-strained muscles of the arms and hands, leading to a muscle strength problem. Persons who perform continuous repetitive movements are at higher risk to develop CTS." (ref 2)

The exercises in Montgomery's book worked for several years. At this time Alice began her avocation of video editing – an intensely detailed, repetitive right-handed endeavor. The CTS returned with a vengeance and nothing seemed to work. The worse part was waking up in the night with her right hand aching with such pain that sleep was impossible. Her hand felt swollen and painful. This continued on for a year. She felt that the dreaded surgery was inevitable. On Christmas Eve 2001 we were walking with Dr. Thie on the beach in Malibu. She was shaking her hand and telling him that the pain had become so awful it was interfering with too many aspects of her life.

Dr. Thie performed the following procedure:

1. MT the Opponens Pollicis Longus, in the up and down positions and on both sides.

2. Use NV for Spleen (between 7th and 8th rib, usually on the left side.)
3. Re check Opponens Pollicis Longus.
4. Run the meridians in the arm where the CTS is located:

Heart Meridian: Armpit, underside the arm to the tip of the little finger –squeeze the tip of the little finger

Small Intestine/Triple Warmer meridian combo: Squeeze the tip of ring finger, on top of arm to the opening of the ear.

Circulation Sex Meridian: Nipple, underside of arm to the tip of the middle finger – squeeze the tip of the middle finger.

Large Intestine Meridian: Squeeze the tip of the index finger, on top of the arm to the flair of the nose.

Lung Meridian: Chest (lung), underside the arm to the thumb – squeeze the tip of the thumb.

Within 30 minutes the pain from the CTS was completely gone and remained gone for about 3 months. The pain or numbness of CTS begins to return occasionally and with the simple procedure, subsides.

We began using this same procedure (preceded by a 14 muscles, fix as you go balance) with clients who presented with any kind of arm or shoulder discomfort, including but not limiting it to CTS. Clients with shoulder pain (indicating a rotator cuff problem), over use of the arm in working out or swinging golf clubs improperly. One client had pain in the palm of his hand just below his thumb for several years. His doctor told

him it was arthritis. This procedure completely alleviated the pain. Another client said that she had a bulging disk and was in a neck brace, fearful of needing surgery if the "disk should pop." After a 14 muscle, fix as you go balance and this CTS procedure she had no pain and took her brace off, moving her head from side to side without discomfort.

For clients, we give them these simplified instructions:

1. Put your thumb and pinkie together and try to pull them apart with the other hand. Do this with hand up and hand down with both hands
2. Rub between the 7th and 8th ribs on both sides
3. Try and pull your thumb and pinkie apart again on both sides and in the up and down position.
4. Run your hand, on the side of the sore hand, shoulder (or both sides with the neck), beginning with in your armpit and go down, first on the inside of your arm and then on top alternating from under to on top as you go from finger to finger, from little finger to the thumb, squeezing the tips of the fingers when you get there. Use these pneumonics:
Tickle me pink (armpit to pinkie)
Ring me up to call me up (ring finger to ear)
Nip to Tip of the middle finger (nipple to "the bird" finger)
Index finger to nose (if you were going to pick your nose you would probably use this finger)
Lung to thumb.

We usually get a laugh, it is easy to remember and IT WORKS.

References

1. Thie, John F. & Matthew *The Carpal Tunnel Repetitive Injury Syndrome* Presentation Touch For Health Kinesiology Association Annual Meeting 2002
2. Montgomery, Kate *Carpal Tunnel Syndrome, Prevention and Treatment*, 1992 Sports Touch Publishing