

# FOR HEALTH SPRING, 1991

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# KEEPING IN TOUCH WITH JOHN F. THIE, D.C.

Dear Friends of Touch for Health Foundation

This issue of our newsletter, which has yet to be named, contains reports from Warren Jacobs, M.D. on being able to prevent recommended surgery for a severe back problem; Illse Jackobovits, R.N. on her ability to assist patients requiring strong medication for pain, when the time for a second dosage was not passed. When I read these reports I feel deeply indebted to all the

people around the world who are sharing the TFHS techniques and using them so effectively.

The meeting of the North American Touch for Health Association has been changed back to the University of San Diego. The dates for this meeting are July 10-14, 1991. The committee planning this meeting met January 19, and

there were 23 planners who had a great time sharing and working together. It will be a wonderful meeting. See the back cover of this issue for more information and plan to attend.

We have been adding contributing editors as you may have noticed. You do not have to be a contributing editor to send in your reports. We are gathering case reports, best case studies, and anecdotal materials that will give us ideas on what in the TFHS should be researched further.

We have a lot of evidence that what we

do in the TFHS makes people feel better. We do not, however, fit into the "scientific model" of research which defines human body in biochemical reductionism/mechanism terms. We fit more into the vitalism, meridian philosophies of the energy models, which are rejected by some scientists because we postulate that life is affected by "energy, or a vital force", which is not easily measured by current machines. Homeopathic methods,

acupressure, and TFHS incorporate the belief that the emotions, the mind, and the body are all affected together.

We are interested in gathering reports from people using the TFHS. What are the outcomes of people utilizing these methods? We are not looking for explanations of why the results occurred. We are interested in the results of

the TFHS techniques. In other words, we want to know who had what complaint, i.e.; how was life not working for them. Also, what specifically was done for the person with the complaint and what were the outcomes; immediate, and long term.

The reports included in this newsletter are examples of what we hope you will share from your experiences. It takes some time to write them down, but it's really worth while for everyone to have this information.

Here is an example from my use of the continued on page 7





#### **LETTERS**

#### Songs of the Islands

Please let me know if the Touch for Health books are available. Are there any certified instructors here on this island (Maui, Hawaii)? I'd also like to purchase a meridian/acupuncture chart. I'd like to become a Touch for Health Foundation member and receive their newsletter.

I used a book, which I borrowed, on a young man of 30 who was in a wheelchair for five years. Applying what I learned from the book along with some basic massage and reflexology, he is now walking and he threw his wheelchair in his backyard!

—Aloha, Marama Song Hawaii, U.S.A.

#### Holland

First of all I want to wish you and all the best for this year.

Thank you very much for your kind letter of 20, November, 1990. Indeed we don't know each other, but by using and teaching Touch for Health, I feel part of "the big family".

This year I have spent seven months in Ghana to teach foot reflexology and Touch for Health in bush hospitals and in the military hospital in the capitol, Accra.

It was a very happy and inspiring time. Ghanian people are very kind and open to natural healing. The doctors loved to learn new techniques and are very interested in Touch for Health.

In Accra, I taught ten doctors and a lot of nurses and physiotherapists Touch for Health I. They all were very enthusiastic about the good results. I still have to write down all my experiences. This spring I intend to teach advanced classes in Touch for Health II.

A research on back problems and working with Touch for Health may be very interesting because the Ghanian has a lot of these problems, due (as far as I can see) to bad posture and the heavy loads they carry on their heads. In fact, their whole way of walking and moving is very interesting to study.

I can talk hours about this but I will save this for a later time. I hope to meet you this summer on the annual meeting and like to discuss a lot of things. For the time being, God bless you.

—With warmest regards,Aria den HartogDen Haag, Holland

# A MESSAGE FROM NORMA HARNACK, R.N.

Ave you received the Touch for Health membership directory? It has proven to be very useful already. Please pass it around. They will be printed again before the annual meeting and hopefully all errors will be corrected and all new members will be included. If you are interested in ad space please have it to the national office before June 1, 1991. Ads are \$500 per whole page, \$250 per 1/2 page and \$150 for business card or 1/4 page. These directories are of the instructor and higher membership levels benefits. They will be available to general members at a cost of \$15.

For further information about our newly organized U.S.A. Touch for Health Association, please contact us.

Street St

Norma Harnack, R.N. P.O. Box 430009 Maplewood, MO 63143 U.S.A.

## CHIROPRACTIC IMPROVES

30%

Case Number One — It Wasn't the Chiropractor Who Improved!!!

-Hap & Liz Barhydt

A chiropractor asked us if we could help a man who had recently had a stem stroke. The man was having difficulty standing and walking and wanted to improve his performance. We noticed that whenever he tried to stand or walk that he looked down. We found that his leg muscles were reactive to his neck muscles, i.e., whenever he looked down, his leg muscles weakened. So we taught him to do the Neck Release to strengthen his leg muscles and how to do the Five Finger Quick Fix and Cross Crawl to improve his walking coordination. Because of his condition, we taught him to cross crawl while lying down, lifting first one leg and the opposite arm and then lifting the other leg and arm. We showed his wife how she could help him with this to get him started. The chiropractor reported that "he was 30% improved."

"Thank you for Touch for Health... I love it...It works...I want to pass it on to everyone." —Vicki Fletcher



#### TOUCH FOR HEALTH IN NURSING

Use of Touch for Health Hospitalized Patients —Illse Jackobovits, R.N.

Working as a nurse at a local hospital, in the Intermediate Care Unit, I have had frequent opportunities to use Touch for Health with my patients and colleagues during the past four years.

I admit that I was very shy in using it in the beginning, but after a while I did not need the manual anymore. I just traced the Meridians most of the time. It has been fun to see the quick results of relief of pain, or producing a feeling of relaxation, and being a learning experience for the patient also.

I have been able to trace only in two cases the effects of the Touch for Health methods I used on two patients by comparing some laboratory results ordered by the physicians.

If there are no lab results available to be sure of the effects and changes that the Touch for Health methods have produced in the body, we would have the information from the patient as to the amount of relief of pain, his feeling of relaxation and general improvement, which he can place with a number on the scale from one to ten before we start and after we finish the procedure. I believe it is difficult to measure the effect Touch for Health produces in a person, because we are reaching out in a different, caring way to help ease some pain or discomfort! And sometimes that is all they need.

Let me present two cases without lab results.

T.H., 45 years old, two days post-hysterectomy, was still complaining of severe incisional pain and was asking every two hours for her pain medication (Morphin Sulf. IM was ordered every three to four hours). The RN was concerned and told us about it. Since we couldn't medicate her for two more hours, I offered to use a Holistic Method, called Touch for Health. The patient agreed, and I traced the Meridians and touched the NV points, and explained to her how this could help her. This happened at 7:00p.m. The patient did not ask for another pain medication, but her roommate was very noisy and the patient needed something to sleep, so she received a shot of MS at 3:00a.m. The next morning she received another one for moderate pain. (Her niece took Touch for Health the following month.)

S.F., 68 years old, had a history of open heart surgery and other bypass surgeries over the past ten years. He recovered well from the present re-do open heart surgery, but he was not eating much and was very depressed. He was discharged on the seventh day with the same problems; his physician was hoping he would do better at home.

He was re-admitted two weeks later to our floor with intense abdominal pain. He had lost ten more pounds, had not been eating or drinking much. Because of his past history, his diagnosis was "ischemia of the bowels." He was having abdominal pain when I started the shift with him, but he was not due for another MS shot for two more hours. Since I had used the Touch for Health methods on him two weeks earlier, he agreed to the use of them again. I traced the Meridians, the Deep Meridian Massage and the NV points. He felt much better and went to sleep. The surgical resident explained to him two hours later, that all the tests had not revealed anything,

therefore the only way to obtain a diagnosis was by doing a Laporotomy that afternoon. The Morphin shots were discontinued "to avoid masking anything." I told the resident that I was glad I knew a holistic method that helped the patient to relieve his pain. Before I went home at 3:00p.m., I traced the Meridians again and used the NV points, and taught the next RN how to do it. In the morning I found a radiant patient with the happiest smile in his face, his eyes sparkling, his normal color was back and NO pain for 24 hours! Also, no surgery. He gave me a big hug; he understood that Touch for Health had helped him to get back on his feet. The doctors never found out what had been wrong, neither how he got well so quickly, and sent him home the next day.

Here are two cases with laboratory results added. R.C., 60 years old, a diabetic, had open heart surgery on February 12, 1990. He was doing well, but suddenly on the fifth day he became nauseated, was vomiting, had severe abdominal pain, was diaphoretic and unable to eat. The next day a general surgeon was called because his white blood count was increasing and his condition had not changed. The surgeon explained to him that he would need a laparotomy to see if he had an abscess, appendicitis or any other infection, since no test was able to show a cause for the pain. While waiting for the surgery, I asked him if he would like to try the holistic method called Touch for Health to see if he would feel a little better, and he agreed. I traced the Meridians, then used Deep Meridian Massage and touched the NV points. In about four minutes the patient started to improve, the color returned to his face, his eyes were sparkling, and the pain disappeared! His nurse checked the abdomen, putting hard pressure on those areas that had been extremely tender before...no more pain! The patient was able to sit at the bedside, ready to eat his super. The physicians were notified and came back to verify that the patient was indeed feeling well again. The white count (WBC) came down to normal and the patient was discharged the next morning. We explained to the physicians what we did. They shook their heads, saying, "Whatever works!"

E.M., 73 years old, admitted with TIA (transient ischemic attack) by the end of November 1990. She underwent two angiograms and reacted to the dye used during the procedures, provoking a kidney reaction. She spent several days in intensive care and was unable to go for her surgery of the carotoid arteries to improve the circulation to her brain, because her BUN was too high. On December 6, her BUN was 100, on December 7, it was 97 (normal: 10 - 20). The patient was very frustrated, anxious and concerned about going for her surgery. On the evening of the 7th, she told me about her problems. I explained to her that positive thinking would help a lot. She agreed but didn't know how. I used the ESR points with Guided Imagery, having her visualize perfectly well functioning kidneys. She repeated the imagery several times during the night. The next morning the BUN showed a result of 77. The following day it was down to 62. She went for her surgery that afternoon and did very well during the three days in ICU. Six days after using the ESR method, her BUN was 42. The physicians were very pleased, and the patient very proud of

continued on page 4



### **OFF THE CRUTCHES**

Back to Work Full Time After Four Balances

—Warren Jacobs, M.D.

This 64 year old white male presented on January 14, 1990 on crutches with pain in the left groin and thigh, weakness in the legs and obvious wasting of the quadriceps, scoleus and gastrocnemius muscles.

He gave a history of left groin pain, onset at Thanksgiving 1989. He saw another physician in Escondido on December 4, 1989 who examined him — ruled out rectal or prostate trouble, gave him some medication, and ordered laboratory tests of blood.

He was seen again by that doctor December 11, 1989 and in addition to the original left groin pain, he had pain inthe right thigh to the knee. X-ray of L-S spine was done showing many osteophytes and narrowing of the L3-L4 space. He was given medication of steroids and Parafon Forte (a non-steroidal anti-inflammatory drug).

Since he did not improve on these medications — physiotherapy was ordered after a 48 hour trial or medication.

The patient reported some improvement at first, but then doing exercise suffered severe pain. This showed severe spinal stenosis as the major finding. Actually, the radiologist reported that this man had a congenitally short A-P canal diameter which was further compromised by the hypertrophied ligamentum flavum. In ordinarily language he was born with a narrow space for the nerves to pass to the lumbosacral areas and this space was further narrowed by an overgrown ligament producing a too narrow passage for the nerves and most likely compressing the nerves causing pain and weakness and muscle wasting.

At this point, referral to the neurosurgeon was discussed and I feel strongly that had Alex gone with this picture, he would have been on the operating table in short order.

It was at this point that he consulted me. After reviewing the studies and his physical exam, I told him that surgery was probably most likely, but when he pressed me, I agreed to use a different approach — but only for three weeks because I was fearful of the permanent effects of prolonged pressure on the nerves as they went through this stenotic canal.

On January 10, 1990, his first visit, I gave him Dr. Thie's

standard 14 muscle balance.

He returned two days later on January 18, 1990, walking better and the balance was repeated — this time including questions for the emotions indicated by muscles found weak — that is in addition to massaging the neurolymphatics, he was asked the question relating emotion to each weak muscle. He returned for his third visit on December 22, 1990 reporting he was pain free — off the crutches and I utilized a balance in the method of Dr. Diamond which was dramatically effective. So much kso, that I felt he was ready for quadriceps drill and he began to exercise daily to strengthen the wasted quads actively.

He was much improved when next seen on February 5, 1990. He showed an increased quad strength and was eagerly balanced again. He was taking no medicine and was back to work full time.

He was seen for follow-up on February 26, 1990 for balancing and finally again on May 2, 1990 when he was discharged from care.

At that time quad strength was 85% of normal.

He showed some mild restriction of abduction of the right hip. Some tightness of one hamstring, but was pain free and on no medication.

I had the opportunity to see him when I was pleased to be invited to his son's wedding. He looked great in his tux, and walked down the aisle without a trace of a limp.

Alex's wife, Anne, came over to me and said his recovery was a "miracle".

Let's look for miracles.

So, here is a case of proven organic pathological change. No one could fault a neurosurgeon for operating, but with some faith and a short trial of other tools a wonderful result was possible.

I'm so glad I met up with John Thie.

Editor's note: Warren Jacobs is a medical doctor with many years of practice in San Diego, now in Perris, California. He met Dr. Thie years ago when Dr. Thie lectured at a Holistic Health Association Meeting and was profoundly effected by the effectiveness of combing practitioner's knowledge with the patient's participation, in the wellness process. Warren is on the Board of Trustees of the Touch for Health Foundation.

#### TFH In Nursing (from page 3)

"her work"! She promised she would use it in the future.

The two methods I used with these four patients are the Meridian brush or tracing, and the ESR points. Both are taught in the basic Touch for Health course, and are very easy to use. They always help the person on different levels, in fact, nobody has ever said that it worsened a situation. I always add that they can have their prescribed medication if Touch for Health doesn't help.

When using the ESR points I like to involve the patient in this work by asking him/her to imagine "the pain or stress leaving the body and sending it out the window, and then replacing that area with golden healing energy". This way we are really teaching them that they can heal themselves by using the power of their minds. I also show the family how to use some of the methods.

Working with cardiovascular problems mostly, and knowing that stress is one of the major causes for this illness in our society, I like to suggest use of the ESRs very frequently on ourselves as well as others.

We would love to hear of more results from others who are in the health professions.

The author: Illse Jacobovits, R.N., Holy Cross Hospital, Salt Lake City. Touch for Health Instructor, PHP I Instructor, Brian Gym Instructor, Member of I-ASK.

Norma Harnack, R.N. and Illse Jacobovits, R.N., are the authors of the manual and the workshop "Getting in Touch with Your Patients". In it you can find many more easy-to-apply methods at the patient's bedside as well as in your daily like anywhere.



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Recently the U.S. Post Office and UPS have raised their rates and now we must raise ours. **C.O.D.** is now **\$4.00**. UPS has also instituted a double rate system - one rate for home delivery and a slightly cheaper rate for deliveries to business addresses. Since we cannot list every shipping fee, our published rate can only be an "average shipping fee" for use as a guide only. Your actual shipping rate may be more or less. As always, if you have a question, we suggest you call the store and ask us.

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#### Letter from Dr. Thie (from front cover)

methods. Today a bookkeeper came to me with a wrist which for ten days had been causing her pain whenever she used the adding machine or did computer entry. My approach was to do a TFHS muscle balance, that is test and balance one muscle for reach meridian plus the Hamstrings, Gluteus Maximus and Sacrospinalis. I then tested the Opponens Pollicus, balanced it, and tested and balanced the Supinators and Pronators of the hand. I then gave her instructions on not hyper-extending her hand while keyboarding. She said it felt better immediately. I saw her four hours later at a meeting and she told the entire group how much she appreciated getting her wrist fixed after suffering for ten days, without help, even after taking medication (Ibuprofen).

I have been using the TFHS techniques in my

chiropractic practice for the past 25 years. I am constantly excited by the rapid results that often occur. It was the simplicity of many of the techniques that lead me to write the Touch for Health Manual, and with its continued benefits to people around the world I am continually encouraged to bring the results to the widest possible range of people.

If you are not now a member of the worldwide TFH Associations I urge you to consider a membership. There is a world directory printed in this issue with addresses and phone numbers of people to contact so that you can share more and learn from each other.

Keeping in Touch,
John F Thie, D.C.

In her article on Freedom of Choice in Healthcare, Catherine I. Frompovich, Ph.D. admonishes: "wake up, America, and become protective regarding your consititutional rights [to choose alternative healthcare]. If you lose these rights, then don't blame anyone else for either your persecution or your loss......"

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1991 Conference Dates: July 10 - July 14

Some of the scheduled speakers: · John F. Thie, D.C. · Sheldon Deal, D.C., N.D. · Bruce Dewe, M.D.

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## 1<sup>ST</sup> INTERNATIONAL ANNUAL MEETING OF TOUCH FOR HEALTH ASSOCIATIONS

appy 1991! We wish each of you the happiest and most fulfilling year you have yet to experience.

We are looking forward to the remainder of 1991 with great excitement. The new TFH Associations hold great promise for us all. We hope you plan to attend this event and share the new information and comraderie that we experienced at our first Southern California TFH Association Meeting. This enthusiasm has stimulated our excitement for planning the International Meeting. As we make these plans, we think of each one of you and your valuable contributions to the worldwide movement of using touch, selfresponsibility and new resources to promote the well-being of all people.

This Annual Meeting is an absolute priority for all of us. We invite you to not only attend, but to come and speak. Those of you who do not have a paper for our Journal, or a full presentation to share, may want to bring a "quick-fix" mini-presentation. We will intersperse these 1 - 3 minute "tips" throughout the conference.

We are not going to Murietta Hot Springs as we had planned. This facility closed it's doors January with \$500 of our money! So, SUNNY SAN DIEGO it is. With the nearby international airport, beaches, University facilities, and ultimate in California weather, this is really the best site anyway.

We love you. We look forward to seeing you and continuing the relationships that Touch for Health provides. As we enter April, relatively unscathed by hardships and atrocities in other parts of the world, we are newly thankful for the life, health, and friendships we sometimes take for granted.

Take care and keep in TOUCH. Please let us hear from you soon.

Norma Harnack, R.N. • P.O. Box 430009 • Maplewood, MO 63143 • U.S.A.



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