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edited by Søren Ventegodt, John Veltheim and Joav Merrick

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EDITORIAL

BodyTalk: Health care redefined

Søren Ventegodt, MD, MMedSci, EU-MSc-CAM^{*1,2,3,4,5}, John Veltheim, DC, BA, CBI, SrCBI, CBI, ATI, BAT⁶ and Joav Merrick, MD, MMedSci, DMSc^{5,7,8,9}

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Alternative medicine has become mainstream (1) and many different systems exist. Mind-body medicine is a subtype, known to be effective and safe (2-6). The BodyTalk method is a relatively new method of existential rehabilitation (7,8) in the classical European Hippocratic tradition of holistic medicine (9) now developing into evidence-based non-drug medicine (10-36). Mind-body medicine seems to be effective also on severe physical and mental diseases, chronic pains, sexual and existential problems and lots of other conditions where biomedicine and drugs have proven less helpful (35).

From this research during the last decades we have learned that mind-body medicine – which includes BodyTalk - can help a large fraction of people who have lost their quality of life, physical and mental health and general ability, including working/studying ability.

BodyTalk is practiced in accordance with the ethical rules for alternative medicine established by the International Society of Holistic Health in 2004 (37).

The system has today more than 2,000 active practitioners and about 100,000 patients, making it one of the larger mind-body medicine systems, but still not close to the largest system, homeopathy, which has about 1,000,000 practitioners and 500,000,000 patients.

As the BodyTalk system is in exponential growth, and we believe that something important about consciousness-consciousness interactions can be learned from this very modern system we have devoted this special issue of Journal of Alternative Medicine Research to the BodyTalk system.

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REVIEW

Integrative medicine: What is it good for?

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Abstract

In complementary and alternative medicine (CAM) the focus is on the whole person and the target is existential healing, also called salutogenesis, with a focal point on holistic medicine. Other types of CAM address the patient's mind or personal development and the intervention is often called coaching. Coaching deal with the philosophy of life to make it more positive in contrast to education that often intents to give the person information/knowledge and train mental skills. Many types of CAM are helping the patient to higher self-awareness and self-insight as it is generally believed that lack of understanding, repression of feelings and gestalts, and unconscious philosophy of life is contributing dominantly to the development of disease. This strategy where the examination of the patient together with the patient is also the cure is often called clinical medicine or character medicine. The latter term is used because self-insight is associated with acknowledging own talents and stepping into physical, mental, spiritual and sexual character as a person. Biomedicine intents to improve health by correcting biochemical dysfunctions, while integrative medicine intents to improve global qualities related to consciousness: quality of life, physical health, mental health, and general ability (including sexual health, social wellbeing, study-related and work-related functioning etc). The use of CAM is rapidly increasing in all western countries, the most popular type combining talk and touch therapy as mind-body medicine.

Keywords: Alternative medicine, traditional medicine, consciousness.

Introduction

Medicine is supposed to cure diseases or improve health (1). Medicine can be biomedicine based on drugs, or complementary and alternative medicine (CAM), which consists of two major lines: herbal and diet treatments, and non-drug medicine based on interventions that changes and develops the patient's consciousness, philosophy of life and character through life-style, physical, emotional, psychological, sexual, social and/or spiritual interventions.

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Even the herbal treatments are often believed to influence the patients consciousness and life-energies more than the physical and chemical body, and CAM is there often called consciousness-based medicine; all types of CAM holds as its primary intention the improvement of the patient's quality of life, and CAM is therefore also called quality of life as medicine (2).

CAM often address the whole person and aim for existential healing, also called salutogenesis (3,4). Other types of CAM address the patient's mind and are called personal development in which case the intervention often is called coaching. Coaching address the philosophy of life in order to make it more positive, in contrast to education that often intents to give the person information/knowledge and train mental skills. Many types of CAM are helping the patient to higher self-awareness and self-insight as it is generally believed that lack of understanding, repression of feelings and gestalts, and unconscious philosophy of life is contributing dominantly to the development of disease (1). This strategy, where the examination of the patient together with the patient is also part of the cure is called clinical medicine or character medicine. The latter term is used because self-insight is associated with acknowledging own talents and stepping into physical, mental, spiritual and sexual character as a person.

Biomedicine intents to improve health by correcting biochemical dysfunctions, while CAM intents to improve global qualities related to consciousness: quality of life, physical health, mental health, and general ability (including sexual health, social wellbeing, study-related and work-related functioning etc). The use of CAM is rapidly increasing in all western countries, the most popular type combining talk and touch therapy as mind-body medicine (5-7).

Art or science?

CAM can be art or science; modern types of scientific CAM has developed from the pre-modern cultures. From the eastern cultures comes i.e. the modern acupuncture and acupressure based on classical Chinese medicine, modern Ayurvedic medicine based on classical Indian medicine, and many advanced

sexological tools for sexological healing developed from Tibetan Tantric Buddhism (8-14). From Western cultures comes i.e. homeopathy, psychoanalysis and psychodynamic psychotherapy, mind-body medicine, body psychotherapy, gestalt therapy, body talk, and clinical holistic medicine (8-14), which has developed from the classical Hippocratic non-drug medicine, normally acknowledged to be a science since 400 BC (1).

The positive impact of consciousness on health is often called the placebo effect; the most important factor contributing to the placebo effect is a close, intimate, loving and caring relationship between therapist and patient (15).

Many pre-modern cultures also used and still use shamanistic rituals and mind-expanding drugs in plants and mushrooms like the Peyote and San Pedro cactus, many species of psilocybin mushrooms and the jungle brew called Ayahuasca to facilitate existential healing. Most researchers include shamanistic healing in CAM in spite of the use of hallucinogenic drugs, because the intervention still happens directly on the patient's consciousness. The drugs have been called active placebos and the native people normally consider them very safe in the hands of a skilled shaman, Ayahuasquero or medicine man (16). Modern-type one-session healing has been practiced i.e. as Grof's LSD-therapy (17).

The medical ethics came from the European holistic mind-body medicine developed in Greece around 400 BC by the physician Hippocrates and his students. The famous Hippocratic ethics, still a central part of the medical oath in many countries, has as its first rule: *Primum non nocere* – Above all, do no harm! (1).

This medical tradition does not use any drugs as it consider all active substances derived from minerals, plants and animals to be poisons (1).

CAM is still more used than drug-medicine in Asia, America and Africa, while drug-medicine has been dominating in Europe for about 30 years, but the use of CAM is rapidly growing here and is expected to dominate medicine in Europe again around 2015-20. The different subtypes of CAM and their efficacy and harm are listed in table 1 together with biomedicine for comparison.

Table 1. NNT and NNH numbers of the seven CAM classes estimated from clinical studies (with chronic patients, see text) (18,19). The effect of clinical holistic medicine and similar medical systems seem to continue to increase through time. (NNT: Number [of patients] Needed to Treat [for one to reach treatment goal]. NNH: Number [of patients treated] Needed to Harm [one patient])

	Short term effect (0-6 month)	Long term effect (6-24 month)	Side effects and adverse events
Class 0-Biomedicine	NNT=5-50	NNT=5-100	NNH=1-5
Class 1-CAM (Chemical CAM)	NNT≥10	NNT≥20	NNH=25 (allergy)
Class 2-CAM (Physical therapy)	NNT=2-4	NNT=6	NNH>64,000
Class 3-CAM (Psychotherapy)	NNT=3	NNT=6	NNH>64,000
Class 4-CAM (Spiritual therapy)	NNT=10	NNT=20	NNH>64,000
Class 5-CAM (Mind-Body medicine)	NNT=2	NNT=4	NNH>64,000
Class 6-CAM (Holistic medicine)	NNT=2	NNT=1-2	NNH>64,000
Class 7-CAM (Shamanism w. drugs)	NNT=1	NNT=1	NNH≥1000

Healing principles of CAM

In Europe all scientific knowledge on CAM has been collected and integrated into a Master of Science Program at the Interuniversity College, Castle of Seggau, Graz, Austria, and 40 academic institutions all over Europe have contributed to this project (8-14). The five healing principles of CAM acknowledged in the books from this institution are listed in table 2.

Table 2. The five central principles of healing in CAM and holistic medicine

- The healing should be according to *the principle of Salutogenesis*, addressing the existential core of the patient, and not a part of him or her, whether this is the body, the mind, the spirit/soul, or the gender and sexuality. Not even the health in symbolic significance is enough. When the patient heals holistically both past and future is healing, the whole personality heals and the person finds his true place in the universe, to be the constructive and valuable, responsible and participating individual he was meant to be.
- The healing should take the patient back to the time when and where the damage was done, using the *principle of similarity* going all the way back to Hippocrates. In the Hippocratic Corpus, the book titled *On the Place of Things which Regards to Man* (in Jones, 1923), we find the significant sentence: “Disease is born of like things, and by the attack of like things people are healed – vomiting ends though vomiting”; this is also the fundament of homeopathy. So many things can harm the patient’s wholeness, and only by integrating this, meeting it again in life or in therapy the patient can truly heal.
- *Hering’s Law of Cure* states that in healing the patient will show all the symptoms that he showed on his route to the disease. When he heals the problems will surface coming from its hidden places in the core of the body, the vital organs and the head (upper body). A disease will therefore leave the organism in a specific pattern that can be seen and understood and accelerated by the physician or therapist.
- *The principle of minimal use of force is also known from Hippocrates* – in latin “*primum non nocere*” – do no harm. Many patients prefer holistic healing methods to biomedical as the use of force is much less in psychotherapy, bodywork, philosophical exercises, than in using drugs and surgery.
- The most important principle in holistic medicine actually initiating the holistic healing is *the principle of added resources*. It is the

adding of resources in present time in the therapy that allows the patient to go back in time into the traumatic event that originally damaged his existence and only in doing that can the patient integrate the event and heal his existence. The reason for the necessity of going back and integrating the event is that what allow the trauma to be a trauma is the decisions the patient took in the moment of the trauma. It is this modification of the patient's consciousness and personal philosophy of life that is the real damage on the patient's existence and when the patient "let go" of the old negative and life-denying decisions, then the existential healing occurs.

Efficacy of CAM

The efficacy of CAM varies a lot with the different type of CAM. Table 3 gives an overview of the different types and give also the effect of most pharmaceutical drugs for comparison.

Table 3. Estimated NNT-numbers of the CAM treatments of physical, mental, existential and sexual health issues and working disability (mostly based on clinical studies using chronic patients as their own control, see text) (18,20,21)

<i>CAM for physical health</i>	
Subjectively poor physical health	NNT=3
Coronary heart disease	NNT=2-4
Cancer (QOL/survival/ pain)	NNT=2/7/3
Chronic pain	NNT=2-3
<i>CAM for mental health</i>	
Subjectively poor mental health	NNT=2-3
Schizophrenia	NNT=3-5
Borderline	NNT=3
Major depression	NNT=2-3
Anorexia Nervosa	NNT=3
Anxiety	NNT=3
Social phobia	NNT=3
<i>CAM for sexual dysfunctions</i>	
Subjectively poor sexual functioning	NNT=2
Male erectile dysfunction	NNT=2
Female orgasmic dysfunction	NNT=1
Female lack of desire	NNT=2

Female dyspareunia	NNT=2
Vaginismus	NNT=2
Vulvodynia	NNT=2
Infertility (close ovarian tubes)	NNT=6
<i>CAM for psychological and existential problems</i>	
Subjectively poor quality of life	NNT=2
Sense of coherence	NNT=2-3
Suicidal prevention (with decisions)	NNT=1
Low self esteem	NNT=2
<i>CAM in paediatrics</i>	
All patients	NNT=1-2
<i>CAM for low working ability</i>	
Subjectively poor working ability	NNT=2
<i>Biomedicine</i>	
Pharmaceutical drugs in general (21)	NNT = 20

Cost-effectiveness of CAM

In a modern society the price of health has become important and many analyses found CAM more cost-effective than pharmaceutical drugs (see table 4,5,6 and 7).

The cost-effectiveness of medicine is an important issue as the price of biomedicine in many countries has become an enormous economically burden. In countries with socialized medicine biomedicine is often the dominating kind of medicine for a population, where nearly half the citizens are chronically ill (22).

In spite of free medical care and massive and continuous treatment of a huge fraction of the Danish population with drugs for over 40 years, 25% of the population is chronically mentally ill and 40% of the patients are chronically physically ill, with about half of the mentally ill patient also having some physical chronic disorder, typically chronic pain, presumably of psychosomatic origin.

It is a fact that the national cost of the pharmaceutical drugs had doubled every five years for two decades in Denmark and many other European countries with a development that seems to continue. Therefore less expensive holistic, complementary and alternative (CAM) treatments have become the focus of attention, as these treatments might be more cost-effective than biomedicine (23).

Table 4. Accumulated cost for one patient cured through time (year one, two, ten and fifty) for biomedicine (calculated for NNT=10) and the seven CAM classes (NNT= 1-10) based on clinical studies with chronic patients (23) (cost of biomedical examination, hospitalisation, and treatment of adverse effects and events not included)

	First year Cost per patient	Second year Accumulated cost per cured patient	Year 10 Accumulated cost per cured patient	Year 50 Accumulated cost per cured patient
Accumulated cost pr. patient constantly treated w. biomedicine (€)	2,000	4,000	20,000	100,000
Accumulated cost pr. patient constantly treated w. CAM (€)	2,000	4,000	20,000	100,000
Class 0-Biomedicine (€)	20,000	37,000	170,000	1,000,000
Class 1-CAM (Chemical CAM) (€)	>20,000	>40,000	>200,000	1,000,000
Class 2-CAM (Physical therapy) (€)	4,000	6,000	24,000	100,000
Class 3-CAM (Psychotherapy) (€)	6,000	10,000	46,000	200,000
Class 4-CAM (Spiritual therapy) (€)	20,000	38,000	180,000	800,000
Class 5-CAM (Mind-Body medicine) (€)	4,000	6,000	16,000	100,000
Class 6-CAM (Holistic medicine) (€)	4,000	5,000	10,000	30,000
Class 7-CAM (Shamanism w. drugs) (€)	500	600	800	2,000

Table 5. Estimated first year treatment cost per cured patient with physical, mental, existential and sexual health issues and working disability (mostly based on clinical studies using chronic patients as their own control, see text). As many patients not cured will die it is often difficult to make the long term estimates (based on table 3 and 4 (18,19,21,22,23)) (no antipsychotic drug cures schizophrenia (the outcome mental state/mental health) see 23))

	CAM (cost in €)	Biomedicine (Cost in €)
<i>CAM for physical health</i>		
Subjectively poor physical health	6,000	200,000
Coronary heart disease	4,000-8,000	1,000,000
Cancer (QOL, survival)	4,000;14,000	20,000,000
Chronic pain	4,000-6,000	500,000
<i>CAM for mental health</i>		
Subjectively poor mental health	4,000-6,000	200,000
Schizophrenia	6,000-10,000	20,000,000
Major depression	4,000-6,000	200,000
Anorexia Nervosa	6,000	100,000
Anxiety	6,000	100,000
Social phobia	6,000	100,000
<i>CAM for sexual dysfunctions</i>		
Female poor sexual functioning	4,000	no cure
Male erectile dysfunction	4,000	20,000
Female orgasmic dysfunction	2,000	no cure
Female lack of desire	4,000	no cure
Female dyspareunia	4,000	no cure
Vaginismus	4,000	no cure

(Table 5 continued on next page)

	CAM (cost in €)	Biomedicine (Cost in €)
Vulvodynia	4,000	no cure
Infertility	12,000	20,000
<i>CAM for psychological and existential problems</i>		
Subjectively poor quality of life	4,000	no cure
Sense of coherence	4,000-6000	no cure
Suicidal prevention (with decisions)	2,000	no cure
Low self esteem	4,000	no cure
<i>CAM for low working ability</i>		
Subjectively poor working ability	4,000	no cure

It is a well-known fact that not all kinds of CAM are efficient, like acupuncture for cancer, but still the cost might be so small that even a small positive effect will make it more cost-effective than even the best surgery or chemotherapy, which is very expensive and little productive in most metastatic cancers. Most unfortunately very few studies have been performed in this field, rendering us with almost no data about the actual situation for most types of CAM for most clinical conditions.

Fortunately a number of reviews have recently documented that some types of CAM, especially mind-body medicine is cost-efficient compared to biomedicine (5) and completely without the many serious side (adverse) effects and adverse (negative) events that often follows treatments with drugs (19).

These reviews have encouraged the present comparative analysis of the cost-effectiveness of CAM and biomedicine.

Table 5 compares the estimated cost of some known CAM treatments to the cost of the traditional biomedical treatment. Please notice that the cost varies much from country to country; the numbers listed are typical European and American numbers.

A modern way to express cost-effectiveness is the prize of a quality of life-year (QALY). When you compare the cost per QALY for a biomedical treatment with NNT=10-50 with a CAM treatment you will notice that there is almost no difference in cost-efficacy if you look at the inefficient types of CAM, while there is a factor 1000 difference if you look at the highly efficient CAM types (Table 6).

Table 6. Cost per QALY accumulated through time under continued treatment (year one, two, ten and fifty) with biomedicine and the seven CAM classes estimated from clinical studies with chronic patients (Units are Yearly Treatment Cost, YTC) (based on 18,19,21)

	First year Cost per QALY. (YTC)	Second year Cost per QALY. (YTC)	Year 10 Cost per QALY. (YTC)	Year 50 Cost per QALY. (YTC)
Class 0-Biomedicine (NNT=10)	40	70	350	2,500
Class 0-Biomedicine (NNT=20)	80	140	700	5,000
Class 0-Biomedicine (NNT=50)	200	350	1,500	12,500
Class 1-CAM (Chemical CAM)	>20	>40	>200	>1,000
Class 2-CAM (Physical therapy)	6	18	90	450
Class 3-CAM (Psychotherapy)	6	18	90	450
Class 4-CAM (Spiritual therapy)	20	50	250	1,250
Class 5-CAM (Mind-Body medicine)	4	10	30	50
Class 6-CAM (Holistic medicine)	4	10	25	35
Class 7-CAM (Shamanism w. drugs)	2.5	3	5	8

Table 7. Cost per QALY in EURO accumulated through time under continued treatment (year one, two, ten and fifty) with biomedicine and the seven CAM classes estimated from clinical studies with chronic patients (based on 18,19,21)

	First year Cost per QALY.	Second year Acc. cost per QALY.	Year 10 Acc. cost per QALY.	Year 50 Acc. cost per QALY.
Class 0-Biomedicine (NNT=10)	80,000€	140,000€	700,000€	5,000,000€
Class 0-Biomedicine (NNT=10)	160,000€	280,000€	1,400,000€	10,000,000€
Class 0-Biomedicine (NNT=50)	400,000€	700,000€	3,500,000€	25,000,000€
Class 1-CAM (Chemical CAM)	>40,000€	>80,000€	>400,000€	2,000,000€
Class 2-CAM (Physical therapy)	12,000€	36,000€	180,000€	900,000€
Class 3-CAM (Psychotherapy)	12,000€	36,000€	180,000€	900,000€
Class 4-CAM (Spiritual therapy)	80,000€	100,000€	500,000€	2,500,000€
Class 5-CAM (Mind-Body medicine)	8,000€	20,000€	60,000€	100,000€
Class 6-CAM (Holistic mind-body medicine)	8,000€	20,000€	50,000€	70,000€
Class 7-CAM (Shamanism w. drugs)	5,000€	6,000€	10,000€	16,000€

The true financial difference between a society using pharmaceutical drugs and CAM becomes visible when you understand that a chronically ill patient will cost money every singly year of his or her life (see table 7)

Future of CAM

Interestingly the highly efficient shamanistic one-session healing practiced in most premodern cultures seems to be the cheapest solution of all. Maybe the Native Americans, the Australian Aborigines, the African Sangomas and the Samic shamans were wiser than we believed until now. This might point to an interesting development of CAM in the future, where we will have fewer resources to help and heal. *One session healing*, the possibility of being healed in one day, is now under intense scientific investigation in many research teams worldwide.

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Open source protocol for evidence-based drug and non-drug medicine

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Abstract

The aim was to write a protocol that can be a standard for scientific testing of all kinds of medicine: Class 1-Biomedicine (pharmaceuticals); Class 2-CAM (Chemical CAM); Class 3a-CAM (Physical therapy, low-energy i.e. massage, therapeutic touch); Class 3b-CAM (Physical therapy, high-energy i.e. chiropractic treatment); Class 4-CAM (Psychotherapy); Class 5-CAM (Spiritual therapy); Class 6-CAM (Mind-Body medicine); Class 7-CAM (Body-Spirit medicine); Class 8-CAM (Holistic mind-body medicine); Class 9-CAM (Shamanism w. drugs etc.); Class 10-CAM (Social medicine). Medicine is interventions that cure man's diseases on all levels of existence: body, mind, spirit and total being. Central aspects of man are thus the physical, mental, spiritual and existential aspects. Many researchers include the sexual and the social aspects in this list. The major goals of medicine are thus to improve: physical health, mental health, sexual health, spiritual health, global quality of life, and functioning in all relevant aspects (the most important being social, sexual, and working/studying related ability). There are two major strategies for medical intervention: Chemical intervention and informational intervention, in the broadest sense of these two words or intervention on the matter, or intervention on the consciousness. "Chemical" means intervention with pharmaceuticals, diet, plants and herbs, aromatic scents etc. "Informational" means all interventions on man as a biologic energetic-informational structure – i.e. massage and therapeutic touch for the body, talk for the mind, spiritual interventions for the spiritual consciousness etc.

Keywords: Alternative medicine, traditional medicine, consciousness, RCT.

Introduction

Medicine is interventions that cure man's diseases on all levels of existence: body, mind, spirit and total being (1,2). Central aspects of man are thus the physical, mental, spiritual and existential aspects.

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Many researchers include the sexual and the social aspects in this list. The major goals of medicine are thus to improve: physical health, mental health, sexual health, spiritual health, global quality of life, and functioning in all relevant aspects (the most important being social, sexual, and working/studying related ability)(3).

There are two major strategies for medical intervention: Chemical intervention and informational intervention, in the broadest sense of these two words (4) or intervention on the matter, or intervention on the consciousness (5). "Chemical" means intervention with pharmaceuticals, diet, plants and herbs, aromatic scents etc. "Informational" means all interventions on man as a biologic energetic-informational structure – i.e. massage and therapeutic touch for the body, talk

for the mind, spiritual interventions for the spiritual consciousness etc.

Which type of medicine you prefer is closely associated to your understanding of health and disease. If you believe that genes are causing the disease you are likely to go for a pharmaceutical intervention that can compensate the malfunctioning genes. If you believe that diseases are primarily caused by problems related to life-style, and the patient's consciousness and emotional life, you will go for an informational /consciousness-based intervention. Recently we have systematized all kinds of evidence-based medicine in a 10-class system according to chemical/informational type of intervention and the 3-layered structure of man with body, mind and spirit (4) see table 1.

Table 1. Ten classes Typical numbers for effect and harm, and the ration of *benefit to harm* for 10 classes of evidence-based medicine (NNTs, NNHs, NNH_{total}s and TVs) (estimated from Cochrane reviews of RCTs and from clinical studies with chronic patients) (4)

CAM class	Short term effect (0-6 month)	Long term effect (6-24 month)	Side effects/ adverse events	Total risk of harm	Therapeutic Value TV=NNH _{total} /NNT
	NNT	NNT	NNH	NNH _{total}	TV (6-24 month)
Class 1-Biomedicine (pharmaceuticals)	20 (5-50)	50 (5-100)	1-5	1-3	1-0.01
Class 2-CAM (Chemical CAM)	≥20	≥50	25 (allergy)	25	0.5
Class 3a-CAM (Physical therapy, low-energy i.e. massage, therapeutic touch)	2-4	6	>1.000.000	>1.000.000	167.000
Class 3b-CAM (Physical therapy, high-energy i.e. chiropractic treatment)	2-4	6	1000 (fractures)	1000	167
Class 4-CAM (Psychotherapy)*	3	6	>1.000.000	>1.000.000	167.000
Class 5-CAM (Spiritual therapy)	>10	>20	>1.000.000	>1.000.000	50.000
Class 6-CAM (Mind-Body medicine)	2	4	>1.000.000	>1.000.000	250.000
Class 7-CAM (Body-Spirit medicine)	Not known	Not known	>1.000.000	>1.000.000	Not known
Class 8-CAM (Holistic mind-body medicine)	2	1-2**	>1.000.000	>1.000.000	500.000-1.000.000
Class 9-CAM (Shamanism w. drugs etc.)***	1	1	>1000	>1000	>1000
Class 10-CAM (Social medicine)	1	10	>1.000.000	>1.000.000	100.000

* Some types of psychotherapy have short-term NNTs of 2-3 (STPP) and long term NNTs of 1-2 (LTPP) for mental, somatic and sexual health problems (see 3,10). **The effect of clinical holistic medicine and similar medical systems seem to continue to increase though time (11). NNT: Number Needed to Treat. NNH: Number Needed to Harm, NNH_{total}: Total likelihood of getting one side effect/adverse effect or adverse event. TV: Therapeutic Value, which here means ratio of benefit to harm. For a treatment to be of true value to patients, it must be efficient, with a low NNT number, and a high TV-number. ***Adverse effects, mostly brief reactive psychoses, are only seen with mentally ill patients (see 6).

Drugs

Drugs can be subdivided into six major classes dependent on their toxicity (see table 2) (7). Class 1-4 can be used as medicine without problems; class 5 needs caution and class 6 needs extreme caution. In spite of such caution we know that countries that use pharmaceutical drugs as standard medicine (i.e. USA, Sweden) have about 3% of their population dying directly from the toxic effects of these drugs (8,9). Countries with massive abuse of class 5 drugs see similar harm from this group of drugs. Compared to this class 1-4 almost never leads to harm or death; only anecdotal stories connect class 4 to harm, and only if the person using them were severely mentally ill before taking them (6). As the primary rule in medical ethics since Hippocrates has been “First do no harm” (10), drugs from class 5 and 6 should only be used if there is no alternative treatment possible, or if the advantages from using such a drug is obvious (i.e. penicillin for syphilis).

Table 2. Types of drugs

1. From a toxicological point of view, drugs can be divided in the following categories:
2. Non-toxic drugs: Water, foot, salt, sand
3. Almost non-toxic drugs with low biological activity: Herbs for herbal teas, scents
4. Almost non-toxic drugs with high biological activity: Active placebo drugs (hallucinogenic drugs)
5. Mildly toxic drugs with high biological activity: Alcohol, cocaine, morphine
6. Toxic drugs with high biological activity: Drugs with severe adverse effects like most pharmaceuticals

Non-drug medicine

Different cosmologies have given birth to a spectrum of diverse non-drug interventions (11). In principle a cosmological analysis is needed to fully acknowledge the wisdom of these treatments developed by all the different cultures of the world though the ages. To simplify things we say in holistic philosophy that man consists of body, mind, spirit, and a wholeness or

existence (4). The body’s primary talent is sexuality, the minds primary talent is consciousness and the spirits primary talent is love (12). The state of the totality, or existence, is called (global) quality of life (13). Mind, body, and spirit are represented internally by the Id, the Ego and the Soul, all coming together in the integrated I (14). This simple description of man allows us to systematize all non-drug treatments into the eight classes listed in table 1 (4).

Measuring effect

Positive effects

The outcome of medicine must be measured in a clinically relevant dimension: 1) physical health, 2) mental health, 3) sexual health (including relation to partner), 4) spiritual health, 5) global quality of life, and 6) social, 7) sexual, and 8) working/studying related ability, but 9) Relation to self and 10) relation to friends are also important dimensions that should be included. Chemicals can change chemical things in the body, which might show some co-variance with one or more of the about clinical outcomes but surrogate outcome measures are often severely misguiding and cannot be used in rational medicine (15). It has been discussed if subjective or objective health measures should be used but massive research has documented the subjective health measures to be the strongest predictors of future health (16-19).

The only rational outcome is therefore the patient’s subjective experience of physical health, mental health, sexual health, spiritual health, global quality of life, and social, sexual, and working/studying related ability, which is easily measured with a very short self-administered questionnaire of 10 items (like QOL10, see Table 3), containing one Likert scale for self-rating of each dimension. (QOL10 includes a question on the patient’s ability to love in general, also called “I-strength”. The “I-strength” is an important parameter in mental illness and social life). If some measures goes up and other down, the *global quality of life* should be the most important and guiding outcome (the term global is used to discriminate this measure from “disease-related”- or “health-related” QOL measures).

Table 3. 10 positive core outcomes in medicine, expressed as 10 questions to the therapist (the short questionnaire QOL10 contains the same questions used for the patient's self-rating) (25). The questions evaluate the patients state of being in five important life areas (A1-A5): Quality of life (QOLL), health (physical and mental), I-strength, relations (to self, partner and friends) and functioning (socially, sexually and related to work/study)

A1: Quality of life:
 D1. How is the quality of your patient's life?
 A2: Health (physical, mental, spiritual):
 D2. Physical health: How is the patient's physical health?
 D3. Mental health: How is the patient's mental health?
 A3: I-Strength:
 D4. How is the patient's I-strength (ability to love)?
 A4: Relations:
 D5. How do the patient's relation with him/herself?
 D6. How are the patient's relationships with friends?
 D7. How is your relationship with your partner?
 A5: Functioning:

D8. How do you consider your patient's sexual functioning at the moment?

D9. How do you consider your patient's social functioning at the moment?

D10. How is your patient's working ability at the moment?

Time is an important dimension, as effective medicine is likely to impact the patient's health status for the rest of the patient's life. Long term follow up is therefore very important (a year or longer after end of treatment). When you look at the cost-efficacy and cost-benefit of medicine you need to look at the development in health or illness over 50 years (20). QALYs and HALYS needs to be used in long term evaluation of a medicine's effect (20). Only when you know the different medicines' impact on the likelihood of getting a high quality of life for the rest of your life, and the cost in money, adverse effects and events etc. can you make a rational choice of treatment (see Table 4 (from 20)).

When we design a test there are in principle two scenarios: One is the acute patient, and the other is the chronic patient.

Table 4. Accumulated cost of one QALY (Quality of life-adjusted Life Year) through time (year one, ten and fifty) for the 10 classes of evidence-based medicine

Continuous treatment (only stopped if the patients gets cured)	QOL improvement Prize of one QALY calculated from NNT from treatment (%) and accumulated cost (table 3) if successful			
	Global QOL	per cured patient	per cured patient	per cured patient
		First year	Year 10	Year 50
Medicine with drugs (chemical medicine)				
Class 1 – Chemical medicine ¹	20%	500,000	≥1,000,000	≥ 5,000,000
Class 2- CAM (Chemical CAM)	20%	>500,000	> 1,000,000	> 5,000,000
Non-drug CAM (informational medicine)				
Class 3-CAM (Physical therapy)	20%	60,000	300,000	60,000
Class 4-CAM (Psychotherapy)	20%	60,000	300,000	60,000
Class 5-CAM (Spiritual therapy)	20%	Not known	Not known	Not known
Class 6-CAM (Mind-Body medicine)	20%	40,000	180,000	40,000
Class 7–CAM Body-Spirit medicine	20%	Not known	Not known	Not known
Class 8-CAM (Holistic mind-body medicine)	20%	25,000	50,000	10,000
Class 9-CAM (Shamanism w. drugs)	20%	3000	4000	800
Class 10-CAM (Social/environm. medicine)	20%	250.000	1,750.000	2,500.000

¹(cost of biomedical examination, hospitalization, and treatment of adverse effects and events not included) (estimated round numbers, see text)

The acute patient: Randomization to no treatment

If a patient is acutely ill or in acute crisis, we know that such illness will normally pass also without the intervention of a doctor or therapist. The rational thing to do here is to randomize to *no treatment* (about problems with the RCTs which must be avoided, see (21)). Before it was shown that there is absolutely no effect of a placebo pill (22), it was believed that the rational thing was to randomize to placebo. In spite of our best intentions, we often harm patients when we try to treat them in an acute crisis. A treatment of acute illness is only rational if it in the long term shows a positive outcome for the patient in quality of life compared to no treatment. An acute physical or mental psychotic crisis will normally pass by itself, if the patient is given rest and good care. Hospitalization can have many negative and stigmatizing consequences, that must be included in the measure so no treatment also means no hospitalization.

The chronic patient: Using the patient as own control

The chronic patient is a patient that does not get well by him or herself. The chronic state is characterized with permanent loss of health in one or often more dimensions, the most important being the loss of global quality of life. Chronic patients are known to be fairly stable; in Denmark one in two citizens are chronically ill in spite of socialized biomedicine (free biomedical doctor and almost free drugs), documenting that drugs normally do not cure chronic physical or mental diseases.

The stable nature of the chronic patient makes it rational to use the patient as his own control. This is done by measuring the patient's status with regards to the 10 relevant outcomes, before and after treatment, and again after long time (i.e. one year) (23). This is simple and cheap to do, and it gives trustworthy documentation of the effect of any medicine.

Negative effects

Negative effects of medical intervention are much harder to measure than positive effects. First of all there is an implanted philosophy connected to any treatment (24): The patient learns to be dependent on the physician. Such dependency is always a more or less serious loss of autonomy. The intervention can

inspire to personal development of self-insight and freedom, or it can oppress the patient into passivity and a feeling of helplessness and hopelessness. Medical intervention can thus be very traumatic, as is well-known from psychiatry where patients tend to get stuck in the system, never to leave it again. Such effect where the patient for all practical purposes ends up deprived of a life must be avoided at all cost.

A less global, negative impact of a treatment can be seen as a loss of health in the patient's ratings in one of the 10 outcome dimensions, with the global quality of life as the most important(21,25). But it is important to stress that a total loss of life as mentioned above will often not be noticeable here, as the patient who is completely adapted to an institution will rate his or her state according to circumstances and expectations.

Drugs

Many drugs have as mentioned above adverse effects and events that one should look for; effects should be observed in short and long term. Many adverse effects (signs of intoxication) are very subtle like loss of intelligence, social intelligence, libido, creativity, studying or working capacity, general happiness etc. Most drugs are more or less sedating, costing the clarity of consciousness, which is very difficult to measure.

In conclusion adverse effects and events of drugs are very difficult to measure and document. Therefore it is in general wise totally to avoid biologically active drugs as medicine if possible at all.

If it is necessary to use biologically active drugs the rational thing to do is to use drugs of class 4, where a large effect can be obtained with minimal risk for the patient (i.e. shamanistic medicine, shamanistic one session healing). Cost-benefit analyses show that such medicine might be of great value to the patient (20).

Non-drug medicine

Non-drug medicine has very few side effects as has been documented in hundreds of Cochrane reviews (26, 27); care should be taken in high-energy manipulation (chiropractics). Talk and touch therapy is in general without side effects (6,20,26,28,29). Treatment must be performed according to ethical standards (30).

BIAS

A big problem in contemporary medicine is bias. Commercial interests will always bias the testing (21). The RCT being used by the pharmaceutical industry can be so easily manipulated that the test in general is not valid (21). When the same data is used in meta-analyses instead of in single RCTs the effect almost

always goes dramatically down and the harm goes dramatically up (31). Table 5 shows this expressed in Number Needed to Treat (NNT), Number Needed to Harm (NNH) and total likelihood of a patient getting an adverse effect or event (NNH_{total}) (31).

Table 5. Typical values of NNT, NNH_{total} and (Therapeutic Value $TV = NNH_{total}/NNT$) for pharmaceutical drug (single drugs and drug-groups) (Typical numbers from industrial trials; typical numbers from independent analyses of single drugs; and typical numbers from independent analyses of whole groups of drugs) (31)

Typical values of NNT, NNH_{total} and (Therapeutic Value: $TV = NNH_{total}/NNT$) for pharmaceutical drug (single drugs and drug-groups)

Drug-type	Typical numbers from industrial trials (RCTs) (see text)	Typical numbers from Cochrane/ independent metaanalyses (of single drugs, see text)	Numbers from Cochrane/ independent metaanalyses (of whole groups of drugs, see text)
	NNT ; NNH_{total} ; TV	NNT ; NNH_{total} ; TV	NNT ; NNH_{total} ; TV
Antidepressant drugs (less depressed)	3-20; 2-4; ≤ 0.67	>20 ; 1-2 ; <0.10	>100; 1; <0.01
Antipsychotic drugs (mental state improved)	3-20; 2-4 ; ≤ 0.67	>20 ; 1-2 ; <0.10	>100; 1; <0.01
Anticancer chemotherapy (survival, treatment vs. no treatment)	20-50 ; 1-2 ; ≤ 0.1	>20; 1-2; <0.10	>100 ; 1; <0.01
Antibiotics	1-20; 1-20 ; 1	20; 10; 0,5	20 ; 10 ; 0,5

Source: Independent meta-analyses of single drugs and drug groups (mostly Cochrane reviews) (see 31).

Table 6. Effect, adverse effects, and Therapeutic Value (TV) of major pharmacological drug groups, listed according to Therapeutic Value (calculated as $TV = NNH_{total}/NNT$). (NNT: Number Needed to Treat; NNH: Number Needed to treat to Harm; NNH_{total} : The total likelihood to get one or more adverse effect or event, expressed as NNH) (From 32)

Drug group	NNT	NNH_{total}	TV	Serious methodological problems in RCTs?	References (find references in (32))
Anti-depressant	∞	1-3	0	Yes	38,39
Anti-psychotic	∞	1	0	Yes	40,41
Anti-cancer chemotherapy	∞	1	0	Yes	42,43
NSAIDs	∞	10	0	Yes	44
Anti-resorptive (calcium in bones)	50	10	0.1	Yes	45
Anti-hypertensive	20	3	0.1	Yes	46
Anti-asthma corticosteroids	3	2	0,67	Yes	47
Morphine type	3	3	1	Yes	48
Antibiotics	5	5	1	Yes	48
Anti-inflammatory	5	5	1	Yes	48
Antihistamines	3	3	1	Yes	48
Anti-AIDS (anti-retroviral)	3	3	1	Yes	49
Sedatives	1	1	1	Yes	48
Hypnotics	1	1	1	Yes	48,50
Contraceptives	1	10	10	No*	5

*Sexual desire is severely compromised ($NNH=3$) for many oral contraceptives and this is often not reported as an adverse effect.

High-level meta-analyses often review no effect at all and great harm from drugs which are found efficient and safe in RCTs (table 6) (32).

Documentation of non-drug medicine often is often also biased, as drop-outs are not included in the results, or clinically insignificant improvements are counted as outcomes. We recommend that less than one step up a five point Likert scale should be taken as a non-response in treatment (less than 20% improvement). The most important thing is to measure in the relevant outcomes measured above. Often hybrid measures like “patient satisfaction” not health improvement is used as outcomes. It is much easier to make a patient satisfied (in a hospital all it takes is nice staff and good food) than to improve health, quality of life, and ability.

Ethics and informed consent

The ethical rule for drug- and non-drug medicine should always be followed (30). The local science-ethical committees approving the research protocols should have high experts in research method; they should definitely not be physicians with close links to pharmaceutical industry as we often see today. Many of the problems we face in medicine today, with pharmaceutical industry dominating the market with products of little effect and great harm is due to lack of expertise in these committees. Complete openness about the funding of the study is necessary in all medical research.

The most important aspect of ethical conduct is full information to the patient and the openness of the protocol with public and scientific publications that will give every patient the possibility to see exactly what the principles, procedures, results, and side effects of the treatment are. An important aspect of communication and decision making by the patients is the selection of material for reading by the patient and also verbally explained to the patient, before initiating the treatment and making the *therapeutic contract*.

Before any type of treatment the patient should be informed about the course of the treatment in general terms, its effect in NNT NNH, NNH_{total} and TV (explained if necessary) for the actual treatment (if known) and for alternative treatments (if known). All alternatives must be presented before the patient

makes his or her choice to accept an offered treatment. It is recommended to also receive a written contract for the treatment signed by the patient.

Insurance

If the medicine puts the patient’s health or life at risk (which is often the case with drugs from class 5 and 6 in table 2) the clinic needs insurance to compensate patients for inflicted harm. Non-drug treatment does not really require insurance as there is no known harm from talking and touching; an important exception for this rule is high-energy manipulation of the body i.e. chiropractics, where harm does occur ($NNH=1000$ for broken bones (33,34)) so insurance is strongly recommended. The Danish Scientific Ethical Committee system has accepted that holistic, consciousness-based medicine is so risk-free that practitioners do not need insurance (1).

Data analysis

We strongly recommend that all protocols and data are published, not only selected results on selected groups. The likelihood of introducing bias in data-analysis is extremely high and the only way to be sure that the results are not biased is to allow independent researchers to analyze the data also (35). We strongly recommend simplicity in statistical method (36); the use of mean and simple correlations and regressions will document the effect and the statistical associations if there are any. Complex statistical procedures like factor analyses should be avoided as the interpretation of the results of complex statistical methods almost always will induce bias.

Number Needed to Treat, (all positive effects in the clinically important outcomes) Number Needed to Harm (all adverse effects and events and reduction of all clinically important outcomes) and total likelihood of getting one or more adverse effect or event (presented as NNH_{total}) as well as the Therapeutic Value ($TV=NNH_{total}/NNT$) (27,31) should always be reported. If more than one positive effect is documented (one of the 10 major factors mentioned above) to be improved, NNT should be replaced by NNT_{total} , calculated similar to NNT_{total} .

Only by having these data for all types of medicine and all clinical conditions can physicians and patients rationally choose between the many different alternatives they exist today.

Publication

We recommend publication in relevant peer-reviewed scientific journals. In general it is a bad idea to have pay-per-view as patients need free access to all information about medicine, and they cannot afford to pay for reading information. Journals should not publish clinical studies that does not focus on the relevant outcomes: physical health, mental health, sexual health, spiritual health, global quality of life, and social, sexual, and working/studying related ability. Only clinical studies of pharmaceutical drugs where negative effects have been evaluated long term (at least one year) should be published.

RCTs with toxic drugs should use active placebo if placebo control is used and a no-treatment arm should always be included. Failure to perform up to this standard should lead to rejection of the paper. Studies that do not give the treatment's NNT, HHN, NNH_{total} and TV values should not be published.

Discussion

This protocol is an upgrade of our Open Source Protocol for Clinical Holistic Medicine (1). We have expanded the concept and made it applicable to all kinds of medicine. In pharmaceutical medicine the diagnosis are of crucial importance, while diagnoses are unimportant in most non-drug medicine as all patients receive the same treatment: Help to self-exploration, self-awareness and self-insight.

In a general practice the physician treating with drugs is completely dependent firstly on the disease being curable by drugs; then on giving the right diagnosis, the right medicine in the right dose, and in patient compliance, and then on the NNT number of the drug for the actual clinical condition. This typically reduces treatment success to less than one per cent (37). Therefore drugs cannot be the bases of a general practice. Drugs can be used rationally when a clinical condition is so well-defined that diagnosis is

easy; when the NNT number is low (5 or lower, equal to 20% of patients or less helped) for the drug used on the actual clinical condition, and when the patient is motivated to take the drug. This is only the case in a few percent of the cases in general practice. Drugs must therefore be a supplement to non-drug treatment in general practice.

Further research should focus on the medicine that already has shown good results and high patient safety; Table 1 gives the NNTs, NNHs, NNH_{total} s and the TVs for the 10 types of medicine. We recommend future research to focus on mind-body medicine, holistic mind-body medicine, and shamanistic medicine as these types of medicine seem to be the most effective types of medicine there are.

As the most efficient non-drug medicine types improve all 10 dimensions of health, quality of life and ability, it would be correct also to define NNT_{total} similar to NNH_{total} . Using this concept the therapeutic value must be calculated as $TV = NNH_{total} / NNT_{total}$. It can be argued against such practice that the patient only is interested in solving the problem he or she presents in the clinic at the beginning of the treatment, so other beneficial effects must be seen as positive adverse effects, not as outcome. While we think every patient will appreciate having other problems in life solved, we acknowledge this viewpoint. Therefore we have omitted the concept of NNT_{total} in this protocol. If you accept it the TVs for mind-body medicine and holistic mind-body medicine in table 1 should be multiplied with 10! The highest TV (holistic mind body medicine, $TV = 500,000 - 1,000,000 \times 10 = 5,000,000 - 10,000,000$) would then be a mind-blowing 1,000,000,000 times larger than the lowest TV (<0,01 for anti-depressant and antipsychotic drugs, see table 5) for treating mentally ill people.

Conclusion

It is not difficult at all to document positive and negative effects of medicine if you follow these simple rules we have outlined here. Simplicity is the path to truths and reliability, while complexity gives so many possibilities to introduce bias, that a complex procedure never should be trusted. The RCT as it has been practiced for 30 years has most clearly shown us

that such a complex procedure leads to biased and scientifically invalid results (28,31,32,51-53).

Further research should focus on the medicine that already has shown good results and high patient safety; mind-body medicine, holistic mind-body medicine, and shamanistic medicine seem to be the most effective and safe types of medicine and these methods seem to work for most clinical conditions (54-58).

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A systematic approach to complementary and alternative medicine

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Abstract

The United States National Center for Complementary and Alternative Medicine (NCCAM), has been criticized for not being clear in their concept CAM and for not progressing in making CAM evidence-based medicine. We have analyzed the five categories of CAM used by NCCAM and found that these can be reorganized into 10 principal classes: Chemical medicine (biomedicine with bioactive molecules), Chemical CAM (flower medicine, herbal medicine, diets, minerals, vitamins), Body-medicine (massage, reflexology, physical therapy/physiotherapy), Mind-medicine (psychotherapy - psychodynamic, cognitive, gestalt etc.- psychoanalysis, meditation), Spirit-medicine (philosophical interventions, energy medicine, prayers, spiritual healing (i.e. Reichi), shamanism, spiritual CAM (i.e. crystal healing), Mind-body medicine (acupuncture, acupressure, chiropractics, homeopathy, manual sexology, body-psychotherapy, Reichian bodywork, Rosen therapy, ergo therapy), Body-spirit medicine (prayer involving physical activity), Holistic body-mind-spirit medicine - including existential therapy (clinical holistic medicine, holistic body-psychotherapy, holistic bodywork, holistic mind-body medicine), Chemical-body-mind-spirit medicine (shamanism with peyote, Ayahuasca or magic mushrooms; Grof's LSD-psychotherapy) and Social and environmental medicine (coaching). The system is based on the fundamental structure of a human being, with molecules, body, mind and spirit.

The new classification system allows for the identification of the healing principles in use, giving an idea of expected effect size, clinical conditions which can be treated, and possible side effects. The system allows for a cost-benefit analysis, for rational supervision of CAM treatment, and helps practicing according to ethical standards.

Keywords: Complementary and alternative medicine, integrative medicine, classification.

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Introduction

The United States National Center for Complementary and Alternative Medicine (NCCAM) has systematized CAM in five principal classes:

1. Whole medical systems such as homeopathy, naturopathy, traditional Chinese medicine, and ayurveda.
2. Mind-body medicine such as meditation, prayer, mental healing, art therapy, music therapy, and dance therapy.
3. Biologically based practices such as dietary supplements, herbal supplements, and other scientifically unproven therapies such as shark cartilage.
4. Manipulative and Body-Based Practices such as spinal manipulation (both chiropractic and osteopathic) and massage.
5. Energy therapies such as qi gong, Reiki, therapeutic touch, and electromagnetic therapy.

A central problem with such a classification system is that the categories are not mutually exclusive. This means that a medical system might be found in several of the five classes. Traditional European holistic medicine - often called character medicine, or “clinical holistic medicine” (CHM) is placed in class 1, because it is a medical system offering cures for every single patient: The cure helps the patient explore self, step into character, improve quality of life and thus heal disease (1). It is mind-body medicine, because it combines therapeutic talk (releasing repressed traumas, emotions and gestalts and improving philosophy of life) and therapeutic touch (often healing massage to assist the patient back into body and sexuality). It could be argued that it is a biology-based practice as it addresses the biological information in the organism. It is definitely also body-based. And as biological information is what is experienced as “energy” (“life energy”, “sexual energy”, “spiritual energy” etc.) by the patient, it is most definitely also “energy therapy”.

On the other hand, “energy therapy” is a concept reserved for a special definition of psychic energy; biologically based CAM practice often means interventions with diets and herbs, and even the

concept “mind-body medicine” has come to mean something different from “medicine working through the patients mind and body”. So the lack of conceptual clarity has made the somewhat “ad hoc” systematic of NCCAM less useful than it should be to classify, analyze and understand CAM.

We believe that much of the critique NCCAM has received (2) is caused by the lack of a clear scientific system, making it difficult to move forward and create the science of CAM needed for CAM to be an integrated part of evidence-based medicine. In this paper we try to solve this problem by suggesting a much simpler and clearer system of medicine, including both bio-medicine, drug-cam, and non-drug CAM like character medicine (CHM).

There are hundreds of types of CAM – so what do we do?

Today there are hundreds of different types of CAM, including massage and therapeutic touch, psychotherapy and psychodrama, art therapy and spiritual medicine, and different types of holistic mind-body medicine integrating several of these aspects. When the “Committee on the Use of Complementary and Alternative Medicine by the American Public” should write the compressive report on “Complementary and alternative medicine (CAM) in the United States” (3) they used several pages to list all the different systems of alternative medicine. The Committee decided to use the practitioner’s description of the different methods, and the result was somewhat peculiar. Therapeutic touch was happening without the therapist touching the patient and mind body medicine was classified as a specific type of therapy. Mind-body medicine methods like “zero balancing or hands-on body-mind system to align body energy with body’s physical structure” and the “Rosen method or mind, bodywork, and movement that combines emotional psychotherapy with physical awareness” (4) were not listed as mind-body medicine. Major alternative mind-body medicine systems practiced also in United States, like BodyTalk, Reichian massage and Boysen’s Body Psychotherapy, Hippocratic Character Medicine (Full engagement) and holistic sexology (I.e. the Betty Dodson method (5)) were not mentioned at all in the

report. When the European Master of Science degree in CAM was established a few years ago, all information on CAM was collected from 40 academic institutions and the problem was the same: How can we categorize all the different CAM systems and the healing principles that work in them? (6)

The big problem for the group was how to define CAM (3). What should be included and what should be omitted? Coaching is not included, but should clearly be. Look at this inclusion in the report: “Didjeridoo. A form of sound therapy, this aboriginal wind instrument has been used for healing for 40,000 years. Circular breathing supported by the sound frequency reaches deep into the subconscious.” Of course the instruments used for meditation are also therapeutic. But what about the Indian flute, played by Krishna? What about the Tibetan bells, drums and gongs? What about the grand piano, played by so many great classical musicians obviously touching the listeners feelings and causing relief, happiness and healing for some.

What about spa and massage machines? What about good restaurants, are they not healing with their great meals and relaxing atmosphere? What about public swimming halls and gyms? Qi Gong and Tai Chi is on the list, but Taekwondo and Aikido is not. How can that be?

The herbs and spices, the diet, the lifestyle, the attitude, the relationship, the philosophy... everything will influence the patient health. Even harmonic living environments, nature or beautiful houses can be seen as therapy and what about pets, cats, dogs and horses? What about holidays and nice tropical beaches – they can be highly therapeutic, or love relationships? Sex, drugs, psycho-active substances were the core method of many pre-modern shamanic healing systems, and we find shamanism on the list: “*Shamanism*. Traditional native healing systems practiced throughout the world. Archaic magico-religious phenomenon in which the shaman may use fire, wind, or magical flight as part of a healing ceremony.”

But psycho-active substances, like Ayahuasca, Peyote and San Pedro Cactus, Psilocybin mushrooms (“Magic mushrooms”), the African plant Ibogain, the mushroom Amanita Muscaria traditionally used in Northern Europe are not mentioned here. “Fire” and “wind” is fine, while Peyote being an LSD-like drug

is a little too controversial. Women who are raped are often seen to have improved more than a control group after completing therapy, a phenomenon called paradoxal, post-traumatic growth (7). Even surviving mortal danger, like war, can heal. “Anything that do not kill you will make you stronger” is an often used saying in Northern Europe.

In reality everything can be healing, everything can have a positive impact on your life, your health and your spirits. Everything that is difficult, painful and challenging can develop you and give you a lesson for life. Even work! So everything can be CAM.

The 7-class CAM system

So we need to find some principles to crease order in this chaos. Using the three levels of human nature – body, mind, and spirit – seems to be the simplest. We have developed such a system (see table 1) to evaluate the efficacy and harm of different types of CAM (8) and to establish the different healing principles in them (9) and the major errors you can make in non-drug medicine (10).

The system has chemical medicine (biomedicine and chemical CAM) as class 1, body-medicine as class 2, mind medicine as class 3, sprit medicine as class 4, mind-body medicine as class 5, holistic mind-body-spirit medicine as class 6 and shamanistic medicine using mind-expanding drugs (chemical-body-mind-spirit medicine) as class 7 (see table 1).

We did not include a class for body-spirit medicine, or for mind-spirit medicine, as all kinds of spiritual medicine seems to have a bodily practice. In Tibetan prayer, you need to for example kneel 100,000 times. But to be academically correct we need to include herbal and diet treatments as “chemical CAM”, and we need to make a category for social and work-related health interventions like coaching and stress management. Sexology could have its own class, but as sexology is practiced as body-medicine, mind-medicine, mind-body-medicine and mind-body-spirit medicine, and always will be a part of the therapy at least to some extent as we are sexual beings, this would be irrational; we therefore kept sexology integrated in this system.

Table 1. Classification of medicine according to the use of the healing principles of CAM into seven principal classes (different styles of sexology is included in many of if not all the classes)

1.	Chemical medicine (biomedicine, herbal medicine with bioactive molecules)
2.	Body-medicine (massage, reflexology, physical therapy, physiotherapy, spa, sauna)
3.	Mind-medicine (psychotherapy - psychodynamic, cognitive, gestalt-psychoanalysis, meditation, no-touch sexology, coaching, healing music)
4.	Spirit-medicine (philosophical interventions, energy medicine, prayers, spiritual healing (i.e. Reichi), shamanism, spiritual CAM (i.e. crystal healing)
5.	Mind-body medicine (acupuncture, acupressure, chiropractics, homeopathy, manual sexology, body-psychotherapy, Reichian bodywork, Rosen therapy, ergo therapy)
6.	Holistic (body-mind-spirit/existential) medicine (holistic medicine, clinical medicine, clinical holistic medicine, holistic body-psychotherapy, holistic bodywork, the sexological examination, holistic mind-body medicine, biodynamic body-psychotherapy, tantric bodywork and massage, holistic sexology, Native American rituals).
7.	Chemical-body-mind-spirit medicine (Shamanism with peyote, Ayahuasca, magic mushrooms, Ibogain, LSD and NMDA psychotherapy)

The 10-class CAM system

The value of this 7-class categorization system is that there are healing principles related to chemistry, body-body interactions, mind-mind interactions, spirit-spirit interactions and the combination of these four; and it seems that it is these healing principles that determine the efficacy and safety of the specific type of CAM (see table 2) (8). From this work we have thus been able to identify the methods which are most likely to be efficient and safe for the patients.

Table 2 presents our new and expanded classification of medicine (including biomedicine, chemical medicine, energy medicine, spiritual

medicine). We include chemical biomedicine to make it complete.

Table 2. Classification of medicine (Including CAM and biomedicine) into 10 principal classes

1.	Chemical medicine (biomedicine with bioactive molecules)
2.	Chemical CAM (flower medicine, herbal medicine, diets, minerals, vitamins)
3.	Body-medicine (3a: Low-energy: massage, reflexology, physical therapy, physiotherapy, spa, sauna etc. 3b:High energy: chiropractics)
4.	Mind-medicine (psychotherapy - psychodynamic, cognitive, gestalt etc.-psychoanalysis, meditation, no-touch sexology, coaching, healing music)
5.	Spirit-medicine (philosophical interventions, energy medicine, prayers, spiritual healing (i.e. Reichi), shamanism, spiritual CAM (i.e. crystal healing)
6.	Mind-body medicine (acupuncture, acupressure, homeopathy, manual sexology, body-psychotherapy, Reichian bodywork, Rosen therapy, ergo therapy)
7.	Body-spirit medicine (prayer involving physical activity)
8.	Holistic body-mind-spirit medicine - including existential therapy (holistic medicine, clinical medicine, clinical holistic medicine, holistic body-psychotherapy, holistic bodywork, the sexological examination, holistic mind-body medicine, biodynamic body-psychotherapy, tantric bodywork and massage, holistic sexology, BodyTalk, Native American rituals).
9.	Chemical-body-mind-spirit medicine (shamanism with peyote, Ayahuasca, magic mushrooms, Grof's LSD-psychotherapy)
10.	Social and environmental medicine (coaching, work-related personal development programs, stress management, leadership training, gardening, aesthetic architecture, FengShui)

Systematising all CAM-systems into the 10 classes

The next thing we need to do is to fit all classes of CAM into the 10-class system and see how it fits. We have done that in table 3.

Table 3. The 226 alternative medical systems (drug-CAM and non-drug CAM including holistic medicine, shamanism and sexology) which have been researched - organized in 10 classes (see table 2)

1. Chemical medicine		
1. Biomedicine with bioactive molecules	19. Hyperbaric Oxygen Therapy	
2. Chemical CAM		
1. Apitherapy (Bee Venom)	20. Hyperthermia	
2. Aromatherapy	21. Luminous	
3. Body Electronics	22. Manual pelvic physical therapy (infertility)	
4. Cell Therapy (not done in U.S.)	23. Massage therapies (several hundred types)	
5. Chelation Therapy.	24. NAET (Nambudripad's Allergy Elimination Therapy)	
6. Detoxification Therapy	25. Manual therapy	
7. Diets	26. Naprapathy	
8. Enzyme Therapy	27. Nasal Irrigation	
9. Essences Therapy Fasting (Cleansing)	28. Neuromuscular Therapy (Trigger Point Myotherapy)	
10. Flower medicine	29. Pet Therapy	
11. Herbal medicine	30. Physical therapy	
12. Hydrogen Peroxide Therapy	31. Physiotherapy	
13. Juice Therapy	32. Pilates	
14. Macrobiotics	33. P6 acupressure (pregnancy, birth)	
15. Minerals	34. Polarity	
16. Naturopathy	35. Qigong	
17. Nutritional Therapy	36. Reflexology (feet)	
18. Ozone-Oxygen Therapy (Bio-oxidative Therapy)	37. Relaxation Therapy	
19. Panchakarma Therapy	38. Rolfing (Somatic Ontology/ Structural Integration)	
20. Prolotherapy	39. Sauna	
21. Urani Medicine	40. Spa	
22. Urine Therapy	41. Sports	
23. Vitamin Therapy	42. Tai Chi	
	43. Visceral Manipulation	
3. Body-medicine		
1. Acceptance through touch (sexology)	4. Mind-medicine	
2. Applied Biomechanics	1. Aversion Therapy	
3. Applied Kinesiology	2. Cognitive therapy	
4. Balneotherapy	3. Couching	
5. Biofeedback	4. Craniosacral Therapy	
6. Bowen Therapy	5. Dream Therapy	
7. Cheirology (Palmistry)	6. Eye Movement Desensitization and Reprocessing	
8. Chiropractic	7. Gestalt therapy	
9. Guided masturbation (sexology)	8. Guided Imagery	
10. Colon Hydrotherapy	9. Healing music	
11. Contact Reflex Analysis (CRA)	10. Hypnotherapy Neuro-Linguistic Programming (NLP)	
12. Cupping (Moxibustion)	11. Meditation	
13. Ear Candling	12. No-touch sexology	
14. Electrotherapy Gerson Therapy	13. Psychoanalysis	
15. Healing power of intimacy	14. Psychodynamic psychotherapy	
16. Herbal Medicine	15. Psychotherapy	
17. Holistic gynecology	16. Rapid Eye Technology	
18. Hydrotherapy	17. Visualization	

5. Spirit-medicine

1. Art Therapy
2. Autogenic Therapy
3. Bach Flower Remedies
4. Chromatotherapy
5. Color Therapy
6. Crystal healing
7. Emotional Freedom Technique (Tapping) (also called Thought Field Therapy)
8. Energy Field Medicine
9. Energy medicine
10. Feldenkrais Method
11. Journey work (the soul's journey)
12. "Healing Touch" without physical touch
13. Humor Therapy
14. Iridology
15. Kirlian Photography
16. "Light Therapy"
17. "Molecular therapy"
18. Music Therapy
19. Naturopathic Medicine
20. Orthomolecular Medicine
21. Past Life Therapy
22. Philosophical interventions
23. Positive psychology
24. Pranic Healing
25. Prayers
26. Radiance Technique (TRT)
27. Reiki
28. Satsangs with spiritual masters (i.e. Satya Sai Baba)
29. Scientology (OT-training)
30. Spiritual CAM (Interuniversity College, Graz)
31. Spiritual healing
32. Spiritual Healing
33. TAO (health philosophy)
34. Transcendental Meditation™
35. Transpersonal Psychology

6. Mind-body medicine

1. Accessing the unconscious through touch (basic Rosen method)
 2. Acupressure
 3. Acupuncture
 4. Alexander technique
 5. Betty Dodson method (sexology)
 6. Bioenergetics (Lowen)
 7. Body-psychotherapy (Boyesen)
 8. Chiropractics
 9. Clinical medicine (the examination is the treatment)
 10. Crisis intervention
 11. Ergo therapy (occupational therapy)
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12. Gestalt therapy
13. Hellerwork
14. Holistic pelvic examination
15. Homeopathy
16. Jaffe-Mellor technique (JMT)
17. Jin Shin
18. Jyutsu
19. Kegel exercises
20. Manual sexology
21. Medical intuitive
22. Physical therapy for the pelvic floor Reichian bodywork
23. Rosen therapy (basic Marion Rosen)
24. Ryke Geerd Hamer's System for holistic treatment of metastatic cancer (German New Medicine, GNM)
25. Shiatsu
26. Short-term psychodynamic psychotherapy complemented with bodywork
27. Trager method
28. Transformational
29. Transssage
30. Watsu
31. Wave work
32. Zero balancing

7. Body-spirit medicine

1. Aboriginal medicine men
2. Anthroposophy
3. Druids (Traditional Keltic Healers)
4. Dynamic meditations (Osho)
5. Prayer involving physical activity
6. Samic healers
7. Sangomas (African Traditional Healers)
8. Shamanism (without drugs)
9. Tantra (sexual-spiritual practice)
10. Witch-craft medicine

8. Holistic body-mind-spirit medicine - including existential therapy

1. Bengt Stern's Meet Yourself Course
 2. Biodynamic body-psychotherapy
 3. Body-based self-development courses
 4. BodyTalk (Veltheim)
 5. Boysen's Body Psychotherapy
 6. Breathwork (holistic, holotropic, bioenergetic, sexological etc.)
 7. Chakra experiencing
 8. Clinical holistic medicine (CHM)
 9. Clinical medicine
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10. David Spiegel's Holistic cancer medicine (QOL improvement, Stanford University)
 11. Dean Ornish' cures for coronary heart disease and cancer
 12. Depth psychology
 13. Guided imagery
 14. Hippocratic Character Medicine (i.e. Full Engagement)
 15. Holistic body-psychotherapy
 16. Holistic bodywork
 17. Holistic medicine
 18. Holistic mind-body medicine
 19. Holistic sexology
 20. Holotropic breastwork (Grof)
 21. Homeopathy
 22. Huna
 23. Induction of spontaneous remission of cancer by recovery of the human character and the purpose of life
 24. Intensive body-psychotherapy combined with mindfulness meditation at Mullingstorp in Sweden (Bengt stern)
 25. Logo Therapy (Frankl)
 26. Mindful short-term psychodynamic psychotherapy complemented with bodywork (CHM)
 27. Mindfulness meditation
 28. Native American rituals
 29. Psychic massage (Osho)
 30. Psychodrama (gestalt therapy) using controlled violence and sexual abuse (Simili similibus currentur, Bengt Stern)
 31. Quality of life as medicine (Ventegodt)
 32. Reichian massage
 33. Rosen Method (advanced)
 34. Rubenfeld Synergy
 35. Salutogenic therapy (Antonovsky)
 36. *Sexological examination, the*
 37. Shamanism (without drugs)
-
38. Spiritual crisis intervention
 39. Tantric bodywork and massage
 40. Therapeutic relationship formation between self-awareness and casework (Interuniversity College, Graz)
 41. Tuina
 42. Vaginal acupressure
 43. Yoga
- 9. Chemical-body-mind-spirit medicine**
1. Ayurvedic Medicine
 2. CAM regulatory methods
 3. Grof's LSD-psychotherapy
 4. Lifestyle changes for coronary heath diseases (Spectrum - Dean Ornish)
 5. MDMA psychotherapy
 6. Shamanism with peyote, Ayahuasca, magic mushrooms etc
 7. Traditional Chinese Medicine (Oriental Medicine)
- 10. Social and environmental medicine**
1. Aesthetic architecture
 2. Arena Method (Aina Søbakk, Norway)
 3. Behavioral therapy
 4. Clubbing
 5. Coaching
 6. Education, academic training
 7. Feng Shui
 8. Gardening. Therapy gardens
 9. Holistic rehabilitation
 10. Leadership training
 11. Psycho-social medicine
 12. Stress management
 13. Work (development of skills, talents, self-confidence, self-worth etc.)
 14. Work-related personal development programs
-

This is not perfect, but in our view it can be helpful. Many systems can be practiced in different ways, allowing for the system to appear in several different classes. But we have thought about this and realized that if this is the case, the system is really more processes under one common label. We understand of course that many CAM practitioners will disagree in our position.

Discussion

We believe that we have developed a useful systematic schema of CAM, but we invite others to help us improve it further, and to fit the different CAM systems into the correct categories. What we have done here is not the final answer, but a new beginning, organizing CAM according to human nature and fundamental structure, not to ad-hoc labels coming from cultural and historic influences.

We have suggested a 10 class classification system for medicine – including both CAM and

biomedicine – based on the fundamental structure of a human being, with molecules, body, mind and spirit. There are many advantages of such a general and broad classification.

First of all the system of the activities and thus the identification of the healing principles in use (8,9,10) give a fair idea of expected effect size, clinical conditions which can be treated, and possible side effects (8,9).

The system allows for a cost-benefit analysis (11); if you want the cost-benefit expressed in QALY you can use data on QOL collected with a short questionnaire like QOL10 (12). Then, if you are to supervise the CAM treatment, you will also know which formal errors the therapists using the different systems can make (10). When you know what is going on and therefore also where the borders are for the expected activities which help practitioners to treat according to ethical standards (13).

Finally we have found this system enables research in CAM to be clear and efficient (14,15). As non-drug CAM is more than anything consciousness-based medicine using the placebo effect for cure, RCTs with placebo control cannot be used (16) for research in non-drug CAM. We suggest a simple design where patients are measured before and after treatment and again after one year (15). We have used this design to document the effect of clinical holistic mind body medicine (CHM) and found it to be efficient with most physical, mental diseases, most sexual dysfunctions, and also existential and psychological problems like low self esteem and low quality of life and working life (17).

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SHORT COMMUNICATIONS

BodyTalk: The journey

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Abstract

This series of paper will take you on a journey of exploration into how BodyTalk works from a practical and scientific perspective. Further, they will take you into the extraordinary world of quantum healing, where advanced BodyTalk formulas utilize all the exciting developments of quantum theory that apply to health care. By the time you complete this journey there will be a quantum leap in your understanding of healthcare.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

The BodyTalk system is based upon a few different principles that involve science (including modern physics), philosophy, techniques and formulas to utilize effective and safe scientific, alternative medicine. We call this quantum health care. The BodyTalk System is thus comprised of techniques and formulas that have their roots in both the new physics and philosophy. This marriage of cutting edge and ancient paradigms has given birth to a revolutionary and highly effective way of addressing disease through quantum healthcare.

The primary underpinning of the basic BodyTalk system is Dynamic Systems Theory. This scientific model has been around for more than 40 years and is explained so wonderfully by scientists, such as Fritjof Capra in his paper (1).

Essentially, Dynamic Systems Theory highlights the flaws of the Cartesian model of physics. The Cartesian model considers the world and its components to function rather like the mechanisms of a clock. Cartesians believe that if you learn about, and fix, all the individual parts of a clock that it will run perfectly. Despite the fact that use of the Cartesian model for healthcare is fraught with limitations, diehard Cartesians continue to adhere to its principles.

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Cartesian practitioners are, essentially, materialists who want to specialize in their own little part of the world. They choose to dismiss everything beyond their specialty as unimportant and irrelevant.

It is this limited Cartesian paradigm that is promoting and perpetuating the major crises we are now experiencing worldwide. Disrespect for, and unhealthy interaction with the ecology and our fellow man, finds cultures at war with one another and man at war with nature. Similarly, unethical, competitive practices in trade and economics find families, communities and countries experiencing untold hardships and devastation.

It is because the compartmentalized, Cartesian model runs totally contrary to sound scientific and philosophical principles that man is now at war with himself and with nature. It is thanks to celebrities such as Al Gore and Oprah that mainstream media have, finally, started to sit up and take note.

The quantum scientific principles have been understood for over a hundred years. The ethical and philosophical principles, such the Indian Advaitic/Vedantic teachings, which underpin quantum science, have been around for many centuries.

Just a little careful observation reveals that our solar systems and mother earth are not two. Instead they comprise a dynamic matrix of interlacing morphogenic fields. In quantum physics this matrix is referred to as variations of Quantum entanglement. It is critical that we recognize and acknowledge that everything we do has extensive, short and long-term, dynamic ramifications throughout the universe.

Health care

This paper is focusing on a healthcare that supports and promotes the wellbeing of every living organism. The medicine of the future must be based on sound quantum scientific principles, and sound philosophical and moral principles.

This statement may seem strange to us at first, because most of us think of medicine as being very scientific. That is because we are forgetting the word quantum. The Cartesian medical model approaches the body in the same way as many other academic disciplines have approached mother earth. They

ignore the quantum scientific fact that the body is a dynamic ecology of trillions of cells and microbes. This ecology functions best when using the science of dynamic system theory and quantum theory.

As must now be obvious to you, addressing individual parts as separate in function is counter productive to dynamic functioning and wellbeing. Certainly, when doctors address the individual parts they take a Cartesian scientific approach. They often use compartmentalized, scientific research for developing techniques. History shows that this approach can lead to clinical successes in many fields of health care.

There is, however, a vast difference between healthcare based on sound scientific research and a healthcare system basing its research on the principles of quantum science. The former approach, the Cartesian model, has its limitations. The latter approach, utilizing the principles of quantum science, produces quantum healthcare.

The number of surgical procedures that take place in the wake of limited diagnostic preparations is astronomical. However, when the bodymind's own priorities are respectfully attended to, and the root cause is addressed, as is the case with BodyTalk, oftentimes invasive surgeries are averted.

At present, healthcare persists in ignoring the new physics and the potential for revolutionary new ways of addressing health problems. With diagnostic models, the superimposition of generic labels and practitioner agendas creates dependency on medication and surgical procedures. Consequently, patients of such healthcare systems are reliant on healthcare that is both disrespectful of, and detrimental to, their general health and wellbeing.

As you are probably beginning to understand, this paper is a call to revolutionize healthcare. There is no reason at all why medical and alternative healthcare practitioners cannot heed this call for transformation and begin implementing models that abide by the laws of quantum physics. All that is required is a quantum shift in perspective on the existing, outmoded, and financially exorbitant healthcare models that are presently in use. This paper is just such an alert, to all healthcare practitioners and patients, to sit up and pay attention to the gift of new physics that is available to us all right now.

The key treatment principles should be aimed at restoring effective communication, synchronization, and balance in function. These are the basic principles of dynamic system theory.

The dynamic system theory is the underlying principle utilized in the basic levels of BodyTalk. All the basic BodyTalk techniques and formulas are designed to restore effective dynamic systems principles based on the knowledge that if you restore those factors, the body can, and will, heal itself in most cases.

This series of paper will take you on a journey of exploration into how BodyTalk works from a practical and scientific perspective. Further, they will take you into the extraordinary world of quantum healing where advanced BodyTalk formulas utilize all the exciting developments of quantum theory that apply to health care. By the time you complete this journey there will be a quantum leap in your understanding of healthcare.

My own journey

My journey in personal growth and what I would call personal awareness started at quite a young age, when my father graciously spent several nights a week taking me to martial arts classes. I was lucky to have drawn a teacher who extended my vision beyond martial arts to the power of personal development by teaching me many disciplines such as Zen meditation and the power of the mind. I was eight years old when that journey started. I soon learned that skills did not come from simply doing a lot of exercises and building big muscles. I was fortunate to have an instructor who realized that the true strengths found in martial arts comes from the Energy (chi) within and the training of the mind in focus and intent. Unusually, I had good discipline at that age to train hard and, in particular, to do extensive Zen meditation practices to discipline my mind.

During those early years I learned that I could put my hand through a stack of clay roofing tiles without the need of big muscles and hard calluses on my hands. My hands remain soft throughout my decade of martial arts training, because I always knew I wanted them in good order for when I later practiced healthcare. I used my mind with focus and intent and

chi to drive my hand through the piles of tiles, which by the age of 13 years involved a stack of up to forty tiles.

Brute strength can only do so much. I saw large muscular men with hard calloused hands attempt to break similar stacks of tiles and only make it through the first 20, because the sheer brute power could only keep the momentum going through those first 20 tiles. By going through the mental process of directing chi right through to the bottom of the stack of tiles, I not only reached the bottom of the tiles but would shatter them into hundreds of small pieces from the impact of the chi which was explosive.

At 13 years of age I was one of the teachers at the martial arts school and I continued to experiment with the power of the mind over body. One of my favorite techniques was what I called using my mind to turn parts of my body into "steel". I would stand with my arm extended in a relaxed manner and visualize chi running through my arm out through my fingers towards the horizon. I then used to visualize that chi turning into solid steel. I then had two of my strongest students attempt to bend my arm and they could not, even though others could feel the muscles in my arm to be very relaxed. My next trick was to visualize the chi flowing down my legs and through my feet, deep into the ground and branching out like roots. Once again I turned that chi into steel so that I was rooted to the ground by deep "roots of steel." Two very strong man combined could not lift me off the ground or push me over. At a very young age I had learned the power of the mind and just how much the energies on our body can literally control the strength and function of the physical body.

When I was about eleven I taught myself how to hypnotize. It seemed just extension of my meditation practices and now I did on other people. To me it was a way of exploring the nature of the mind and just how powerful the influence it has over the body. In this case I was using trance hypnosis with the participant, who would lose total consciousness, while they were under hypnosis. I did the normal fun things you would do at school, such as hypnotizing a group of kids during lunch hour. I would program them that in the first period after school, when the teacher asked everyone to get out their books, they would instead jump up on the table and bark like dogs! After a few too many trips to the principal's office I decided to

confine my experiments outside of school hours. In my later teens I did several experiments to demonstrate how much the mind could affect the physiology of the body, its health and its strengths by simply getting the false ego out of the way through the means of hypnotism. However, my goal was to utilize this knowledge and gain a better understanding of how to help the mind and energy system maintain the average person's health care and quality of life in a natural way.

Chiropractor

In my early years as a chiropractor I remember working at two different levels of chiropractic:

- Symptomatic – physical based manipulation to mobilize the body and relieve pain.
- Traditional – Based on the principle of balancing the nervous system through specific spinal adjustments to improve general health. This also involved the concept of allow the innate energy of the body to flow freely through the spine to all the body parts.

With the first level I was basically acting in my capacity to address back problems and relieve back pain. This tended to utilize my Osteopathic background to do osteopathic manipulation of the spine designed to mobilize the spinal segments and restore movement in that was previously restricted.

However, in my public lectures and in my literature I talked a great deal about the philosophy of what I would call traditional chiropractic. At this stage the public generally saw chiropractors in Australia as “bone crunchers” who “fixed” backs. Eventually, over a period of two years of patient education I developed a practice where less than 20% of my patient came to me with back problems. The other 80% came for general health concerns for which I got very good results in a specific range of health challenges.

A typical example was one of my patients have been coming to me for about five treatments for general back pain that was responding very well. In fact I was at the stage of giving him his last treatment, when he mentioned that he had been reading my

literature. He said that he had read that chiropractic can help stomach ulcers and explained that he had been suffering from severe stomach pain especially at night for several years. The medication he was taking from the doctors just was not helping much and wondered if I could try using my system.

I had actually finished that session, but asked him to lie back on the treatment table and at this stage I proceeded to adjust him in what is called the classic traditional chiropractic technique. I specifically recall adjusting with a very specific intent and focus of balancing the sympathetic and parasympathetic nerve supply to the stomach region and restoring innate flow to the body. Remember that my previous osteopathic adjustments had an intent and focus of simply mobilizing the spine and relieving back pain.

Two days later the patient rang me to say he just had the best two night's sleep of his life. I treated him four more times along the same lines and when I saw him six months later for another problem, he mentioned that his stomach had been normal throughout those previous six months.

Acupuncture

Once again this highlighted the absolute importance of intent and focus in any technique you are performing on living things. Later, as an acupuncturist I encountered similar situations all the time. For simple conditions I often used a symptomatic approach in my acupuncture formulas, which afforded me good results in the average case. I had a very busy practice and they were quick and simple to do. However, whenever I encountered a particularly tough case that was not responding after three treatments I found myself having to shift mode into my classical traditional acupuncture training. This involved a full diagnostic profile of reading pulses, tongue, etc.

I found that on most occasions, once I shifted my mode of thinking into a fully traditional way and worked out a specific tailor-made formula for that particular patient's condition, I often ended up with a combination of acupuncture points very similar to what I was already using. Again, the big difference was my intent and focus as I inserted the needles. In my years as a senior lecturer in an Acupuncture

College I often demonstrated to the students just how much intent and focus determined the outcome of a needle insertion. Simply inserting a needle into acupuncture point can have a certain predictable effect. However, when the practitioner has a detailed understanding of the whole meridian system and the ebbs and flows of the energy according to the time of day, lunar phases, and gender of the patient, then skilled traditional acupuncturists can effectively cause many different changes in the energy systems the body by the use of the same acupuncture point simply by changing the intent and focus while inserting the needle.

Over my many years in practice I saw this concept to be relevant in almost all forms of healthcare that involve energy at different levels. Another example would be homeopathy, which is, in fact, energy medicine. A traditional homeopath can prescribe a single ingredient that, with his intent and focus as he gives the remedy to the patient, would have a far better result than the symptomatic homeopaths that use standard formulas designed for specific outcomes. I also saw this in applied kinesiology, craniosacral therapy, and the use of machines to generate frequencies for specific outcomes.

Focus and intent

My early life experiences demonstrated to me clearly that the state of training of a practitioner, his focus and intent, his clarity of thought, and the rapport that he has for his patient can be seriously important factors determining the outcome of any therapeutic situation.

I always fully understood that energy controlled matter and that all the energy of the universe was a series or collection of morphogenic matrices that are all interrelated and interdependent. This means that the only system that made total sense to me was dynamic systems theory. The author, Fritzjof Capra had a profound influence on my thinking in his book, "The Turning Point" (1).

It made perfect sense to me that it was silly to be looking at the physical particles of the body, when it comes to bringing about effective change of a lasting and holistic nature. Working just on the physical level

was always going to be first aid. This could be great first aid, even lifesaving first aid; however it was still only first aid.

It was also just as obvious that we had to look at the body as a whole and see that everything within the body, in fact every cell in the body, has integrated matrices of energy dynamics. On top of this, great care has to be taken to look at the environmental impact of everything going on around the patient as well as the patient's detailed history from all aspects. Taking all this into account, we can truly bring about the quantum shifts that are necessary for significant and lasting holistic healthcare.

Holistic healthcare

My major problem in the development of a truly integrative holistic healthcare system lay in my own personal addiction to the diagnostic model. All my early training in basic medical sciences, Chinese medical sciences, naturopathic sciences, and so on, rigidified my thinking that diagnosis had to be part of the medical model. However, the diagnostic techniques available simply did not enable us to fully understand the enormous complexity that we faced with the average patient when we are trying to bring about quantum shifts that are truly addressing the underlying cause of whatever conditions the patient may present with.

It seems ironic that probably the first thing I studied in my life was the mind and the power of the intuitive process. I developed the mindscape technique for my martial arts and, to a certain extent, my healthcare practice, so that I could better intuit what was actually going on around me. I understood the power of the intuitive process and further understood that what I was calling intuition was in fact a specific aspect of the consciousness that underlines all that is.

Although I knew that I could quite often accurately diagnose what was going on in a patient, I believed that was the skill that I had developed over many years and was not necessarily something I could train students to be good at in undergraduate programs or weekend workshops. Hence, I saw practical limitations in introducing the concept of intuitive diagnosis into established healthcare

training. I fully recognize there had been many medical intuitives tested under stringent conditions to show the accuracy of their diagnosis. To me, this talent was something you either were born with or it took many years of meditation and mental practices such as I did to develop those skills to the point that they would be reliable in practice and accurate.

Even when I first developed the early techniques of BodyTalk I still tended to see them as specific techniques that could be utilized by other modalities of healthcare in a very constructive way. Eventually the number of techniques grew and their importance became very apparent by the results the practitioners I trained were getting. Through a combination of my own background experience and the very wise counsel of my wife, Esther, who had a very highly developed philosophical understanding and wrote books on the nature of mind and the nature of consciousness, I decided to make a radical change in my approach to healthcare.

This is when I truly embraced the concept of integrative consciousness-based healthcare. With Esther's help I developed a system to train practitioners rapidly in the art of communicating with the innate wisdom of the body in order to establish the best way of addressing the needs of the body. This meant bringing together the left brain sciences associated with the medical model, and the right brain understandings of dynamic systems theory, quantum theory, and consciousness. The BodyTalk system rapidly evolved from that point.

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What is consciousness?

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Abstract

Consciousness is variously defined as subjective experience, awareness, the ability to experience "feeling", wakefulness, the understanding of the concept "self", or the executive control system of the mind. The most common approaches to consciousness are: 1. Philosophical approaches (1.1 Phenomenal and access consciousness; 1.2 The description and location of phenomenal consciousness; 1.3 Philosophical criticisms; 1.4 Consciousness and language). 2. Philosophical-religious approaches (2.1 Buddhist philosophy; 2.2 Traditional; Indian philosophy; 2.3 Chinese philosophy; 2.4 Greek philosophy). 3. Premodern culture's religion and medicine (3.1 Native American medicine; 3.2 Australian aboriginal medicine; 3.3 African medicine (Sangoma healer tradition); 3.4 Southern European traditional Healing (Hippocrates); 3.4 Northern European traditional healing (Witches, druids, shamans)). 4. Scientific approaches (4.1 Cognitive psychology and cognitive neuroscience; 4.2 Measurement aspects; 4.3 Experimental philosophy; 4.4 Evolutionary psychology) It was earlier believed in western thinking that consciousness was a mental phenomenon, but newer research indicate that it is a fundamental phenomena connected to all living beings with or without nervous system.

Keywords: Alternative medicine, traditional medicine, consciousness.

Introduction

Consciousness is variously defined as subjective experience, awareness, the ability to experience "feeling", wakefulness, the understanding of the concept "self", or the executive control system of the mind.

Table 1 lists the most common approaches to consciousness.

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Table 1. The most common approaches to consciousness

1. Philosophical approaches
1.1 Phenomenal and access consciousness
1.2 The description and location of phenomenal consciousness
1.3 Philosophical criticisms
1.4 Consciousness and language
2. Philosophical-religious approaches
2.1 Buddhist philosophy
2.2 Traditional Indian philosophy
2.3 Chinese philosophy
2.4 Greek philosophy
3. Premodern culture's religion and medicine
3.1 Native American medicine
3.2 Australian aboriginal medicine
3.3 African medicine (Sangoma healer tradition)
3.4 Southern European traditional Healing (Hippocrates)
3.4 Northern European traditional healing (Witches, druids, shamans)
4. Scientific approaches
4.1 Cognitive psychology and cognitive neuroscience
4.2 Measurement aspects
4.3 Experimental philosophy
4.4 Evolutionary psychology

What is consciousness?

It was earlier believed in western thinking that consciousness was a mental phenomenon, but new research indicate that it is a fundamental phenomenon connected to all living beings with or without nervous system. Researchers like Stuart Hameroff (1) and Roger Penrose (2) believe it to be present in all living cells (i.e. as a quantum phenomenon in the microtubuli).

Few of the approaches listed in table 1 are directly relevant for quality of life (QOL) research. When we look at consciousness in relation to QOL, there are two major traditions of interest as they are directly related to the concept of happiness: eastern philosophy in general, premodern religion and existential philosophy.

In eastern philosophy, i.e. in the tradition of Sri Ramana Maharshi (3) consciousness about the self is

the door to happiness ("eternal bliss"). In premodern religion, the shaman is one with the universe, and all his or her doing expresses the will of the Great Spirit. In existential philosophy, as formulated by Kierkegaard (4) and Sartre, happiness rises from the personal choice, and only by choosing the true can a person be truly happy.

The direct experience of consciousness and Ramana's philosophy

Ramana (2) asked one fundamental question: "Who am I?" To answer this question, a simple method of intuitive introspection is used. One simply observes all phenomena that one can observe from the perspective of the heart, both internally and externally; and systematically asks: "Am I this?"

The outer world of objects is soon seen as non-self. The thoughts, feelings, the body, all mental images, memory, anticipations, intentions, desires, attachments etc. are also watched and little by little also seen as non-self. In the end all phenomena is acknowledged as non-self, including all concepts and words, all knowledge and all mental structures, ideas and perceptions.

The second, quite logic, question two is then: "If I am none of these, then who am I?" The answer is: "After negating all of the above mentioned as "not this", "not this", that awareness which alone remains – that I am." (3) Questions three is: "What is the nature of awareness?" Answer: "The nature of awareness is existence-consciousness-bliss." This is often called Sat-Shit-Ananda. Question four is: "When will the realization of the self be gained?" Answer: "When the world which is what-is-seen has been removed, there will be realization of the self which is the seer."

This is basically it. The rest is for your own experience. The state of being present in truth, or inner self, cannot be described; being, happiness and knowledge is what seem to appear in consciousness of the one who finds it and dwells in it. And even the idea of finding it is illusory: It is already and always there. You just need to realize it; you just need to wake up at this level. Then you know that you have been this all the time. The problem is that it is a quality-less state, often describes as emptiness, the

great void, or Sunya(ta). It's a non-phenomenon, and the recognition is non-phenomenal. This does not make sense to the mind at all. You cannot understand it mentally. That is the problem. Experience can go deeper than thought; consciousness is earlier than thought; it came first. Therefore it cannot be understood by thought.

The traditional value of being conscious is, from the eastern point of view, that one can break the conditionings that make human slave of past. This is called personal freedom, or "enlightenment".

There is no scientific agreement about the significance or meaning of the concept of enlightenment. There seem to be a general agreement that a permanent characteristic of the enlightened person is a happiness that is constant and which does not change with the external conditions and is even not is threatened by disease and dead.

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BodyTalk in practice

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Abstract

In this paper we will be exploring the basic methodology of a BodyTalk session. By means of imagery and easy to grasp explanations of the fundamental concepts involved, you will start getting a feel for what goes on when a BodyTalk treatment takes place. The objective is to answer what a session of BodyTalk looks like and what to expect. Several concepts will be introduced in a simplistic form and without detailed explanation. The scientific and philosophical details of these concepts and techniques will be explained in subsequent papers.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

In this paper we will be explore the basic methodology of a BodyTalk session. By means of imagery and easy to grasp explanations of the fundamental concepts involved, you will start getting a feel for what goes on when a BodyTalk treatment takes place. The objective of this paper is simply to answer the pressing questions:

- “What does a BodyTalk session look like?”
- What could I expect to happen if I were to receive a session?”

For this reason, several concepts will be introduced in a simplistic form and without detailed explanation. The scientific and philosophical details of these concepts and techniques will be explained in subsequent papers. The session outline is a follows:

- The BodyTalk practitioner will take a case history and ask what you want to have addressed.
- You will then lie on a treatment table or sit in a chair, fully dressed and comfortable.

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- The practitioner will establish an intuitive communication link with the innate wisdom of your body. Part of the training in BodyTalk is to establish reliability and accuracy in this communication.
- The BodyTalk practitioner will not attempt to diagnose you in the classic medical sense. It is a basic tenant of BodyTalk that the actual label given in a diagnosis does not help in dynamic systems theory based health care. This is because classical diagnosis misses so many of the underlying nuances of the client's health challenges.
- The practitioner will then "ask" the body what disturbances have occurred in the vital energy body that have compromised the balance, communication and synchronicity of the bodymind system.
- The innate wisdom of the client's body will then direct the practitioner to establish the necessary "links" necessary for correcting the breakdown in the vital energy body. For example, it may be that the pituitary gland is not communicating and synchronizing correctly with the ovaries, and this is causing reproductive problems.
- In basic BodyTalk the practitioner will place the client's hand over one of the links (e.g. the ovaries) and the practitioner will touch the skin lightly over the pituitary.
- While the two contact points are focused on with intent, the practitioner will very gently tap the client's head with his fingertips. He will do this for a few seconds and then tap the sternum for a few seconds. This method, explained in detail later on, is one the key secrets of BodyTalk's success. Through standing waves, the tapping activates the bodymind complex's correction process. The brain corrects the energetic patterns between the pituitary and ovaries and then stores the changes in the heart/brain complex.
- Because the energetic blueprint has been corrected, the physical molecules will undergo corresponding changes that will correct the condition on the physical level.
- The steps are repeated, looking for other necessary links and addressing them, until the

bodies innate wisdom indicates that the session is completed.

The whole session is painless, noninvasive and very relaxing. Whenever the vital body has communication problems it creates stress in the entire system. That is why correcting the links is usually so relaxing because it brings immediate stress reduction within the whole bodymind complex.

No medication is given and no instruments are use in a BodyTalk session. The technique is very safe and has no contraindications.

Frequently, the formulas involve more than one link be tapped out at a time. In such cases the BodyTalk practitioner is trained to focus on the multiple links without needing to touch them. The combination of focus, intent, observation and the tapping have the desired effect. The success of this system is clinically evidenced by thousands of BodyTalk success stories coming from all over the world, since BodyTalk's conception.

A session can last from a few minutes up to an hour, depending upon the complexity of the necessary links. In each case the practitioner will explain what is being done so that the client has knowledge of what is happening. By engaging and informing the client in this way it gives them a sense of taking part in their own healing process. The client will also receive a deep understanding of why they were sick in the first place. Added to this, the client gains a clearer understanding of the healing process and the role the body plays in healing itself. Many studies have shown that the client's understanding can play a very important role in their healing process.

Example

The power of a simple link, such as the pituitary to ovaries, was demonstrated in a thirty two year old client who was infertile, with the inability to ovulate. Seven years of medical care had not helped and she did not want the IVF (In Vitro Fertilization) procedure. The link, pituitary to ovaries, resulted in renewed ovulation. The client became pregnant two months later.

One of the key errors we humans tend to make is to complicate life, and then to add to the

complications, mistaking them for complexities. Our tendency to stick with Cartesian models, even in alternative healthcare modalities, is fraught with dangers. Complicated healthcare can lead to long-term health complications. The most exciting aspect of the BodyTalk system is its simplicity and safety. The next most exciting thing is the dramatic results that this simplicity can elicit.

The real beauty of the BodyTalk System is that it does not rely on diagnosis. The added complication when relying on diagnosis is that the practitioner's own personal agendas come into the mix. This can blind the practitioner to deeper underlying, root cause problems. Those who work in the field of healthcare, relying on diagnosis as their benchmark are what we call classic practitioners.

Because BodyTalk relies on the bodymind's own innate wisdom to direct the way health issues are addressed, the BodyTalker cannot be called a practitioner in the classical sense. Instead the BodyTalker serves as a facilitator, deeply respecting the bodymind's innate, natural processes and priorities.

What happens when diagnosis is the medium for treating the body is that the bodymind complex's priorities are ignored. When this happens the focus of the practitioner is on treating symptoms. Symptomatic treatment methods usually end up disclosing further symptoms and the practitioner addresses each in turn, making the symptoms the priority. In other words, the bodymind complex is being treated superficially at best. The trouble is that a symptom has so many underlying causes. When the symptoms are given priority, the causes that underpin them are usually exacerbated and contribute to further, and often worse, health complications down the track.

The BodyTalker facilitates the natural processes of the body by allowing the innate wisdom of the bodymind to direct how health problems are addressed. The bodymind complex has its own very complex priorities, which can seem quite unrelated to the symptoms that are presenting themselves. For example, the innate wisdom might see targeting emotional or environmental issues to be a priority. In this way the BodyTalker facilitates resolution of the deeper, underlying causes that have given rise to the surface symptom.

At present, traditional forms of healthcare often remain out of alignment with, and disrespectful of the simplicity and wisdom of the bodymind's own priorities. While this form of healthcare remains the standard, healthcare will continue to be financially demanding.

That BodyTalk relies on the bodymind's inner wisdom, and respects its priorities, is what makes this innovative healthcare modality so effective.

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The use of consciousness as diagnostic tools in BodyTalk: How to understand the patient's problem and heal without specific medical diagnoses

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Abstract

To give you a strong visual of what is being talked about in this paper, here is a list of the possible influences complicit in a stomach ulcer: Harmful bacteria, faulty sympathetic nerve supply, poor diet, overstimulation of the vagus nerve, cancer, slow poisoning, self-induced stresses from rigid belief systems and addictions, emotional trauma, past emotional traumas still affecting the brain, genetic factors, environmental factors such as family members, neighbors, community, work stress, financial stress. In reality the symptoms of a stomach ulcer can be underpinned by a combination of these factors. Symptoms are like the tip of an iceberg that constitutes only 10% of the whole iceberg. All the real causative factors of a symptom are analogous to the 90% hidden under the water.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

Theoretically, the concept of diagnosis is a good one. It involves gathering a patient's case history, their symptoms, lab results, and other diagnostic tests. In this way the patient's illness is corroborated and named. The practitioner will then use this label to determine the treatment approach. The treatment could involve drugs, surgery, therapy, diet, or, in the alternates therapies, acupuncture needles, herbs, homeopathic remedies, etc. The flaw in this system is the limitations of the database you are drawing upon. In the case of traditional medicine, the database will involve physiological and structural evaluations that are very materialistically inclined. Even though reference is sometimes made to emotions and environmental stresses, these references are vague at best.

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Acupuncturists will also include the meridians in their evaluations and psychologists will include case history and environmental and emotional stress factors. The big problem lies in the fact the new physics is omitted from all of these preceding treatment models. Diagnostic approaches preclude what the new physics has clearly demonstrated; that the bodymind is far more complex than the Cartesian model asserts. For a start, the energy dynamics of the bodymind are entangled with patterns of energy associated with the environment.

People who are close to the patient, or anyone who has an influence on the patient's life, will bring about quantum entanglements. These entanglements will definitely influence the health of the person. A celebrity's fan base, for example, constitutes a huge entanglement. Family, friends and even strangers who have powerful impact via the media can also present a quantum entanglement for the patient.

Animals, plants, and electronic devices can also fall into the category of quantum entanglement. On top of this, the patient will also have stored emotional memories that are still affecting brain function, however well the patient thinks they have dealt with them. Similarly, factored into the concept of entanglements, are attitudes and belief systems from learned experiences.

In short, when a patient's health problems are narrowed down to a simplistic label, such as a stomach ulcer or breast cancer, a great injustice is being done to the patient. The limitations of your diagnostic database have omitted key elements that are crucial in addressing their ailment in a truly holistic way. Instead, a host of unique factors, contributing to and underpinning their symptom, are being ignored.

When a patient's health problems are diluted down and given a generic label, the subsequent treatment model will be equally generic. This does not mean that the diagnostic model for arriving at a treatment protocol is always deficient. In many cases the treatment prescribed can actually be one that is in excess of what the bodymind complex actually requires.

While healthcare modalities persist in using diagnosis as their medium, generic symptoms will remain the benchmark for treatment protocols. What this means is that patients will continue to be treated

as if they are generic human beings. In essence, the diagnostic model ignores the uniqueness of each individual and the uniqueness and complexity of their individual health issues.

When diagnosis is the benchmark, treatments can be given and symptoms relieved but often not for long. Subsequent to treatment with generic healthcare models, the number of people who spend the rest of their lives reliant on medication and therapy is staggering. Generic healthcare tends towards treatment models that are tailor-made for each specific health problem. Sometimes these models result in improved health, but the total wellbeing of the patient will not have been effectively addressed.

Healthcare modalities that fail to factor the new physics into their treatment models, continue to pigeon-hole their patients into categories of disease. This is why so many people label themselves "a cancer patient", "a diabetic" etc. Patients are, essentially, being taught to identify as their symptoms. These labels describe only one element of a complex energy dynamic and entanglement happening within their bodymind.

As was mentioned before, rigid attitudes and belief systems are quantum entanglements. When a patient adopts the identity of a symptom, they identify with a superficial aspect of their bodymind's overall health.

This new identity, "I am a cancer patient" or even, "I am a cancer survivor", is highly detrimental. When a patient identifies with a symptom, this attitude can constitute, in and of itself, a health problem.

This is a very sad state of affairs, obviously. The pigeon holing of patients and their diseases inhibits patients from even coming close to lasting resolution of their health problems. While the bodymind's own innate wisdom is left out of the treatment equation, more often than not, symptoms recur or transmute.

To successfully address the total range of influences complicit in any disease, an understanding of the laws of quantum physics is essential. Healthcare modalities that do not use this database of information and laws are not practicing holistic medicine.

They are performing first aid. To give you a strong visual of what is being talked about in this

paper, here is a list of the possible influences complicit in a stomach ulcer:

- Harmful bacteria
- Faulty sympathetic nerve supply
- Poor diet
- Overstimulation of the vagus nerve,
- Cancer
- Slow poisoning
- Self-induced stresses from rigid belief systems and addictions
- Emotional trauma
- Past emotional traumas still affecting the brain
- Genetic factors
- Environmental factors such as family members, neighbors, community, etc.
- Work stresses
- Financial stresses
- And the list could go on forever.

In reality the symptoms of a stomach ulcer can be underpinned by a combination of these factors. Symptoms are like the tip of an iceberg that constitutes only 10% of the whole iceberg. All the real causative factors of a symptom are analogous to the 90% hidden under the water.

The key to lasting results in remedying health problems is to address all the complicit, underlying factors. This means that, when a medication or treatment is designed merely to alleviate symptoms, it is rather like using a bandage to hide a festering wound.

The problem for the traditional practitioner is that it is virtually impossible to establish all the factors influencing a disease. The body, and its relationships to the world, are far too complex for any doctor to fully comprehend. It is still very evident that we don't even fully understand the physiology of the body. We have an even poorer understanding of all the environmental elements, entanglements and personal history involved in the disease process.

Consciousness

In BodyTalk, we acknowledge that the only one who truly understands what is going on is consciousness.

What we are referring here as consciousness, is the intelligence behind all things and the ground substance of all being.

The personalized aspect of consciousness is what we, in BodyTalk, refer to as the innate wisdom of the body. Another way of explaining innate wisdom is that it is the bodymind's deep "knowing" of what it needs for optimum health. Clinical experience in BodyTalk has shown that when this knowledge is accessed it provides us with the keys to seeing the bigger picture of a health problem and all its causative factors. In this way we can facilitate the appropriate treatment for the client.

The beauty of having inside information about the client's health problem is that the practitioner's agendas do not come into play. Instead, this inside information allows the BodyTalker to address the health problem in a way that is tailor made, not just for the specific ailment, but also in accordance with the patient's unique circumstances. This is why there are no set formulas or treatment for individual diseases in the BodyTalk system. Every session is specific for that particular patient at that particular time. This is healing the body in the true sense of holistic medicine.

Many alternative practitioners like to say they practice holistic medicine when, in fact, they are still making a diagnosis and giving generic treatments that are, by definition, Cartesian.

As you will see in the following papers, BodyTalk is probably the only current system that can truly claim to be holistic. That BodyTalk is truly holistic is because it is based on the pure science of quantum theory.

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Innate wisdom in BodyTalk

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Abstract

In the BodyTalk model we accept that consciousness can be conceived of as all encompassing. Within the BodyTalk model, consciousness is defined as the evolving intelligence of the universe. The fact that this intelligence is evolving is evident in archeological studies and Darwinism. There is also evidence of the accumulation of information in what we call universal consciousness. Science has clearly demonstrated that this information cannot be lost. As it is being understood here, this universal consciousness is capable of holding the knowledge of the history of the world. In this context, universal consciousness is a common denominator for communication between all sentient creatures. This postulation would also explain the influence of archetypal matrixes and cultural patterns of behavior, as well as memories of lives previously experienced. Many of these concepts have been well defined and explained in Dr Goswami's writings as well as by brilliant scientists such as Rupert Sheldrake in his work on morphogenic and morphogenetic fields.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

During my years of studying anatomy and physiology, I vividly remember attending a class in embryology. The lecturer described the union of the sperm and the ova and how they then subdivided into a blastosphere of 64 cells. He then explained that each of those cells would become the starting point for the formation of all the body parts. He then gave a description of cells forming the brain, the kidneys, the skeleton and so on. We were receiving an accurate description of what was occurring in embryological development. Somewhat puzzled, I asked what I thought to be a reasonable question:

“How do the cells know what to do, where to go, and why would they do it in the first place?”

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My question was not well received. Somewhat agitated, the lecturer replied, “You do not ask how or why in a scientific subject like this! All you need to know are the scientific facts of what occurs? Leave the rest to the philosophers!” I was concerned that this objective methodology persisted throughout all of my subjects. Retrospectively, I can now see how this narrow approach served to inspire me to continue inquiring more deeply.

As I sat through each class it became increasingly clear to me that there had to be more in depth explanations of the functioning of the bodymind. I was certain that there had to be a way of knowing exactly what happens in physiology, neurophysiology, endocrinology, and all the functional relationships of the bodymind.

Back in the early 1970s my neurology teacher even assured me that there was no relationship between emotions and disease! Sadly, things haven’t changed much over the years because most teachers continue to adhere to the Cartesian model. This model asserts that all manifestation starts with particles of matter and somehow, miraculously, evolve into sentient beings capable of assigning meaning to life.

The concept of trillions of “things” suddenly, or progressively organizing even the most primitive of cells is a major stretch of the biologist’s imagination. Any mathematician would be amused by this logic. Eminent mathematician and astrophysicist Fred Hoyle summed this misconception up beautifully:

To believe natural processes assembled living cells is like believing a tornado could pass through a junkyard containing the bits and pieces of an airplane, and leave a Boeing 747 in its wake, fully assembled and ready to fly!

Biophysicists such as James Oschman (1) and quantum physicists such as Amit Goswami (2) have clearly demonstrated the existence of many levels of function in the bodymind complex. Their model includes a vital body or energy blueprint that provides the intelligent energetic substructure of all the functions of every living organism. Goswami described five main levels of life function (2):

- The bliss body
- The supramental intellect
- The mental body

- The vital body
- The physical body

These levels will be discussed at length in a later paper. The key understanding underpinning this model is that the creative flow of manifestation is from the top down. The evolving intelligence of the universe expresses itself through stages, which result in the physical form.

The concept of the physical form evolving upwards to create the higher levels defies both logic and physics. We do not have to talk about belief systems here or even contemplate whether or not to call the higher levels God or Allah. All we have to do is to follow simple laws of science without the bias of materialistic scientists who insist on illogical reasoning, spurred by the fear that something may be more intelligent than them. The general tendency in biophysics is to use the generic term consciousness to describe the fundamental force of manifestation. In the words of the eminent Sage Ramesh Balkesar:

“Consciousness is all there is”

Similarly, the brilliant theoretical quantum physicist, Amit Goswami said:

“Consciousness is the ground substance of all manifestation”

Goswami’s statement also takes into account that the materialistic scientific view of the world is that it is formed by fundamental particles of matter. The reality is that scientists have never found that particle of matter and mathematics says that the particle would have to be infinitely small – and therefore non-existent!

Another popular scientific explanation of manifestation is String Theory, made popular by the Nobel Prize winning physicist and writer, Michio Kaku. In the string theory the smallest “particles” are strings of sound, not matter. Kaku’s theory has an interesting correlation to religion and the ancient texts that say: “In the beginning was the word; and the word was God.” The other translation for word, in this context, is sound.

In the BodyTalk model we accept that consciousness can be conceived of as all encompassing. Within the BodyTalk model,

Consciousness is defined as the evolving intelligence of the universe. The fact that this intelligence is evolving is evident in archeological studies and Darwinism. There is also evidence of the accumulation of information in what we call universal consciousness. Science has clearly demonstrated that this information cannot be lost.

As it is being understood here, this universal consciousness is capable of holding the knowledge of the history of the world. In this context, universal consciousness is a common denominator for communication between all sentient creatures. This postulation would also explain the influence of archetypal matrixes and cultural patterns of behavior, as well as memories of lives previously experienced.

Many of these concepts have been well defined and explained in Goswami's writings as well as by brilliant scientists such as Rupert Sheldrake in his work on morphogenic and morphogenetic fields.

Innate wisdom

Universal Consciousness is by definition the sum and total of all knowledge and accumulated intelligence. Universal Consciousness is constantly evolving, and all sentient beings are playing a part in this evolution. For the purpose of working with individual people we use the innate wisdom to describe the local morphogenic field of the bodymind complex of each living being. This innate wisdom contains the information and intelligence necessary for the functioning of our bodies. As such, the innate wisdom influences the exploration and growth of our lives.

The innate wisdom resides at the mental and supramental levels. At the mental level we would find the innate wisdom in the subconscious mind. The supramental level describes what we term the Higher Self or Higher Consciousness. The bliss level is the portal between the individual consciousness and the Universal Consciousness.

It is the innate wisdom that holds together and designs the vital body and determines the way it functions. In other words the innate wisdom accounts for the "how and why" of our individual lives.

In the next paper we will learn how powerfully we can utilize the innate wisdom to direct our lives, improve our health, and maintain a constant evolution

of growth and accumulation of wisdom. Acknowledgment and alignment with this knowledge is what places the BodyTalk system on the cutting edge of healthcare and spiritual evolution.

One might say that the innate wisdom is the permeating awareness of the bodymind complex. Becoming more aware is a critical function of human evolution. These two statements together seem to contradict one another. After all if innate wisdom is the permeating awareness of the bodymind then, surely, it is impossible and unnecessary to increase awareness.

In talking of the importance of becoming more aware, what is being called for is a paradigm shift in our relationship with our bodymind complex. While we persist in viewing the bodymind as a collection of unrelated elements, this attitude is reflected in our disjointed world paradigm.

As you are about to discover, becoming more aware constitutes a great deal more than simply improving health. As you will see, the BodyTalk system is much more than another health care system. BodyTalk is not even another form of energy medicine. You will soon understand why many are now calling the BodyTalk paradigm Consciousness-based living.

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The practical application of innate wisdom in BodyTalk

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Abstract

As described earlier, the basic BodyTalk formulas are series of links designed to reestablish communication between all the parts and functions of the bodymind. The links were compromised in the first place by many factors: Retraining of the mind in Cartesian principles rather than quantum holistic principles, stress factors ranging from mental/emotional to physical, chemical, environmental or past history damage and spiritual/consciousness lack of awareness. Clinic evidence over thousands of cases have shown that once you have established better communication between all the factors of the bodymind morphogenic field, you will then observe and experience a great deal of healing taking place. It is essential to realize that, if given the right opportunities the bodymind has its own powerful healing processes that are superior to any other health care system we impose upon it. The exceptions being in emergency first aid or where the breakdown of the bodymind is too extreme. Then conventional medical practice begins to shine in effectiveness to help the body over the crisis.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

One important concept that has been seen in clinical results in BodyTalk is that the use of innate wisdom has limitations. The key to this is that innate, as the localized matrix of consciousness, will only work reliably when the practitioner follows the laws of manifestation. This means that the Cartesian model does not work well under the guidance of Innate. Quantum Theory, and advanced philosophies such as Advaita-Vedanta, shows us that manifestation follows the rules of Quantum mechanics and dynamic systems theory (these will be discussed in detail in the later papers).

In the basic modules of BodyTalk there is a focus on repairing the damage done by the Cartesian approach in health care. For centuries, medical

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practice has treated the body like a clock with independent functional units as discussed earlier.

The problem is that the brain learns from this conditioned approach and wires itself to try to behave as a Cartesian machine. The bodymind itself is now perpetuating the folly of not understanding the concept that everything in nature (including us) is governed by universal law and we are not above, or apart from, that law.

Because of this we are seeing the disconnection and malfunction that arises from ignoring universal law. We see it in the physical level when we witness organs and body parts not synchronizing well and the coordination patterns breaking down that are so obviously required for complex systems like digestion, endocrinological balance, metabolism, etc.

Further to this is the elevation of the ego mind (false ego) to that of believing it is located in the brain as a result of brain activity. Mind and brain are considered as one. Mind, in fact, represents Consciousness and encompasses the whole body complex and the brain is the tool of consciousness that acts according to instructions from mind and keeps the false ego informed of key events in the form of thoughts.

Centuries of learned arrogant training in the perceived idea that the human is superior and “above” the laws of nature and, indeed, can control them, has led us down a perilous pathway affecting our own health and the health of planet earth herself.

BodyTalk solutions

The first objective of BodyTalk is to utilize the rules of nature to reconnect and retrain the bodymind complex to the essential laws of dynamic health. These laws include the concepts of synchronization, communication, balance, and awareness beyond the limitations of the false ego so that the intuitive function of the mind can be empowered.

The protocol chart

The main problem faced is how to proceed. We cannot simply ask Innate what to do. Although she could probably reply though our subtle senses we call

intuition, we usually would not understand the answer.

Therefore, in BodyTalk, we use a dynamic system theory approach to start things off. This means we establish a left brained protocol setting out all the key knowledge we have of the bodymind function as a blueprint to consult. (See chart). This blueprint acknowledges the accumulated information of all levels of the bodymind from the physical anatomy, the energy bodies, and localized consciousness. This protocol chart also takes into account environmental influences such as people, work, houses, chemicals, and stressors of any nature. Also the past history of conflicts that are still creating detrimental influences on the health complex are accounted for. A common factor would be past emotional or physical trauma that has left energetic scarring that is still creating stress and influencing our lives.

The procedure chart

Now we have somewhere to start. The next key lies in the procedures we can use to investigate the health conflicts in a systematic way. This has to first be in a form that can be utilized by a simple yes/no response from Innate as this is easy and reliable to establish.

The procedures combine dynamic system theory in so much as they recognize that anything in the bodymind can be functionally related to anything else. Therefore it allows us to re-establish connections (links) between any parts of the chart as seen in the “bubbles” that group the sections. Many times these links will appear strange from a Cartesian aspect. However, as we better understand the dynamic interactions of the body, we are now able to understand many former mysteries of the body’s operations.

The procedures also utilize basic computer programming principles such as recursive events which ensure that we investigate each “bubble” of the chart fully to ensure that nothing is missed.

Treatment

By creating the links, we have now established a new focus for the mind to work with. Our world manifests

according to how we observe it. This is a basic principal of Quantum physics. While we see it as Cartesian it will try to defy nature and manifest as Cartesian. Once we focus or intent on the holistic model of dynamic system theory, then the linking that takes place in the BodyTalk formula building will establish a temporary morphogenic field (energy matrix) that represents a new probability for the better function of the bigger morphogenic field we call the bodymind.

By having intent, focus, and consciousness awareness of what we are trying to achieve in a BodyTalk session, we are now able to collapse that morphogenic formula of probability into the energy body of the patient. To help this along we use a focusing tool of nature we call the standing wave or soliton. This acts as a catalyst to initiate and focus the collapse. We create the wave by simply tapping the head and sternum of the patient. Such a simple concept for such incredible results. Experience shows us time and again that, in nature, the simple routes are usually the strongest.

Further tapping provides the energy for the reorganization of the molecules to the changed energy body. In Physics, the law is that energy comes first, then matter follows.

The basic BodyTalk formulas

As described above, the basic BodyTalk formulas are series of links designed to reestablish communication between all the parts and functions of the bodymind. The links were compromised in the first place by many factors:

- Retraining of the mind in Cartesian principles rather than quantum holistic principles.
- Stress factors ranging from mental/emotional to physical, chemical, environmental, etc.
- Past history damage
- Spiritual/Consciousness lack of awareness.

Clinic evidence over thousands of cases have shown that once you have established better communication between all the factors of the bodymind morphogenic field, you will then observe and experience a great deal of healing taking place.

It is essential to realize that, if given the right opportunities the bodymind has its own powerful healing processes that are superior to any other health care system we impose upon it.

The exceptions being in emergency first aid or where the breakdown of the bodymind is too extreme. Then conventional medical practice begins to shine in effectiveness to help the body over the crisis.

Principle and practice

The essential principle of BodyTalk is that the practitioner does not know how to use the protocol and procedures outlined above based on limited knowledge of how the bodymind really works. We are in kindergarten with our knowledge of the intricacies of this complex.

Therefore BodyTalk practice demands the use of the innate wisdom of the body to guide us in developing the formulas specifically for each patient.

There are no set formulas for any patient or any disease. Each BodyTalk session is a unique combination specifically tailored for that patient by their own Innate Wisdom and facilitated by the BodyTalk practitioner through use of the protocol and procedure charts.

Beyond the basic protocol and procedures

Once the basic links are completed to a level where the Innate wisdom of the bodymind finally has the mind directing the brain function in a balanced and synchronized way, then the BodyTalk system can help further with specific approaches and techniques.

These techniques are still tailor made for the patient in sequence and frequency as well as in timing of application. However, when they are used in BodyTalk sessions their effects can be seen and measured clinically and subjectively by the patient and their symptom profile.

In the next papers we will look at a few of the specific BodyTalk techniques so that we can better understand how and why such a simple system as BodyTalk can have such a huge impact on the total wellbeing of all living things by simply following the

laws of nature as defined by the pure sciences of quantum theory and the wisdom of advanced philosophy.

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Techniques of BodyTalk 1: Tapping the cortices

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Abstract

In BodyTalk, we have seen that the cortices technique often precipitates a major repairing of the body, as the body starts spontaneously looking for microbes and killing them off. We also see injuries repair faster as the brain starts to function more clearly. The cortices technique is extremely important in children who have poor attention spans. One of the problems is that they are living in a state of shock because of the stress they are under. This stress can come from their environment, their school facilities, and family situations or even from the additives and toxins in the food they are eating or the medications they are taking. This is why cortices is such an important ingredient in the body's ability to start healing itself. By tapping out the cortices on a daily or weekly, it gradually improves the body's resilience to handle stress and reducing its tendency to go into shock. The body can eventually be taught not to go into shock, except in cases in which it needs to due to extreme stress or threat of danger. This concept is preventative medicine. By utilizing BodyTalk on a regular basis, you will be improving the functioning of the brain and eventually the functioning of the body's built-in health maintenance systems.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

This is by far the most commonly used technique in BodyTalk. It is the first technique a practitioner will use in almost every treatment, because it is so important in establishing the general healthy functioning of the brain. A main goal of BodyTalk is to have the brain functioning extremely well. When the brain is functioning well, it can control the health of the body by ensuring the right communications are happening and the right instructions are going out.

One of the problems in society is that most people's brains are not working nearly as well as they could be. Essentially they have been hijacked by the amygdala system, which is the fight or flight system designed to keep us alive. These days, the stresses of

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living often cause the amygdala to malfunction. The brain was originally set up to be very good at handling sudden extreme situations, such as being approached by a wild animal, in which the body had to consider scenarios of either confronting the danger or running from it – hence the fight or flight concept. In those cases, you either fought and won or lost, or you ran and escaped up a tree, into the water or back to home or campfire, away from danger where you could relax again.

In the high-stress world people live in today, even though not generally confronted by tigers, they are often faced with a constant barrage of threats that the body interprets as life threatening in many ways. These threats are the ordinary stresses of life, such as dealing with financial situations, personal relationships and work pressures; deadline pressures, the stress of just driving to and from work and trying to stay alive on the roads, and pollutants and toxins in the food people eat. These are all major stress factors that the average person struggles with daily. We have the significant added stress of soldiers and their families suffering from the effects of war.

It should be noted that the amygdala are also responsible for the primary survival drives for food, water and sex. When the amygdala complex is disturbed, unhealthy changes will occur with these basic instincts. Hence, the high correlation between stress and eating disorders and sexual dysfunction.

Even worse, these stresses affect a person even before they are born. During a pregnancy, the average mother and father can find themselves under a great deal of stress. This profoundly affects the development of the brain in the fetus. Recently, more babies are being born with malfunctioning and over-stressed immune and amygdala systems. This leads to a general weakness of the immune system, increasing its susceptibility to bacterial infections, viruses and parasites that are difficult to overcome and often remain in a chronic form.

This weakness in the immune system is manifesting in the development of allergies to just about everything, from food to environmental factors, in all different levels and in all different stages. In fact, many people have allergies, yet are not aware of them because they have no classic allergy symptoms, such as a runny nose or sore eyes. They do not realize that they may have a food allergy that is causing their

headaches, pain, irritable bowel syndrome, backache or emotional stress.

Either way, the brain in the average person is far too stressed and has such poor communication it cannot do its job properly. This is seen more and more in the youth of today with Attention Deficit Disorder, behavioral problems and major stress disorders. It is alarming how many children are put on Prozac, sedatives, Ritalin and anti-psychotics, when really they are just dealing with brains that cannot handle their environment.

Stress

Another common factor involved with a compromised amygdala complex is the way we handle stress factors that arise in our lives. In older times most sudden stress factors were handled by the “fight and flight” mechanism. We either fought it or ran away. In more modern times the problems have tended to be more chronic and seemingly unsolvable. Confronting appears hopeless, and you can’t run away. Examples could be an unhappy marriage involving poverty and children. The partner feels they cannot solve the marriage, cannot leave it financially because of the kids. This can be any life situation such as a job you cannot stand, or teenage children in a rebellious stage. Even a chronically sick child can be an enormous stress with no real solution.

In these cases, the brain often chooses the third option: - coping. When we go into coping mode we shut down and pretend the problem doesn’t exist. We internalize our emotions and thoughts and just get on with life in a robotic fashion. This is “existing” in life rather than “living” life. We usually try to experience happiness by escapism through alcohol, drugs, eating, or self-destructive behavior. Anything to ease the feeling of helplessness and numbness.

The big problem with this mode is that the internalized emotions and thoughts create internal stress. This is the worst form of stress because it will catalyze major illness over a period of time. Coping is the quickest way to a heart attack, cancer, chronic serious disease, arthritis, and a list too long to state here.

Cortices technique

The cortices technique is designed to bring about systematic corrections to the brain. The theory is that the cortices technique balances the two halves of the brain, the left and right hemispheres, the masculine and feminine brain, the mechanical side and the creative side.

For most people today, there is a strong masculine-feminine war going on that is called the “battle of the sexes” by those who misunderstand the dynamics. However, this battle actually is going on inside the brain between two value systems or the two ways of dealing with things, such as left-brain logical thinking vs. right-brain intuitive thinking. The fact is, in a healthy person, there is solid communication between these extremely important systems, so both ways of thinking can be utilized.

The cortices technique fosters better communication between the two hemispheres through the corpus callosum, thus enabling this communication to occur at all levels. It is also balancing the electrical circuits of the brain beyond the nerve pathways.

It is important to reiterate that the BodyTalk System is an energy-based technique, based on the scientific premise that energy comes first and matter follows. It also is important to understand that the latest research in neurosciences indicates that the actual neurological synaptic transmission of communication between parts of the brain accounts for only some of the communication. A great deal of communication within the brain and from the brain to the rest of the body is occurring at a much higher level through energy systems such as meridians, the flow of electrons, protons, solitons, and electromagnetic frequencies (1).

The brain and the heart are huge electromagnetic generators, and their frequencies are part of the communication system. When we balance the energetic level of the electromagnetic blueprint of a person, we profoundly affect all these electrical circuits. Further, we find that, clinically, the balance even affects the physical neurological circuits. The result of this better communication enables the brain to settle down and better coordinate its activities.

It is well documented that living things such as plants, animals and humans have energy blueprints

that are electromagnetic in nature. These blueprints act like the underlying structural and functional matrix of the body and profoundly influence its form and physiology. Science stipulates: “Energy moves first – matter follows.” Hence, system that incorporate aspects of energy medicine such as BodyTalk often focus on changing the blueprint to bring about lasting changes in structure and function.

The cortices technique also improves circulation within the brain – on many levels. Besides the obviously important blood circulation within the brain, the circulation of the cerebrospinal fluid and the lymphatic drainage of waste-product electrolytes from brain activity also are increased. In addition, the flow of meridian energy and other subtle energy systems critical for healthy brain function are improved. Each time we perform the cortices treatment, we are improving the total circulation systems. If we perform this technique regularly, we will see continued improvement in the function of the brain.

The other aspect of the cortices treatment came from clinical observations. In BodyTalk, we have found that when we use the cortices treatment for people who are in shock, it has a miraculous ability to bring them out of that state. For example, paramedics tend to car accidents and see people walking around in a daze. From a medical point of view, when the body is in a state of shock, it does not look after the internal mechanisms of the body well. Therefore, if such an accident victim is internally hemorrhaging in the lungs or in the bowel while in the state of shock, the hemorrhaging would not be controlled.

When the victim is brought out of shock with the cortices technique, the body will start to respond and shut down minor internal hemorrhages. Some people who die from accidents and traumas actually die, because their bodies were not able to come out of shock early enough for repair to occur. This is why bringing a person out of shock is very important but, from a medical point of view, this is hard to do. In clinical experience with BodyTalk, paramedics who know the cortices technique have used it to help victims almost instantly come out of shock. There have even been cases in which someone was openly bleeding through the skin or experiencing an arterial bleed, and the bleeding stopped as a result of tapping out the cortices.

Severe shock

There is another form of severe shock, and it manifests as a coma. There are comas from injury to the brain, and that is a different state of affairs in which the brain has physically been damaged. However, many forms of coma occur when the body has gone into a severe shock and has not been able to come out of it. The injuries may have repaired internally, but the person is still lying in a hospital bed in a severe state of shock, which is also called a coma. Again, BodyTalk practitioners have had many cases in which hospitalized persons in comas have had their cortices tapped out and come out of the coma – often within minutes or hours. Many have been in their coma for months or years. This is where BodyTalk can be a vital instrument in hospital settings.

The other benefit of Cortices that BodyTalk practitioners have seen over the years is for people who are in a chronic, mild state of shock. Because of the daily stresses discussed earlier, these people have blankness in the eyes, and, while the responses are present, the person is not clear or sharp. These people can function at their basic job and even drive a car, but they are in this constant state of semi-shock, which is a sort of coping mechanism the body uses in order to dull the trauma of being in a stressed state. You see a “absence” in the eyes that prompts you to want to say; “Hello, is anyone home?”

With BodyTalk, both types of shock are addressed simultaneously: While the cortices treatment helps repair the functioning of the amygdala system and its relationship to the thalamus, the hypothalamus, hippocampus, prefrontal cortex, etc. (which improves the body’s ability to deal with stress), it can also bring someone out of shock so their brain can function far better than before.

When you bring someone out of a mild state of shock, it means they are going to repair their own body better. For example, when someone is in a state of mild shock, the brain is not very observant. This is not just about being switched off to the world around you. Remember, to the brain the body is the world around it. We find that people very often will live with chronic viruses, infections, parasites or allergies because the body is in shock.

Thus their immune systems are not observant enough to pick up the existence of those microbes in

the body and therefore are not attacking them and killing them off. As a result, a person can live with fatigue, pain, headaches or what is sometimes diagnosed as chronic fatigue syndrome or fibromyalgia because their defense systems are being compromised due to mild shock.

In BodyTalk, we have seen that the cortices technique often precipitates a major repairing of the body, as the body starts spontaneously looking for microbes and killing them off. We also see injuries repair faster as the brain starts to function more clearly.

Attention span

The cortices technique is extremely important in children who have poor attention spans. One of the problems is that they are living in a state of shock because of the stress they are under. This stress can come from their environment, their school facilities, and family situations or even from the additives and toxins in the food they are eating or the medications they are taking.

This is why cortices is such an important ingredient in the body’s ability to start healing itself. By tapping out the cortices on a daily or weekly, it gradually improves the body’s resilience to handle stress and reducing its tendency to go into shock. The body can eventually be taught not to go into shock, except in cases in which it needs to due to extreme stress or threat of danger.

This concept is preventative medicine. By utilizing BodyTalk on a regular basis, you will be improving the functioning of the brain and eventually the functioning of the body’s built-in health maintenance systems.

Health care

Because the cortices technique is so important and yet very easy to do, the following section will teach you how to perform the cortices technique so that you can see the results for yourself.

If you are a healthcare practitioner and implement the cortices technique before starting an acupuncture treatment, a massage, chiropractic or even drug

therapy, you will find that, by balancing the hemispheres of the brain to work better, reducing the stress levels and bringing the person out of a mild state of shock, the patient will respond far better to the therapy and heal much quicker.

Would it not be great if one day cortices were a standard practice to start any form of therapy treatment? For example, in counseling, where the client might be in a state of shock or stress overload they won't hear or correctly interpret what the counselor says to them. If the two brain hemispheres are not talking effectively, the counselor is not going to make a profound impact due to disjointed thinking and possible misinterpretation of what is being said. As a result, it could require many more sessions to get the same results than if the cortices technique was utilized before each session.

Another use of the cortices technique is to help with sports or academic performance. If you tap out the cortices in a child who is about to take an exam or play a sport, they will perform far better because the cortices technique will have addressed the stress overload that often comes with a challenge. If children tap out their cortices, just before they start a school day, before they take a test, participate in a sport or perform in a play, it can make a huge difference. This has already been seen in trial studies that took place in various schools. In the studies, the entire class tapped out their cortices at the beginning of each day. This vastly improved the level of interaction between the students and the teacher, the behavior of the students, the children's ability to learn and subsequently the grades of the class.

Tapping

Here is the cortices technique, explained in detail. Feel free to experiment with it to see its effectiveness for yourself. First, all BodyTalk techniques – including the BodyTalk Access techniques – rely on a tapping process to bring them into effect. The light tapping over the head is used to activate communication and then the light tapping over the sternum stores the memory of the changes that are being made. The tapping process involves spreading the fingers to reach over both hemispheres of the brain and gently tapping on the head. This alternates

with the fingers lightly tapping over the center of the chest on the sternum to activate the energetic heart complex. The scientific theory behind the technique has already been covered in paper 5.

Tapping of the brain is accomplished by spreading the fingers and thumb so that both hemispheres are contacted across the midline of the skull. Tapping of the heart is done over the center of the chest on the sternum or breastbone with the focus on the heart underneath. All tapping is done lightly at a comfortable speed. Since the focus is on the movement of energy creating a standing wave, the tapping will still work even if the head or chest is not physically contacted at all. This is a consideration in areas of the world where it is culturally inappropriate to touch someone or even illegal to touch another person for therapeutic purposes.

The tapping is alternated between the brain and heart while the contact points are either indicated energetically or physically held. It is not necessary to synchronize the tapping with the breathing. Note that it is possible to access the heart energy not only by tapping on the sternum, but, if it is more convenient, by tapping on the back in between the shoulder blades. The heart's energy pattern is accessible from all sides!

The cortices technique: With a partner

Place one hand on the person's head at the base of the skull where it meets the neck. Note: It is important to keep the fingers and thumb together throughout this technique to avoid missing any areas of the brain.) While holding that position, tap the head and then the sternum (or back) lightly, alternating for two full breath cycles.

Your focus while tapping out the cortices is on connecting all points of the right hemisphere of the brain to the left hemisphere and highlighting and eliminating all the "cold spots" of diminished blood supply or cellular activity that are present.

Now move your hand up onto the head to the position next to the one you just used. You are going to systematically cover the whole head, one hand-width at a time. In the new position, tap out the head and sternum, alternating for two full breaths.

This procedure is repeated until you have covered the whole midline of the head from the base of the skull to just above the eyebrows. This could mean three hand-widths for a large hand to cover a small head or five hand-widths for a small hand to cover a larger head. The main objective is to make sure that the entire brain is covered. The hand positions may overlap to ensure that no areas are left untouched.

Now cover the sides of the head to balance the temporal lobes. Preferably, have the person cover both sides of his or her head with their own hands. Or you can cover both sides of their head with your hands for a few seconds. Now tap out while the person takes two full breaths. (If you are doing it the second way, let go with one of your hands to tap the head and sternum (or the back).

The cortices technique: Self-application

Place one hand, with fingers together, at the base of your skull, so that it straddles both sides of your head and covers the top of the neck and the bottom of the skull. While holding this position, tap the head and then the sternum with your other hand, alternating for two full breath cycles.

Your focus while tapping out the Cortices is on connecting all points of the right hemisphere of the brain to the left hemisphere and highlighting and eliminating all the “cold spots” of diminished blood supply or cellular activity that are present.

Now move your hand up onto your head just above the position you just held. You are going to systematically cover the whole head one hand-width at a time. In the new position, tap out your head and sternum, alternating for two full breaths.

Repeat this procedure until you have covered the whole midline of the head from the base of your skull to just above your eyebrows, making sure that the entire brain is covered. Your hand positions may overlap to ensure that no areas are left untouched.

Now cover the sides of your head to balance the temporal lobes of your brain. After holding both sides of your head for a few seconds, let go with one hand; and while still holding one side of your head, use your other hand to tap on your head and then on your sternum. After each head and sternum tapping, place

your tapping hand back onto the side of your head for a few seconds. Now hold the other side of your head while you tap over the head and sternum. Continue this process for at least two full breath cycles.

With regular application of this cortices technique, you will find that your head may feel less “foggy,” your mental focus may sharpen, or you may just feel more balanced and clear. Try it out. It can do no harm, and it has the potential to do so much good.

Maximum results will be experienced if you start out using the technique every day as a routine. It only takes about one minute to perform and you should get into the habits of doing it regularly, for example after you have brushed your teeth.

After a week you will start noticing improvement in many aspects of your health and wellbeing. After a few months you may find that your inner stress levels have normalized for the first time in your life.

Indonesia

In 2005 I began teaching at Sunrise School in Bali, Indonesia. This coincided with BodyTalk entering my life. A year later I became a Certified BodyTalk Practitioner. The huge potential of using BodyTalk with the children was obvious to me and I was given every support from Sunrise School’s founders as they are passionate about teaching the whole child.

BodyTalk starts every day in my class of 6-7 year olds and each teacher uses tapping cortices with their class regularly. The children who first learned how to tap their cortices are now 11 years old and some have moved away to other countries but many remember and use this technique regularly.

BodyTalk has been a priceless addition to my teaching practice. I have found it not only creates a caring bond between the students but also enhances each child’s ability to be happy and feel safe, on top of improving their ability to focus.

Sometimes they like to have fun with tapping cortices

One little girl (H), had a history of clinging to her parent at drop off time and spent much of the morning sobbing. The first time she came to my class she

began crying. I sat her down and explained tapping cortices to her then proceeded with tapping her. She stopped crying and started breathing fully and was fine the rest of the day. Her mother later asked me what the ‘magic tapping’ was, as H had said she wanted to come to school for more of it as it made her feel safe.

Another girl, (A), who was born with spina bifida has recently begun tapping her own cortices with enjoyment. This is amazing as it is extremely difficult for her to synchronise the use of both hands. Perhaps Reciprocals has a role in this too...

After crashing into a wall, a year 6 boy was prostrate and bleeding from a gash on his forehead. I was able to reassure him and tap his cortices until he recovered enough to be taken to hospital for four stitches.

What children say about BodyTalk and tapping cortices:

- The right side of my brain talks to the left side of my brain.
- It helps me write quicker.
- It stopped my knee bleeding.
- It stopped me feeling sick.
- My voice came back.
- When I tap my cortices I feel as though I have a protective shield around me that keeps all the bad stuff out.

All of the access techniques have found a place in my teaching time at Sunrise. Once you give children this tool, they use it, share it, and spread it around the world.

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Techniques of BodyTalk 2: Intervening on the patient's Spheno-basilar juncture

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Abstract

As we breathe in and out, the spheno-basilar (SB) joint moves up and down in synchronicity with the breathing. This very small movement affects the circulation in the brain, the function of the pituitary gland, the master gland of the endocrine system, and the breathing cycles. It should be noted that there are two different rhythms to which the skull moves. One is the breathing cycle and the other is the cranial pulse described in cranio-sacral therapy. The cranial pulse is different than the breathing cycle and is superimposed upon the basic breathing cycle. The brain has very complex patterns of movements that reflect the complexity of its functions. If the movement of the SB is compromised, it will affect the brain and general function of the body profoundly. There are many factors that can restrict the movement of this juncture.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

The tools for BodyTalk are based on the use of intuition, or inner wisdom. The Spheno-basilar (SB) juncture refers to a part of the skull that is often wrongly referred to as a joint. It is the cartilaginous junction of the sphenoid and basal bones of the skull and it is mobile in healthy people. We are interested in this joint because it has an important role in the breathing cycle and the function of the pituitary gland.

As we breathe in and out, the SB joint moves up and down in synchronicity with the breathing. This very small movement affects the circulation in the brain, the function of the pituitary gland, the master gland of the endocrine system, and the breathing cycles. (It should be noted that there are two different rhythms to which the skull moves. One is the breathing cycle and the other is the cranial pulse described in cranio-sacral therapy. The cranial pulse is different than the breathing cycle and is

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superimposed upon the basic breathing cycle. The brain has very complex patterns of movements that reflect the complexity of its functions.)

If the movement of the SB is compromised, it will affect the brain and general function of the body profoundly. There are many factors that can restrict the movement of this juncture.

One common factor is when blows to the head at just the wrong angle restrict it. You can hit yourself on the head many times and do no damage.

However, if you hit your head in the exact wrong position at the wrong angle, then severe problems can evolve. A typical example would be arising from a squatting position and hitting yourself on the top of the head. If the blow is exactly on the suture near the front of the head that separates the frontal bone and the two parietal bones, then this blow will profoundly damage the SB movement. A fraction of an inch either way and no harm is done!

Emotions

Another cause for SB locking is emotional. If, as a child, you spent a lot of time in a startled reflex, living in fear of punishment, then this will create long-term locking. The scenario would be four-year-old Peter raiding the cupboard for sweets. Suddenly his father's booming voice yells, "What are you doing?" Peter has a startled reflex, causing him to inhale suddenly and hold his breath. If this is done repetitively through similar situations and there is definite stored fear of the consequences, the SB will jam in a 'locked up' position in a way that Peter will always tend to breathe in but not breathe out fully. The act of breathing out is the act of fully letting go. Peter will learn not to let go in life because he believes he can get into trouble suddenly at any time. He will develop a defensive personality, be hyperactive, unable to relax, and emotionally uptight. This will continue to influence his health and every aspect of his life even in adulthood.

In the opposite scenario, a football player may be kneed in the head exactly on the suture mentioned earlier. This causes the SB to be 'locked down' and the football player never fully recovers. He cannot breathe in fully and breathes out too easily and too far. He develops a depressed attitude to life and loses

the 'spark' that made him a great athlete. His body will under function and he will feel like he has to drag himself around.

These are extreme examples. Most of us fit somewhere in between. Some are actually 'locked' both ways and share a little of both symptoms! Minor restrictions of the movement of the SB joint also occur in stress reactions to life and are covered in more detail later. The pituitary gland sits right over the SB junction and the movement of the SB is what contributes to the circulation within the pituitary. This circulation is vital for pituitary function. The pituitary is often referred to as the master gland of the endocrine system and problems with the pituitary can have ramifications throughout the body with a multitude of hormonal symptoms.

Breathing

The BodyTalk practitioner is particularly interested in establishing a free SB juncture because of its effect on breathing. You will remember that the breathing cycle is important for the brain while tapping to establish what frequencies within the body needs correcting. A healthy breathing cycle also contributes greatly to the healing of the body. Yoga says "perfect breath, perfect health."

When a person is breathing fully, the diaphragm moves up and down freely with a good range of motion. This movement of the diaphragm is vital to the functioning of the digestive system. The diaphragm 'massages' the digestive organs and helps to stimulate their functioning. In situations where breathing is restricted, the digestive process is compromised and the person will often have a history of poor digestion, energy deficiency, poor liver metabolism, poor sugar handling, and many more related disorders. Although there are many other causes of digestive disorders, this one should not be overlooked. There is also a specific BodyTalk treatment for the diaphragm.

Once the SB is corrected, the brain will have better circulation, the pituitary and endocrine system will function better, and the breathing cycle will have improved. (This can be demonstrated by using a spirometer to measure the breath volume before and after the correction)

Example

Vin was 35 years old and felt 50 years old. There was no particular symptom worrying him that he could actually complain about. He had simply felt slowed down, lethargic, and dull minded for years. He was a good social tennis player and even his game had lost its edge. It seemed like he had lost his coordination. Perhaps his greatest complaint was feeling foggy headed, and although his gardening job was not intellectually demanding, he was very aware of losing his confidence in his ability to hold his own with his children in computer games and other activities.

Immediately after tapping out the SB juncture, Vin said he felt his head clearing. This continued over the next few days. Later in the BodyTalk treatment I asked his innate wisdom when his problems had started and it quite clearly narrowed it down to an accident he had eight years earlier. A box had fallen from a high shelf onto the top of his head. He remembered it because the doctor said he had concussion and he could not go to an important baseball game he wanted to see.

Although he recovered from the concussion, it was obvious that his SB had been jammed down and all his symptoms developed progressively from that point in time. When I saw him for a follow up one month later, it was like talking to a different person. There was a glint in the eye and a sense of presence and clarity that was missing before.

No formula

In most cases it is difficult to say that one particular treatment helps any particular symptom because the BodyTalk practitioner will always be doing a collection of techniques according to the demands of the innate wisdom of the patient. Obviously, based on what has been written in the earlier papers, all the techniques are of equal importance because of the dynamic laws of synchronicity within the body. As in a hologram, each part reflects the whole.

There are no formulas in BodyTalk. At no stage do BodyTalk practitioners attempt to address specific conditions, although there are cases where agenda sessions could be given for specific injuries in a first aid situation.

When students ask our instructors, “How do I treat bronchitis, or arthritis of the knee, or a bowel infection?” The answer is always the same. Do the full treatment protocol and ask the innate wisdom of the body what to do. Every single health condition has a wide variety of possible causative factors to be address in the formula that relate specifically to each client.

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Techniques of BodyTalk 3: Switching

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Abstract

The switching and cortices techniques of BodyTalk are closely related because they can address many of the same symptoms of brain imbalance, shock and malfunction. Despite this relationship, however, switching is quite a distinct phenomenon. The primary trigger for the switching phenomenon is stress. Initially, the functioning of the cortices is compromised. Switching is a natural mechanism to stop an overloading of the brain function that, in a healthy person, engages only when necessary. As an example, if you overtax yourself by working on a computer for hours without rest, nutrition, etc., you will arrive at a point at which you suddenly will go into a switched state, signaling that the functioning of the left and right hemispheres and the way they work in harmony with one another is severely compromised. In this switched state you are in a relative state of shock that is characterized by the brain function "shutting down."

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

The switching and cortices techniques of BodyTalk are closely related because they can address many of the same symptoms of brain imbalance, shock and malfunction. Despite this relationship, however, switching is quite a distinct phenomenon. The primary trigger for the switching phenomenon is stress. Initially, the functioning of the cortices is compromised. Switching is a natural mechanism to stop an overloading of the brain function that, in a healthy person, engages only when necessary.

As an example, if you overtax yourself by working on a computer for hours without rest, nutrition, etc., you will arrive at a point at which you suddenly will go into a switched state, signaling that the functioning of the left and right hemispheres and the way they work in harmony with one another is severely compromised. In this switched state you are

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in a relative state of shock that is characterized by the brain function “shutting down.”

Clear thinking is compromised and there is a lack of clarity. You make mistakes easily and cannot think issues through. What your body is saying to you is that you have overdone it, your glucose levels are too low and you are extremely fatigued. At this stage rest is necessary along with food and fluids. What switching does is keep you from becoming extremely ill by overtaxing the body.

Marathon

We can see the same concept in long-distance runners. When marathon runners “hit the wall,” they actually are switching. The runners’ bodies are saying that they are overtaxed, the blood glucose levels are too low, and their bodies have done too much work. Therefore, they go into a dazed state in which they feel that they cannot run any further, they lose concentration, etc. What marathon runners are trained to do, however, is go through that wall and come out the other side by going onto emergency reserves in the body.

Studies on Australian marathon runners at the Australian Institute of Sport have shown that from the time they switch and go through the “wall” onward, they are actually destroying their bodies. As a result, we often see that long-distance runners who “hit the wall” are people who get old very quickly. They often have many health problems later on in life because of the damage they have done. (Interestingly, this is not true, however, for persons with certain unusual metabolisms, for example, some Kenyan and Ethiopian runners, who can run an entire marathon without “hitting the wall” and entering into a switched state.)

Competitive athletics aside, there are many aspects of life in which switching occurs, particularly under stress. A classic example of a switching situation is when someone asks you to raise your right hand and you put up your left. Or, when driving, you are directed to turn left and you turn right. Those are typical switching symptoms: getting everything back to front, doing the opposite of what you are supposed to be doing. In your mental processes, often you are saying “yes” when you mean “no.” You often are

making decisions that are the opposite of what they should be because there is confusion as to what is right and wrong.

Switching is your classic self-destruct mode

When you are in a switched state, you cannot think clearly and there is a natural tendency to do the opposite of what is good for you. Thus, for instance, a person who is on a diet can reach a certain point of stress and switch, embarking on an eating binge. Or a person who is upset can be stressed to the point of seeking relief through drugs or alcohol.

Switching can be induced by a variety of factors

Interestingly, one of the more tragic incidences we see involves strobe lighting. For example, it has been shown that when a fluorescent light in an office malfunctions and begins to flicker, it will cause anyone sitting under that light to go into a switched mode. This can cost a company a fortune, as employees in a switched mode make mistake after mistake after mistake, and their output is diminished. This situation continues until the light is repaired or replaced, as employees operating in a switched state continue to make incorrect decisions. Further, if something is not done quickly, affected employees also go into the cortices coping mode of shutting down into a state of mild shock. The same thing can happen in a classroom, profoundly affecting the children in the vicinity of the flickering lights.

Another example is found in nightclubs and dance venues with strobe lighting. In those environments, healthy, well-balanced people under a bit of stress and already in a state of shock can immediately go into switched mode. In this switched mode, they may start to do the exact opposite of what they normally would mean to do. They may, for instance, go into a self-destruct mode of overdrinking, getting involved with drugs or just doing stupid things. This is a very serious situation, in which we

clearly see this self-destructive behavioral mode occurring.

However it is induced, switching has a profound impact

Because of their stress levels, many people switch too easily, going in and out of switch mode almost every day and even several times a day and hence making mistakes and impractical decisions, not thinking clearly and malfunctioning.

For example, one symptom of switching is dyslexia. You will find that when you have dyslexic children and “unswitch” them, they may no longer be dyslexic. However, they can quickly revert to the dyslexia because they switch too easily when under stress, such as when they have to read. In such a case, a practitioner will have to do the Switching and the Cortices techniques in combination over a period of time to gradually strengthen the brain and improve its stress threshold, so the body will not switch as easily and will be far more functional on a day-to-day basis.

It is critical to note that in BodyTalk, the treatment is not designed to “unswitch” anyone permanently. It can “unswitch” someone who is in switched mode at the time of treatment, of course, and, if done over a period of time on a regular basis, it can heighten the person’s threshold for switching. That said, we do not want to eliminate the body’s ability to switch because it is a natural mechanism that can save a person’s life during periods of extreme stress.

Switching in children is very common and obvious to parents and teachers. For instance, parents have learned to cope with a child’s dyslexia by not forcing him or her to read in excess or do other things that create switching.

The average person, however, lives in this chronic state of coping by going into mild shock, coming in and out of switching almost all the time and compromising the immune system.

You can imagine the value of these two techniques – switching and cortices – and their vital importance to quality of life and just being able to exist in this world in a much more lucid way with far better cognition of what is going on and the ability to think clearly, respond effectively and work and play in a constructive way.

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Techniques of BodyTalk 4: Hydration

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Abstract

When the hydration technique is applied, people immediately start responding by showing signs of better nutrition, better functioning of the nervous system, far less stress in the system and so on. Often, the demand or need for water is diminished, and they find they do not have to drink as much and are less thirsty. The problem of poor hydration has been amplified in modern Western societies where there is a trend for children to drink less pure water. Instead, they drink caffeinated soft drinks that act as diuretics and cause even greater dehydration. Hence, they have poor absorption of foods and a tendency to have malfunctions of the nervous system due to the diminished nerve conduction. This contributes to hyperactivity, learning disorders and compromised immune systems. Hydration is a critical factor for any health situation. Your body simply cannot respond and heal properly unless the water molecules in it are being effectively utilized. This technique in BodyTalk is designed to ensure that effective utilization.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

Hydration has become quite a catchword these days, as you see people walking around with their water bottles, trying to keep their fluids up. Unfortunately, however, this is not necessarily solving any problems. One book (1) emphasize that we have to realize that our bodies are up to 80 percent water, and water is absolutely critical for the body's functioning.

Nothing occurs without water

The nervous system requires water for the transportation of electrons and proper communication and functioning. The brain is 80 percent water. Every nerve pathway has a micro-tubule of water that, if not

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there, will negatively affect the functioning of the nervous system.

Water is also the main ingredient for cells to generate energy; in fact, water is part and parcel of energy production in the body. In addition, water is the main transporter of nutrition, vitamins, etc., through cell membranes. You could have plenty of good nutrition, but, without water, your ability to take that nutrition into your cells would be compromised. This means you could eat very well, but actually be malnourished.

The presence and actions of water molecules also control the metabolism for emotions and the functioning of the muscles and the connective tissue, which is so critical in the storage of memory for movement.

In BodyTalk, we have discovered that people can drink a lot of water, but still be dehydrated. The concept is that we can detect in these people all the signs of dehydration – poor energy, poor metabolism, poor nutrition, poor functioning of the nervous system, a highly stressed and volatile nervous system, dry skin and so on – which means that, although they may be drinking plenty of water, the water is not getting to the places where it is needed. Rather, the water is staying between the cells. In fact, such persons also could have edema (swelling caused by too much water in the tissues), as a result of the water taken in, but not utilized properly by the body. In other words, the mechanism that enables the water to be utilized by the nervous system or for it to be able to transport nutrition or other elements across the cell membranes has been compromised.

The BodyTalk technique for hydration is designed to address that problem: to get the water to be utilized properly by the cells; to increase the transportation of water molecules across the cell membranes; and to be able to hold the water molecules with the correct electrical charge around all the cells, in the connective tissue and along the neurological pathways.

It is not about the quantity of water

When the hydration technique is applied, people immediately start responding by showing signs of better nutrition, better functioning of the nervous

system, far less stress in the system and so on. Often, the demand or need for water is diminished, and they find they do not have to drink as much and are less thirsty.

The problem of poor hydration has been amplified in modern Western societies where there is a trend for children to drink less pure water. Instead, they drink caffeinated soft drinks that act as diuretics and cause even greater dehydration. Hence, they have poor absorption of foods and a tendency to have malfunctions of the nervous system due to the diminished nerve conduction. This contributes to hyperactivity, learning disorders and compromised immune systems.

Hydration is a critical factor for any health situation. Your body simply cannot respond and heal properly unless the water molecules in it are being effectively utilized. This technique in BodyTalk is designed to ensure that effective utilization.

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Techniques of BodyTalk 5: Changing body chemistry

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Abstract

The body chemistry technique, when used over a period of time, is very effective in getting the body to clear itself of these toxins. We have seen numerous people with mercury or lead poisoning or suffering effects from other toxins who, after the use of BodyTalk for a short period of time, have had those detrimental toxins eliminated from their systems. The ability to address microbe infestation is an increasing crisis for current medical approaches. Body Chemistry is one of the most powerful and vitally important techniques that BodyTalk offers to the healthcare systems of the future.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

The body chemistry technique of BodyTalk is designed to activate the immune system into responding appropriately to factors that are out of balance in the biochemical makeup of the body. This includes toxicity, allergies and food intolerances, and pathological microbes.

Our bodies are full of microbes. Most of them are good bacteria doing a good job. Others, however, are harmful bacteria, viruses or parasites that sometime announce their presence in what we call an infection. In addition, the body has a tendency to hold on to harmful microbes for extended periods of time – creating a chronic situation that is irritating to the immune system and to the body and can compromise the body's healthy functioning.

Today, throughout the world, there are many people who have chronic low-grade bacterial infections, viruses and parasites present in their bodies, that are weakening their immune systems and causing a great a deal of malfunctioning and health problems.

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Body chemistry technique

The body chemistry technique is designed to systematically help the body gradually fight all these harmful microbes and eliminate them from the system. We do this by taking a sample of the patient's saliva and putting it on the navel. This allows the immune system, at an energetic level, to pick up many problems that it would not see at the straight physiological level, because they are so well hidden.

Modern science has shown that the saliva contains the energetic blueprint of virtually everything that is happening in the body and particularly the blueprints of all the disease processes that are going on. At this energetic level, the body actually can measure these detrimental changes and then bring about the appropriate physiological generation of antibodies, antigens, and increase specialized white cells that will then eliminate the particular problems.

The wonderful thing about this technique is that, in any community or family, when anyone becomes sick through some form of invasive process of microbes, we can get the immune system to effectively fight it off very quickly – much quicker than it normally would. For instance, if a young child with a virus such as the flu is treated using BodyTalk, the illness often will be gone within a day or so versus the normal week or two.

Another major benefit of the body chemistry technique is that it works on food intolerances or food allergies, where a person is reacting to a type or class of food. By using the body chemistry technique as part of a BodyTalk formula, the body's immune system is activated to overcome this reaction and correct the intolerance.

This also goes for environmental allergies, such as when people overreact to substances such as pollen, with symptoms that are more pronounced in degree and duration. In such cases, we have found that the body chemistry technique will help the immune system to stabilize the reaction process and dramatically reduce or even eradicate the allergy.

By creating a system to treat allergies, food intolerances and parasites, harmful viruses and bacteria in a very simple and safe way, without the use of antibiotics and other drugs, BodyTalk represents a very efficient form of healthcare that will

address most cases without the need of drugs and the side effects that accompany them.

It should be stressed that in cases of severe infection – whether it be bacterial infection or very severe parasitical infection, drugs sometimes are also necessary. The beauty of BodyTalk is that we will know very quickly if additional healthcare treatment is needed because, if BodyTalk is enough, we will see definite improvement within 24 hours. Thus, if the person is actually worse in 24 hours, then we know the immune system is not strong enough to tackle the infection on its own, and it would be best to use the appropriate drug or other healthcare therapy.

Another very important aspect of body chemistry is to deal with the buildup of toxins in the system. In this day and age, we have become very aware that a great many chemicals are adversely affecting our lives: exhaust fumes, chemical sprays, dander, mold, mercury from dental fillings; cigarette smoke; lead from paint, etc.

The body chemistry technique, when used over a period of time, is very effective in getting the body to clear itself of these toxins. We have seen numerous people with mercury or lead poisoning or suffering effects from other toxins who, after the use of BodyTalk for a short period of time, have had those detrimental toxins eliminated from their systems.

The ability to address microbe infestation is an increasing crisis for current medical approaches. Body chemistry is one of the most powerful and vitally important techniques that BodyTalk offers to the healthcare systems of the future.

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Techniques of BodyTalk 6: Healing scars

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Abstract

Scars, when not healed correctly, can cause many blockages in energy flow, circulation, and nerve flow that can affect the body locally or have serious ramifications throughout the body. A healthy scar is one that is fine, soft, not tender and not raised. Unhealthy scars are usually thicker, often tender, often have redness around them and temperature differences from one side to the other. Unhealthy scars block the flow of energy along the meridian energy pathways and inhibit the function of all the areas supplied by that meridian. Unhealthy scars will also upset the energetic hologram of the body by interfering with the general balance of energy throughout the body.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

This paper we are going to look at an extremely important factor in many health challenges. It is also one that is rarely taken into account in health care practices. Scars, when not healed correctly, can cause many blockages in energy flow, circulation, and nerve flow that can affect the body locally or have serious ramifications throughout the body.

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Acupuncture

Acupuncture has a treatment method for scars that can work very well. Needles are inserted into the scar and in acupuncture points above and below the scar in order to allow the energy to flow through the scar better. This had immediate results and eventually leads to the scar partially dissolving and losing its redness and tenderness. Another good scar technique is found in second degree Reiki that has similar results.

BodyTalk has provided the best technique in our opinion, because it is so simple and works quickly. Once the scar has been addressed, the release of energy, nerve, and blood flow happens quickly. This gives short-term relief of the symptoms while the scar is healing completely. Eventually, the scar will fade or dissolve into softer tissue and any local coloration or tenderness will go. Not all scars that are creating problems are tender or red. That phenomenon is just common in bad cases.

Why do scars not heal well?

How well a scar heals usually depends upon a few different factors:

- The general health and vitality of the patient at the time. If, at the time of the accident or operation that caused the scar, the person is run down, sick, or has poor vitality, then the scar will often heal poorly.
- The most common cause is emotional stress at the time of the accident or operation. If the accident caused a lot of emotional stress that was not handled well because of circumstances, then the scar will heal badly. Typically, there may have been an injury in a car accident that others were hurt in and this led to a lot of emotional stress at the time. The person may have been worried about disfigurement or experienced significant pain that stressed them. In other scenarios, the person may be having an operation that is very emotional for her. For example, having a hysterectomy or body part removed that meant a change in lifestyle or attitudes. This

resultant emotional stress will cause poor repair to the scarred area.

Another interesting concept here is that very often BodyTalk practitioners find that the connective tissue associated with the scar will tend to hold the repressed emotions locally around the scar. Often, when treating scars, there will be emotional releases and memories related to the time when the scar occurred.

A common scenario involves the woman who has a successful hysterectomy but then experiences other changes in her body during the months and years after the operation. Typically, she would suffer from depletion in the flow of the yin meridians that flow up the inside the leg, along the front of the trunk, to the head. If the hysterectomy scar blocks the energy flow, the woman will experience deficiency symptoms in the abdomen, chest, and head. There will typically be poor digestion, poor sugar metabolism, tiredness and weakness, shortness of breath, circulatory insufficiency, and poor energy flow to the head causing the facial muscles to start sagging. The list can be endless—all because of that scar.

When the woman complains to the doctor that the problems started after the hysterectomy, she will often be told that it is coincidence because removing the uterus will not give those symptoms. Hundreds of women have experienced transformations in their health after BodyTalk has addressed their hysterectomy scars.

Example

Kay had a face-lift and breast implants in a final bid to regain lost youth. The decision to have the operation was very emotional and on reflection she realized that it was also an attempt to save a failing marriage. The whole procedure became a nightmare. The breast implants gave her constant pain and the scars on her breasts and face were clearly visible months later.

In the meantime, internal scars had developed in the breasts causing pain and discomfort. She could not bear to be touched on the breasts and they felt hard, abnormal, and were sources of misery contributing further problems to the failing marriage. The face eventually healed and looked satisfactory, but she felt

constant tension in the facial muscles and she was chronically tired. The BodyTalk scar treatment was performed on the breast scars and the small scars on the scalp caused by the face-lift.

Within a week the breasts were softer and less painful. The facial tension totally relaxed and the complexion improved. After five more treatments the breasts were pain free, soft, and the scarring had faded dramatically. Eventually, the internal adhesions in the breasts also dissolved.

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Techniques of BodyTalk 7: Using active memory

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Abstract

Memory can be stored actively or passively in the bodymind. When the memory is passive, we remember and store experiences as simple memory traces. The stronger or more interesting the memories, the easier it is to recall them. Passive memory is a healthy normal function of the body and the desirable situation. Active memory is a state where we store the memory with an emotional charge. This occurs when we have not fully synthesized the emotional content of the experience. Our body then stores the emotion in the fascia of the muscles or connective tissue at a location in concordance with the bioenergetic nature of the body. For example, fear relates to the kidney meridian which, in turn, relates to several muscles and areas of the body. An unsynthesized fearful experience, therefore, will be stored in one of those related areas. In the case of fear (kidneys) it could be the psoas muscle or the ligaments around the knee.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

Active memory essentially relates to the concept that past experiences that were emotionally traumatic may not have been fully resolved. Hence, there is an active memory held in the connective tissue that can continue to influence the functioning of the bodymind complex at a local level (such as in a scar) of dynamically affect the functioning of any other system in the body or mind.

When a BodyTalk practitioner is putting together a formula for a client, the associated emotional history must be taken into account. Most diseases have emotional components – either ongoing or past - that are helping to fuel the disruption of the disease. This is why so many health care systems do not obtain the desired results. They are not taking into account the “story behind the disease.” For example, many food intolerances will not clear until the emotional relationship history with the intolerance is corrected.

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Memory can be stored actively or passively in the bodymind. When the memory is passive, we remember and store experiences as simple memory traces. The stronger or more interesting the memories, the easier it is to recall them. Passive memory is a healthy normal function of the body and the desirable situation.

Active memory is a state where we store the memory with an emotional charge. This occurs when we have not fully synthesized the emotional content of the experience. Our body then stores the emotion in the fascia of the muscles or connective tissue at a location in concordance with the bioenergetic nature of the body. For example, fear relates to the kidney meridian which, in turn, relates to several muscles and areas of the body. An unsynthesized fearful experience, therefore, will be stored in one of those related areas. In the case of fear (kidneys) it could be the psoas muscle or the ligaments around the knee.

Candice Pert (1) has shown that pathological emotions cause the hypothalamus to produce specific neuropeptides for each emotion that will circulate in the body and attach to cell walls causing disruption. This gives a solid physiological explanation for the disruption that long term active emotions can cause. An example of this would be a car accident. Two scenarios can occur:

- The person may synthesize their emotions and fully recover;
- A person may have a car accident that was very traumatic and, because of various factors going on at the time, never had a chance to fully synthesize the emotional associations

Ten years later the person in case one can recall or talk about their accident as a simple description of an event that was traumatic in their life, but is now only a memory.

The second scenario is very different. In this case, the person will be emotionally traumatized by the recall of the accident. When talking about it, they may still experience fear, anxiety, grief, anger, or whatever emotions were involved at the time. In other words, their memory is active and associated with stored emotional trauma. When the thought process of the accident is initiated, the brain links the thought to the

stored emotion. Whenever this happens the body is stressed, especially in any areas associated with the accident. For example, they may have injured their knee in the accident. Whenever the trauma is reactivated, the knee may undergo pathological change inducing pain and discomfort in the weeks thereafter.

In more serious scenarios, the active memory is unconscious. In these cases, the patient's bodymind is not consciously aware of the memory associations. Whenever they see and/or hear about an accident, or even watch one in a movie, their subconscious mind triggers the emotional association, and the person feels anxiety, fear, etc. that they cannot explain in relation to their current circumstances. Furthermore, many symptoms may suddenly flare up (such as the knee mentioned earlier), and they cannot find reasons for the occurrence at that point in their life.

People collect a smorgasbord of active memories in a lifetime that collectively compound any health problem they have. These problems will eventually create health issues in a patient who seems to have no particular reason for getting sick under the circumstances they are enjoying at the time.

The sickness can be mental or physical and may be simply triggered by watching a movie that portrayed an event similar to a painful subconscious memory stored in the patient's bodymind.

An example

A typical case was Jennifer who presented with depression, general aching in the body, fatigue and a feeling of severe body weakness. By asking her innate wisdom, we established that the physical cause was depleted adrenals and a mild chronic virus. However, it was also established that these were not the primary causes of Jennifer's problems, just the 'symptoms' the body was manifesting to 'explain' the disease. The primary factor was narrowed down to her childhood abuse. Innate consciousness revealed that this illness manifested a few days after she watched a movie depicting a father beating his child! The etiology of the disease was:

- The child was abused and never fully resolved the emotional factors involved even

though her relationship with the father was currently 'normal'.

- Emotional memory was stored in the body and triggered subconsciously by the scene in the movie. Stressful emotions were released creating physiological changes (neuropeptides) in the body that weakened the immune system (virus), depressed the heart emotions (depression), and weakened the adrenals (tiredness).
- Because the emotion was trying to emerge and wasn't recognized by the mind, the body diverted it into generalized pain. (Many pains are simply the body's way of diverting focus so that we do not experience emotional trauma.)
- Physical treatment of the symptoms could have given the patient a temporary reprieve. Many times, however, the symptoms do not disappear fully and/or they return quickly, unless the original emotional trauma is resolved.
- The BodyTalk formula By using disconnected the link between the brain and the stored active emotional memory. An emotion will only be stored when it is 'fed' by underlying thought patterns. Once you cut off the supply of thought from the brain, the emotion loses its support system and dissolves.
- Once the emotional basis was cleared, the patient recovered fully in about three days.

Active memory is often simple to address. It works at the level of the subconscious mind so the patient often does not even need to remember the specific emotional traumas. Once isolated, part of the BodyTalk formula involves connecting three trigger points on the head with the fingers, doing specific eye movements, and tapping the head and sternum lightly to cause the brain to disassociate from the active memory. The process takes around two minutes and often only one treatment is required to clear an active memory and bring about lasting health changes on the physical and mental/emotional levels.

Another example

In another case, Pam suffered severe recurring headaches over a period of about four months. She would often have them three or four times a week. Chiropractic care helped significantly because they seemed to stem from tension in her neck and jaw. Innate wisdom determined that the primary problem was emotional—to do with her relationship with her daughter. It was traced back to strong guilt feelings. When she was pregnant with her daughter, she was having enormous financial burdens and a strained relationship with her husband. He was angry that she was pregnant because of the burden it would place on them. In desperation she attempted a home abortion. It was unsuccessful and she ended up having the child and derived great joy from her.

Deep down, however, the subconscious guilt she felt was enormous. I asked why she started manifesting the headaches now? The answer was simple. Her daughter was now six months pregnant and having relationship problems with her husband. The tension in the neck and jaw was triggered when the daughter announced her pregnancy five months earlier.

The triggering occurred subconsciously. Once the memory was activated and the traumatic emotional content dissolved using BodyTalk, the neck and jaw tension—and associated headaches—disappeared permanently overnight. She later recalled that every headache started after a conversation with her daughter, although she didn't make the connection at the time.

Another case

Another case involved Mark, who had a multitude of food intolerances. He had a list of foods that upset his digestive system and triggered many allergic responses in him. The problems started in his early twenties; Mark was now thirty-two. His case was emotionally-based and associated with his early childhood. With help from the BodyTalk feedback, he recalled many fights with his parents over food. Often it was because he didn't want to eat certain foods and he was reminded of the 'starving children in Africa'. Other times it was simply that most of the fights his

parent's had taken place at the dinner table while he was eating. He was a sensitive boy and the collective associations of emotional trauma and food created an active emotional memory in his system.

The food intolerances became very noticeable in his early twenties because that was when he married and started a family. He suddenly found himself in battle with his own child over food. A subconscious link to the stored active emotional memory occurred and he rapidly developed eating disorders and food intolerance. BodyTalk cleared the active emotional memory stored in his body and the food intolerance all cleared within two weeks.

The incredible thing about The BodyTalk System™ of treating active emotional storage is that it does not require psychological therapy, extensive treatment, or intense emotional discomfort. The traumatic memory can be cleared without the practitioner needing to know the details of the event.

There are times when the patient may recall an event they would really prefer not to relate. In these cases, it is sufficient for the patient to reflect on the event while being treated. Nothing has to be said or explained.

In other cases, the memory may be so traumatic that the mind refuses to recall it. Good results in these cases are still obtained by locating the time of the trauma (e.g. age sixteen), and then treating while the patient is reflecting on being sixteen. The technique seems to trigger the subconscious mind into clearing the active emotion without it having to surface as a painful memory. The limitation here is that it may take several treatments to clear, compared to the one treatment for specifically recalled events.

Not all active emotional factors are related to specific events or accumulated experiences. There are many emotional triggers that are initiated by learned attitudes and belief systems. For example, a person may have been brought up in a household where racial prejudice existed against a particular section of society. (e.g. blacks, Mexicans, Jews, whites, etc.) If this was the case, then a negative emotional association may occur. He/she may have been told ridiculous stories as a child of Mexicans being violent and treacherous. This attitude becomes a 'belief' that is associated with emotions of fear and anxiety. A belief is really an expectation, or assumption, that something will happen. If you have the belief that

Mexicans are violent, there will be an associated expectation or assumption of violence when meeting a Mexican.

As an adult, you may pride yourself on having transcended your prejudiced upbringing and now feel that you are no longer part of that ignorant past culture. However, you may find that you have recently developed numerous stress related health problems. You eat well, exercise, meditate, and have a happy life, yet here you are with all these anxiety symptoms.

Through therapies such as BodyTalk or the Breakthrough system, you may discover that your symptoms are rooted in a stored active emotion because of a belief system. Eventually, you realize that your symptoms started a week after a new Mexican employee started working with you.

Deep down the active emotional trigger still exists as a belief system embedded in your subconscious. Proximity to a Mexican triggered all those anxieties the little boy felt, even though you consciously liked the person. BodyTalk would clear that link between the negative belief system and the stored anxiety. In turn, this would not only clear the disease but, once and for all, eliminate the negative belief.

The bodymind is an incredibly complex system of mental, emotional, and physical dynamic interactions. At last, techniques such as BodyTalk provide effective ways to simplify those interactions and reduce the negative elements quickly and permanently.

We often read articles where psychologists criticize health care practitioners who treat emotional disorders when they are not trained in classical psychology. When you consider that most diseases have an emotional component and will not respond fully until this emotional component is synthesized, does this mean that no health care practitioner should treat disease—only psychologists? Surely psychologists are not suggesting that emotional health and physical disease are not intimately interwoven and must not be addressed concurrently!

BodyTalk is providing a safe approach to handling this important situation. Whenever the emotional condition is serious enough to merit the specialized help of psychologists, then the innate wisdom of the body will clearly indicate it. BodyTalk

practitioners will readily refer clients who need additional specialized care.

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Techniques of BodyTalk 8: Reciprocals

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Abstract

The reciprocals represent one of the most far-reaching techniques taught in BodyTalk. Essentially, the reciprocals involve the musculoskeletal functioning of the body. Among the fascinating work that is evolving nowadays is the discovery that the body works quite differently than physiologists originally thought. The historical tendency has been to think that the skeleton holds the body together, the muscles move the skeleton, we have discs and joints in the spine for weight bearing. Recent discoveries have shown that the body actually works in the same way as the engineering concept of tensegrity. Tensegrity (tensile-integrity) is a term employed by one of the most famous engineering architects, Buckminster Fuller, who used this principle in the development of his geodesic domes and many other structures, whereby having pulleys and wires and all the right weights, you create self-supporting systems that do not apply excessive pressure in any one particular spot. Researchers have discovered is that the human musculo-skeletal system works as a tensegrity matrix, as well. All the ligaments, muscles and fascia of the body, as well as the angles in which they are organized (i.e. in spiral forms and with various attachments), work in a way that is very different than we ever thought.

Keywords: Mind-body, alternative medicine, BodyTalk.

Introduction

The Reciprocals represent one of the most far-reaching techniques taught in BodyTalk. Essentially, the Reciprocals involve the musculoskeletal functioning of the body. Among the fascinating work that is evolving nowadays is the discovery that the body works quite differently than physiologists originally thought.

The historical tendency has been to think that the skeleton holds the body together, the muscles move the skeleton, we have discs and joints in the spine for weight bearing. Recent discoveries have shown that the body actually works in the same way as the engineering concept of tensegrity.

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Tensegrity (tensile-integrity) is a term employed by one of the most famous engineering architects, Buckminster Fuller (1895-1983), who used this principle in the development of his geodesic domes and many other structures, whereby having pulleys and wires and all the right weights, you create self-supporting systems that do not apply excessive pressure in any one particular spot.

Researchers have discovered is that the human musculo-skeletal system works as a tensegrity matrix, as well. All the ligaments, muscles and fascia of the body, as well as the angles in which they are organized (i.e. in spiral forms and with various attachments), work in a way that is very different than we ever thought.

In fact, the body stands because of this dynamic tensegrity matrix and balance of the muscular patterns of the body to the point that if the body is very healthy, there is very minimal pressure on areas such as the intervertebral discs of the spine and the menisci of the knees. Research has shown that the spine, as we walk and move, is being held together in a dynamic that does not involve heavy pressure on the discs, and therefore would not wear out a disc in a healthy system. In a healthy body, joints should be under tension rather than compression.

It is only when the tensegrity of the body is compromised – for instance, because of malfunctioning of the muscles or thickening of the fascia through scar tissue – that the tensegrity complex collapses and we start weight bearing and putting pressure on the discs and other joints as we walk. This causes the discs to wear down and wear out giving rise to a major cause of pain and degenerative problems in the back, hips, knees and ankles.

The latest discoveries purport that, in many cases, rather than performing knee reconstruction, re-establishment of the tensegrity balance of the body would automatically take the pressure off the discs involved and create a negative pressure. If you take the pressure off the disc and create a negative force or vacuum in the knee, the cartilage in the knee will grow back, eliminating the need for surgery or joint replacement.

Empirical findings are that the structure of the body, and how well this tensegrity matrix works, is very much a part of the general healthy functioning of

the whole body. That is because the movement of the muscles and fascia of the body stimulates the functions of the organs and, in fact, this tensegrity matrix goes into the very depths of the body at a cellular level. Within the cells of the body, there is a connective tissue tensegrity matrix that is quite complex and is the major factor in biochemical reactions and physiological functioning of the body.

In BodyTalk, this is considered important and, in advanced techniques, focus is placed on the tensegrity balance of connective tissue within cells, fascia and muscles.

Reciprocals

The reciprocals are the beginning of this. They are the overview, where we look at the gross structure of the body and the dynamic balance between its various parts, for example, the relationship between the opposing parts of the body in relationship to the navel, such as the left shoulder to the right hip. If people have right-hip problems, they also tend to have imbalances and problems in the left shoulder and vice versa. This is also true with the right elbow and left knee, and so on.

These combinations of points that usually are on opposite sides and opposite ends of the body are what we call reciprocal points. Balancing these points by touching the Reciprocals and activating them with tapping on the head and tapping on the chest, helps to re-establish the tensegrity balance and dynamics of the posture, which, in turn, improves the posture and functioning of the body.

As the body starts functioning with more efficiency and with improved balance, the person will be walking better and sitting better, and this means all the connective tissue of the body is going to operate better, the circulation will be better, and the flow of the electrons and protons in the connective tissue, the flow of nerve impulses, the circulation, the lymph drainage and all the different functions of the entire body are going to improve.

So while balancing of the reciprocals is very simple, its first immediate effect is a major change in the health of the body from a mechanical point of view. By first improving the posture of the spine, much of the pain that people experience from poor

body posture will be eliminated and spinal repair will follow.

More importantly, balancing the reciprocals, improves the general function of every aspect of the body right down to the chemical reactions that occur inside its cells. Therefore, this tensegrity principle is extremely important for all health challenges.

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