BICOM®
Fundamentals
CONTENTS

1. Introduction

2. First Appointment Procedures (pp5 – 14)
   2:1 Overview
   2:2 Treatment Protocol
   2:3 Practical

3. Balancing The Body’s Energetic System (Follow Ups pp15-31)
   3:1 Basic Therapy programs
   3:2 Testing for a Basic
   3:3 Treating with a Basic
      a. Conductance Method
      b. Quadrant Measurement Method

4. Supporting the Eliminating Organs
   4:1 Introduction
   4:2 Supporting Detoxification: Programs

5. Strains: Foods
   5:1 Strain Classification
      5:2 Foods: Central Allergens
      5:3 Elimination/Challenge Protocol
      5:4 Treatment Protocol

6. Strains: Infections
   6:1 Introduction
   6:2 Infection Calming Therapies

7. Strains: Environmental (Natural)
   7:1 Introduction
   7:2 Treatment Protocols

8. Strains: Synthetic
8:1  Introduction
8:2  Treatment Protocols

9. Constitutional Therapies

10. Using Channel Two
   10:1  Introduction
   10:2  Therapy
   10:3  Protocols

11. Pain Therapy
   11:1  Introduction
   11:2  Programs

12. Putting It All Together

APPENDIX 1

The Role of Central Allergies and Intolerances on Overall Health from Birth to Old Age

APPENDIX 2

Foods and their Alternatives

APPENDIX 3

‘Own Programs’ for the Optima

APPENDIX 4

Channel Two Stored Substance Complexes
1: INTRODUCTION

Experienced BICOM practitioners can expect to have complete success with 70 to 80% of the clients they treat. As someone new to BICOM it is still possible to achieve great success with at least 60% of clients. By using the simple methods outlined in this manual you will also achieve the confidence needed to move on to the more complex methods that require the expertise of an experienced therapist.

As you will read in the manuals supplied with the course, there are two ways to use the BICOM.

1. Using signals from the body (and body fluids) employing electrodes to pick up the signal.
2. Using signals from substances (using vials/ampoules).

These methods are not normally combined, which means that you either treat by modifying the body’s signals or by inverting or amplifying signals from a specific vial.

This is discussed later in the manual and in even more detail in the specific manuals linked to the course teachings. Examples of this, however, could include:

A. Signals from the body:
   A basic (energetic balance) therapy
   Support for an eliminating organ, e.g. the liver.
   Constitutional program, e.g. metabolism

B. Signals from substances:
   Strains such as food allergies, infections, heavy metals, pollens, moulds, chemicals etc.
   Beneficial substances such as propolis, bush/Bach flower remedies, nutritional support, five element vials etc.

The rest of this manual will cover simple protocols you will be able to follow as a beginner but it is important to remember these two methods as you move into the specific procedures involved in a complete treatment.
2: FIRST APPOINTMENT PROCEDURES

First appointment protocols are used to ensure that the body is as balanced as possible in order for subsequent treatments to be successful. Certain problems can cause the body to become blocked and this means that clients will either be difficult (even impossible) to test, or that treatment will not be as successful as would normally be the case. So, for example, if a person is inverted, then any treatment given may have the opposite effect. If someone has a chakra imbalance then they will be difficult to test and any tests may be incorrect. If radiation or scars are involved, then successful treatment will be slow.

In the second part of the training course you will learn the specific protocols and techniques used by more experienced practitioners. This means that you will test all the steps involved in a first appointment but will only treat those that are required for that specific client. It is not always necessary to treat all (or in some cases any) of the blocks, if the client’s toxic signature is a fairly simple one. For example, babies and children who only have one or two food allergies.

Until you reach that point, when you are treating adults (or teenagers), it is important to follow all the steps outlined here. This is because adults (teenagers) are exposed to more stressors over a longer period, so it is much more likely that at least some of the blocks will be present.

The protocol below is a ‘recipe’ for treating without testing.

2:1 OVERVIEW

1. Discussion (15 minutes)
2. Treatment (60 minutes)
3. Final instructions concerning next appointment (5-10 minutes)

It is best to allow a total of 90 minutes for the first appointment

DISCUSSION

At the start of the session you will need ten to fifteen minutes to explain what will happen during the session – that is, that this session will involve constitutional treatment to get the body prepared for follow-up treatments, where the main focus will be on removing the toxic strains (including allergies) from the body.

Then you will need to explain how the treatment works. This would include

A. A VERY simple explanation of how everything living gives off a signal (frequency pattern). The BICOM picks up signals from the body and then boosts the healthy and eliminates the unhealthy frequencies. This altered frequency pattern is then fed back into the client via the mat.

So, for example:
• If the body is in an inflammatory condition, then this ‘signal’ will be attenuated and the subsequent treatment will ‘calm’ the inflammatory condition/organs/systems etc.
• If the person was chronically fatigued, then the healthy signals from the body would be boosted to activate the systems etc.
• In the case of infections or other toxic strains, the signal of these toxins is inverted and the subsequent treatments will deactivate/eliminate the problem.
• Finally, with foods, the unhealthy response will be deactivated and the healthy response will be amplified. In this way the allergy can be successfully treated.

B. A brief explanation of total body load and target organs is also usually very helpful and is very much appreciated by clients who seem to fully take on board these concepts because they agree with their own experience. See Appendix 1 on “Central Allergies”. We have found that laminating these pages (40-42) and showing them to the client whilst explaining the concept is the best way to go.

C. Finally, you should go over the major symptoms recorded on the questionnaire. Clarifying any points that you are unsure about (not enough detail etc.) and checking the reasons for your clients visit.

You should make sure that this part of the session takes no more than 15 minutes. Beware of clients who are more familiar with doctor’s appointments and who will happily talk for ‘hours’ but then still expect a full treatment at the end of it.

TREATMENT

The treatment plan is listed below. The actual treatment time is 50 minutes but you should allow an extra 10 minutes for setting up each treatment etc.

FINAL INSTRUCTIONS (at the end of treatment session)

This should include following:
• A discussion on which central allergens (foods) you suspect based on the client’s symptoms. Discussion and agreement as to which foods should be addressed first, so that the client is able to carry out the elimination and challenge procedure for their next visit. (See treatment section, central foods).
• A discussion on any toxic strains, other than foods that you will begin to treat at the next session (e.g. infections, environmental strains etc.). You may or may not need to discuss this point, depending on the clients’ symptoms.
• Client information should include:
  Instructions on how to use Chip, drops etc.
  A copy of “Effects and Side Effects”.
  Any information needed for exclusion diet (Appendix 2 alternative foods sheet).
  Any other information relevant to your particular client. One example might be someone allergic to his/ her cat. This client would need to bring in a sample of cat hair. A client allergic to pollens/grasses could bring in a tape that has collected samples from their local area (see environmental toxins section for instructions on collecting samples) and so on.
2:2 FIRST APPOINTMENT TREATMENT PROTOCOL (teenagers and adults)

The beginners’ protocol consists of:

1. Conductance reading
2. ‘Quadrant” reading (if confident)
3. Full EAP (if confident)
4. Inversion (if confident)
5. Chakras
6. Laterality
7. General Meridian De-blocking and Balancing
8. Scars
9. Radiation

1. CONDUCTANCE

The measured value gives an indication of an individual’s overall energetic situation, and alerts the practitioner to:

1. Whether the energetic status of the client is good enough for further testing.
2. What specific basic program a client needs.

2. QUADRANT READING

This measurement indicates more specifically where the energy in the body is located. They are called quadrants because they refer to the energetic situation in the corresponding body quarter.

3. FULL ELECTRO ACUPUNCTURE (EAP) READING

This is the most specific test for determining the exact energetic status of the body.

4. INVERSION:

Inversion is usually caused by metals crossing the left/right brain barrier, for example glasses, braces etc. (see blockages chapter in theory manual). Unfortunately there is no way of treating inversion without testing, as you need to identify the object causing the inversion. Having said this, very few people are inverted so chances are you will be okay not testing this. If unsure, leave this client until you have mastered the technique at the advanced seminar.

3. CHAKRAS

Chakras can be balanced, without testing, using the programs in the manual. Clients will always feel better, even if the treatment wasn’t strictly necessary. When you have mastered the testing however, you will be more efficient as only about 10-20% of people will have a chakra issue. You will only usually need to do this once.
4. LATERALITY

Because of our stressful lives many people increasingly benefit from this treatment. Until you have mastered the techniques needed for individualizing this program, then using the 1153 (new program) will work. It’s an 8-minute program, which sweeps the healthy and unhealthy frequencies, so the client will absorb what they need. If the client is dyslexic or undergoing long-term extreme stress this will need to be carried out on a regular basis. Otherwise once is usually enough. Details for making program 1153 on p58.

5. GENERAL MERIDIAN DE-BLOCKING/BALANCING (10133 or 133)

This is the “Basic” therapy carried out in a first appointment, whatever the conductance/quad reading may show (Practical Manual Pt. 2 page 47). We use this the first time so that as many of the meridians as possible will come back into balance at the required level (as near to 50 as possible). The “Basic” at any further appointments is chosen from the conductance or quadrant reading.

6. SCARS

Again, most people have energetic blockages caused by the minor bumps, scrapes, and accidents that we all encounter throughout our life. So even if the client doesn’t have any obvious scars, unless you are testing the scars program, it is advisable to treat your client with a general scar treatment at the first one/two appointments. (The standard treatment is described in the Practical Manual Pt. 2 page 48, option 3.) Alternative program is 1010.

As a beginner these are the blocks that must be addressed before any subsequent treatments for strains etc. is carried out. An indicator that a block has not been addressed is that treatment isn’t as successful or as quick as you would like. For example, a client gets better slowly, or starts to feel better then slips back to original symptoms. If you haven’t treated all the blocks and this occurs then you should always address the untreated blocks.

Babies and Young Children

Running 10133 or 133, followed by a radiation and then a scars treatment is often all that is necessary. This is not always the case, however, and if you find that your young client is slow to respond to follow up treatment, then consider running the chakra and laterality programs. Usually halving the time of any treatment, (including treatments carried out in follow up therapies) is all that is required for babies.

7. RADIATION

Most people have some sort of radiation problem, for example from mobile phones/towers, computers, electrical equipment, x-rays, etc. It is common practice, therefore, to treat any client for radiation at the first two appointments (without testing). In this case the standard program 700 is used, rather than the more specific radiation programs, as it is a more general treatment. An alternative (new) program is 1172.
ENERGETIC TESTING

1. CONDUCTANCE

METHOD

- Multirange switch on EAP module set to “E”.
- Select ‘7’ (EAP) in the main menu and then ‘1’ for “CV, hypothalamus and quadrants”.
- The CV heading will be highlighted in red.
- Follow the instructions in the diagram below and press the foot pedal when you have a steady reading on the dial.
- The CV value will then be stored. The CV value on the ‘clock’ will indicate the correct ‘Basic Therapy’ you should choose.

The measured value gives an indication of an individual’s overall energetic situation, and alerts the practitioner to:

1. Whether the energetic status of the client is good enough for further testing.
2. What specific basic program a client needs.

For specific details on interpretation – see Practical 2 pp5-6
2. QUADRANT READING

LOCALISATION AND TEST TECHNIQUE
The quadrant measurement area is in the middle of the end joint of the thumb and big toe.

Quadrant readings determine:
1. The best basic therapy program and the ideal placement of electrodes.
2. Possible blockages and blocked areas of the body.

METHOD

- Multirange switch on EAP module set to “E”.
- Select ‘7’ (EAP) in the main menu and then ‘1’ for “CV, hypothalamus and quadrants”.
- The CV heading will be highlighted in red. If you wish to record a CV measurement in addition to quadrants, then do so now as described above.
- If you want to move straight to the quadrant test, press the foot pedal several times until you see QH-R highlighted in red. This means “Quadrant Hand Right”.
- Rub a little water onto the client’s right thumb and wipe off excess with a dry finger before testing right thumb (+ each of the other 3 test points).
- When the dial shows a steady reading (the “plateau”), press the foot pedal to store the reading.
- The screen will now show QH-L.
- Continue with each quadrant. Press ‘dot’ key for printout. Quadrant Mean Value tells you which basic therapy program is needed. Input electrode (black cable) at the highest quadrant value; Output electrode (red cable) at the lowest quadrant value.

For specific details on interpretation – see Practical 2 pp 9-10
3. MERIDIAN TEST POINTS (FULL EAP)

METHOD

- Multirange switch on EAP module set to “E”.
- Select ‘7’ (EAP) in the main menu and then press “ENTER” twice.
- The screen will now show the menu for the full EAP.
- The points are not wet for this testing. Dab the probe tip on the damp pad before each test.
- When the test reading reaches a plateau, press the foot pedal to record reading.
- The next point is then ready to test.

FINDING THE POINTS

The points for the meridians are located on either side of the nail, on the hands and the feet. The test tip is placed on the imagined intersecting line that runs down the side of the nail, and across the bottom.

For technique/interpretation – see Practical 2 pp14-19
BLOCKAGES

A. INVERSION:

Only do this if you feel confident. Otherwise leave until more experienced. Please note that if you don’t do this check and client is inverted they may well feel worse. If in doubt leave this client until you are able to do the test correctly.

METHOD

1. Connect the pale blue cable (banana plug) of test probe to a footplate
2. Test on CS (left hand) to establish a base reading
3. Ask client to put index finger of right hand on battery positive (+)
4. Test CS again on left hand. If signal rises, inversion is present.
5. Test on CS (right hand) to establish a base reading.
6. Ask client to put index finger of left hand on battery negative (-)
7. Test CS again on right hand. If signal rises, inversion is present.

If inversion is present remove glasses and retest. If signal does not rise, you have found the cause. Treat the glasses with program 999 as described in Practical 2, 4.5.1, page 45. If still inverted, try amalgam, jewellery, dental plate, etc. until you find the cause.

B. CHAKRAS

METHOD

1. Enter programs 970, 962, 940 (select 2 on main menu screen and then type in program number)

Program 970:
INPUT: flexi-mag on coccyx (no need to undress).
OUTPUT: small mat on the bottom three chakras (pubic bone to above navel)

Program 962:
INPUT same as 970.
OUTPUT: Small mat sideways on the heart area.

Program 940:
INPUT: same as for 970.
OUTPUT: Small mat back of head/neck area.

Input Beaker: Saliva for all three programs. DMI off.

Note: There must be approximately 15 cm (6 inches) between the mat and a flexi-mag, in order that the input and output signals aren’t confused. In this case the distance is measured between the coccyx and the front of body. If your client is very small (or thin) and this isn’t possible, then you must use the black/white electrode on the skin.
C. LATERALITY

METHOD

Program 1153 (select 2 on main menu screen and then type in program number)

Input: short flexible electrode on forehead and square flexible electrode over thymus (chest, black side in contact on skin)
Output: Modulation mat along the back

Input Beaker: ear wax from both ears
Output Beaker: minerals OR Chip in memory device. DMI amplify

D. GENERAL MERIDIAN DE-BLOCKING/BALANCING

METHOD

1. Select 1 on the main menu (Basic Therapy)
2. Select 1 in second menu (New Basic Therapies – 2009)
3. Select 4 on third menu (blocked clients – program 10133) and enter.

Input: Footplates on both feet.
Output: Large mat on back. Additional short flexible electrode on the forehead connected with a red cable

Input Beaker: Saliva
Chip/drops etc. are not used for these programs. DMI amplify.

E. SCARS

METHOD

Programs 900 and 910 (select 2 on main menu screen and then type in program numbers with a comma in between)

Input: both footplates and short flexible electrode on forehead (3 black cables needed)
Output: modulation mat along the back

Input Beaker: saliva

Chip: Yes - after treatment place 2 finger widths below navel. DMI amplify.
F. RADIATION

METHOD

Program 700 (select 2 on main menu screen and then type in program number)

Input: hammer electrode placed against point SP4a on inside of left foot (bent leg).
For young children, use a black/white flexible electrode on the abdomen (pancreas area, skin contact)
Output: Modulation mat along the back.

Input Beaker: saliva.
Output Beaker: oil (if desired) to be rubbed on SP4a point on both feet at night. OR Chip– apply 2 finger widths below the navel. DMI amplify.

**IMPORTANT NOTE:**

If the protocol is followed, then radiation and scar treatments are repeated at the second appointment (after “Basic” therapy decided upon by either the conductance or quad. reading).

This will not be the case with young children.
3: BALANCING THE BODY’S ENERGETIC SYSTEM
(FOLLOW-UP APPOINTMENTS)

3:1 BASIC THERAPY PROGRAMS

In order to prepare the body for treatment we need to balance the body’s energetic system as much as possible. The standard way of doing this is to start EACH session (after the first appointment) with a treatment we call a “Basic Therapy”. This Basic treatment will:

- **10130 (130):** Improve the condition of an already fairly balanced energetic system. It is an H and Di program and so it will amplify the healthy (H) signal of the client and reduce the unhealthy (Di) signal. It does this for a set time, with a sweep amplification.

- **10131 (131):** Calm an inflammatory (hyper) energetic system. The amplification for this program is below one, which means that any signal picked up from a client will be attenuated. It is an Ai program and so it alters all signals being picked up. **NOTE:** any program which has an amplification below one is an anti-inflammatory program.

- **10132 (132):** Energizes a tired energetic system. This is an H and Di program, working in the same way as the 10130 (130). The amplification and sweep of the ‘H’ signal is the same but here the ‘Di’ value is higher.

- **10133 (133):** This is an energetic de-blocking program. It is an A and Ai program used in a first appointment (whatever the conductance/quad reading indicates). Otherwise, it is only used as a Basic treatment when the quad values are all very different – indicating an energetic block. This program amplifies all the client’s signals for five seconds and then attenuates them for fifteen seconds, thus removing many energetic blocks. **NOTE:** It is also used as a pain program.

- **10135 (135):** Energizes an exhausted energetic system. Here only the healthy (H) signal is altered (amplified).

3:2 TESTING TO CHOOSE A BASIC THERAPY

A Basic therapy is chosen based on either the conductance test or the quadrant test. The instructions on how to test these have already been covered in section 2, First Appointment Procedures.

3:3 TREATING WITH A BASIC THERAPY

When we do a Basic treatment, decided from a conductance reading, the client’s whole body signal is picked up from the left hand, using a hand plate connected to a
black cable. Saliva is used in the input beaker. Treatment is given via the large mat from C7 and running down spine area. So:

a) **CONDUCTANCE METHOD**

**Program based on conductance reading** (select 1 on main menu screen and then 1 again. Then select appropriate Basic. Press Enter when therapy is selected and displayed. Press Start to run therapy)

**Input:** Left hand (black cable)
**Output:** Modulation mat along the back

**Input Beaker:** saliva  
**Output Beaker:** minerals OR Chip

b) **QUADRANT MEASUREMENT METHOD**

If a suitable Basic treatment is decided from a **quadrant reading**, then the signal from the client is picked up from the highest quadrant (hand or foot plate connected to a black cable). **Input Beaker:** saliva. The treatment enters the client through the mat (as in number 1.) but an extra treatment placement is used. This involves using a hand/foot plate connected to a red cable placed on the lowest quadrant reading. This means the treatment will be absorbed quicker and will also be more effective.

**Program based on Mean Quadrant Value – choose from table below** (select 1 on main menu screen and then 1 again. Then select appropriate Basic. Press Enter when therapy is selected and displayed. Press Start to run therapy)

**Input:** Quadrant with highest reading (black cable)  
**Output:** Modulation mat along the back + quadrant with lowest reading (red cable).

**Input Beaker:** saliva  
**Output Beaker:** minerals OR Chip

**PLEASE REMEMBER, WHEN USING AN ELECTRODE A BLACK CABLE IS CONNECTED FOR INPUT AND A RED CABLE FOR OUTPUT.**

The program used is based on the table given below

<table>
<thead>
<tr>
<th>Prog. No.</th>
<th>Conductance</th>
<th>Mean Quad</th>
<th>Therapy Mode</th>
<th>Condition of Client</th>
</tr>
</thead>
<tbody>
<tr>
<td>10130 (130)</td>
<td>80-89</td>
<td>35-48</td>
<td>H + Di</td>
<td>General Balancing</td>
</tr>
<tr>
<td>10131 (131)</td>
<td>90-100</td>
<td>48+</td>
<td>Ai</td>
<td>Calms hyper states</td>
</tr>
<tr>
<td>10132 (132)</td>
<td>72-79</td>
<td>30-34</td>
<td>H + Di</td>
<td>For tired states</td>
</tr>
<tr>
<td>10133 (133)</td>
<td>-</td>
<td>-</td>
<td>A + Ai</td>
<td>For blocked states</td>
</tr>
<tr>
<td>10135 (135)</td>
<td>under 72</td>
<td>under 30</td>
<td>H</td>
<td>Exhausted states</td>
</tr>
</tbody>
</table>
4: SUPPORTING THE ELIMINATING ORGANS

4:1 INTRODUCTION

Following a Basic treatment, most practitioners move on to support the organs that will be involved in eliminating the toxins released in the rest of the treatment. Some of these are designed to release toxins from a specific organ or system (e.g. liver, lymph etc.) These programs pick up all the signal of any toxicity in that organ/system, invert the signal, and the toxins are then released into the body as a whole. These are ‘Ai’ programs.

Other treatments involve supporting the specific organ so that it can release toxins at a pace suitable for the body to deal with. These are ‘H’ programs, where the healthy signal, from say a liver, is amplified.

Finally, some treatments involve boosting the healthy signal (‘H’) and inverting the unhealthy signal (‘Di’). These are designed to strengthen a particular organ so that it is able to eliminate toxins more efficiently.

This is the second stage of any treatment.

4:2 SUPPORTING DETOXIFICATION: PROGRAMS

When you become more experienced, the best program to help the elimination of toxins will be one you have tested for. This test can be carried out in one of three ways:

A. Biotensor
B. EAP
C. Kinesiology

There are now a large number of programs to choose from but as a beginner you may not feel confident enough to carry out this testing. If this is the case then you should choose either:

A. General Detox. Program, which will help release toxins from all the organs/systems involved. This is called a Toxin Release Program. The standard program referred to in the Regumed Manual is program 970. This is a program with a constant amplification, set fairly low. This treatment is OK but is often not really sufficient. For this reason we have improved the program by increasing the amplification and using a sweep. This has proved more effective and it is one often used. The program number for this is 1197 (or 1097 for BICOM 2000).

or

B. Program Based on Symptoms. Often the symptoms/conditions of a particular client will help to decide a suitable program. If a client has lots of infections, food allergies, Candida, radiation, heavy metal problems etc. then supporting the liver would be advisable. If the person is always prone to infections and generally someone we would class as ‘weak’ constitutionally, then a kidney treatment might well suit. If considering a lymph treatment, however, you must remember that if toxins are released into the system from the lymph, then the liver and kidneys must be strong.
enough to deal with these toxins. It is for this reason that if a lymphatic treatment is carried out, we advise doing either a liver or a kidney treatment in addition.

**The standard programs in the Regumed manual are as follows:**

Liver: 430 or 431; Kidneys: 480 or 481 or 482; Lymph: 830 or 930.

**Our programs, developed from these are:**

Liver: 1143; Kidneys: 1148; Lymph: 1030. As with the 1197 (toxic discharge), these three programs have a higher amplification, and uses a sweep (rather than a constant) signal.

These four treatments are the most commonly used by our students.

(See Appendix 3 pp57-58 for a list of programs that can be added to your machine under the heading “own programs”). There are also LDF elimination programs, grouped together for convenience in Practical Part 2 p53.

### 4:3 TREATMENT PROTOCOLS

**METHOD**

**Toxin Release**

**Program 1197** (select 2 on main menu screen and then type in program number)

**Input:** Flexi-mag on thymus (over clothes) or black/white flexible electrode on skin over thymus.
**Output:** Large modulation mat along the back

**Input Beaker:** saliva or blood (prick ear lobe with lancet and collect spot of blood on cottonwool bud.
**Output Beaker:** minerals OR Chip

**Liver**

**Program 1143** (select 2 on main menu screen and then type in program number)

**Input:** Flexi-mag on liver (over clothes) or black/white flexible electrode on skin over liver.
**Output:** Large modulation mat along the back

**Input Beaker:** saliva or blood
**Output Beaker:** minerals OR Chip
**Kidneys**

Program 1148 (select 2 on main menu screen and then type in program number)

**Input:** Flexi-mag on kidneys (over clothes) or black/white flexible electrode on skin over kidneys.

**Output:** Large modulation mat down centre of front of body

**Input Beaker:** saliva or urine (only a spot on cottonwool bud)

**Output Beaker:** minerals OR Chip

**Lymph**

Program 1030 (select 2 on main menu screen and then type in program number)

**Input:** 2 x Flexi-mag on both armpits or groin areas or single Flexi-mag on bowel (over clothes) or largest black/white flexible electrode on skin over thymus.

**Output:** Large modulation mat along the back

**Input Beaker:** saliva

**Output Beaker:** minerals OR Chip

**IMPORTANT NOTE:**

YOU MUST ALWAYS DO ONE OF THE ELIMINATING ORGAN TREATMENTS EACH SESSION. THIS WILL AVOID CLIENTS SUFFERING SIDE EFFECTS SUCH AS HEADACHES, OR OTHER MORE DEBLITATING SYMPTOMS SUCH AS EXTREME TIREDNESS OR FLU-LIKE SYMPTOMS.
5: FOOD STRAINS

5:1 STRAIN CLASSIFICATION

Until you have gained some experience, testing for strains can prove quite difficult. In this section, therefore, we will explain how to treat strains without testing. This should not take the place of accurate testing in the long term but it will enable you to use the BICOM effectively, whilst you continue to practice to a level where you feel confident that your testing is accurate.

Strains can be split into a number of different categories. These include:

- **Foods:** Central Allergens and other foods.
- **Infections:** Viral, bacterial, parasites and infectious moulds such as Candida.
- **Environmental:** Moulds, fungi, pollens, grasses, animal etc.
- **Synthetic:** Chemicals, metals.

5:2 FOODS: CENTRAL ALLERGENS

Of the numerous foods that people react to, the most important are those we class as ‘Central or Chronic Allergens’. These allergens are not only important for common allergic conditions such as asthma, eczema, arthritis, brain disorders, and digestive conditions such as colitis, Crohn’s, coeliac, etc. but are linked to more serious problems such as autoimmune conditions and even cancer. Central food allergens include:

- Dairy: proteins + less commonly, lactose [milk sugar]
- Wheat [+ gluten]
- Glucose [carbohydrate intolerance]
- Fructose
- Refined sugar [sucrose]
- Salicylates
- Yeast
- Soy [+ less commonly other legumes]
- Eggs

In this manual (Appendix One, p.39), I have included a dissertation I wrote (*The Role of Central Food Allergies and Intolerances on Overall Health from Birth to Old Age*). It explains the importance of addressing central allergens and their role in many illnesses. It also lists the numerous conditions and symptoms linked to each allergen/intolerance. Also see skin photos in Schumacher’s book, Chapter 12, pp175 -222.

5:3 ELIMINATION/CHALLENGE PROTOCOL

Until you are able to test these foods, to see if they are acting as a strain, then you should ask your client to carry out an elimination/challenge protocol. This involves:
a. Your client should completely avoid the suspect food (e.g. wheat/gluten or other) for a minimum of 4 days (a week would be preferable). A list of alternative foods can be found in Appendix Two of this manual, but your client should also check all ingredients on any packaged or processed foods, or items they have not prepared or cooked themselves.

b. On the day of the treatment (5-7 days after eliminating the foods), they should eat a large portion of that food, 60 minutes before the appointment time. In the case of wheat/gluten: Two/three slices of wholegrain bread OR portion of whole grain pasta etc. To test both wheat and cow’s milk, a cheese sandwich.

c. A standard three session treatment can then be carried out. (See protocol 5.4)

We ask the client to carry out this elimination/challenge, (which classically trained allergist/nutritionists consider the “Gold Standard” method of assessing the suspect food), for two reasons.

1) When a person’s reaction to a problem food has moved into the adaptive/chronic phase, it can become masked (see dissertation). If we then test to see if it is a strain, it will not test positive.

This is because when we test with BICOM, we are not stressing the body with the substance but are offering relief. That means that for the short time that the test probe is on the acupuncture point the body is receiving a treatment to reduce the reaction to the substance in the input beaker.

If the reaction has become masked the body no longer recognizes the problem (it has adapted to it), even though it has now become a more serious problem than when it was in the acute reaction phase. If the strain doesn’t test as positive (even though the food is a problem) then the body will not be ‘open’ to treatment (i.e. it won’t work).

By asking the client to eliminate the food from the diet for a period of time (it takes four days for the body to be completely clear of a food) and then re-introducing it, the body will then recognize the problem, a test would show positive, and treatment would then be successful.

If you are not confident enough to carry out accurate testing then it will be impossible for you to ascertain whether the reaction to a food has become masked, so by carrying out the procedure above, you will be certain that IF the food is indeed a problem, then treatment will be successful.

2) The procedure above will ensure successful treatment if a suspect food is in fact a strain. It will not tell you if it is. Only accurate testing can do that. However, when your client stays off the food you can ask them to record any change/improvement in symptoms. Before carrying out the above procedure, checking symptoms will give you a clue as to whether or not the food is a problem, as even after a few days most people notice some improvement when
eliminating a problem food. If there is no improvement, however, but symptoms indicate a problem, then it would still be wise to carry out the treatment protocol.

5:4 TREATMENT PROTOCOL (FOODS)

Session One:

I. Basic Therapy: decided from conductance
   Input: Left hand
   OR
   Basic Therapy: decided from quadrant reading
   Input: Highest quadrant reading (black cable)
   Output: Large mat on back + lowest quadrant reading (red cable)

Input Beaker: Saliva

II. 1197 Eliminating Organs Therapy
    OR
    Eliminating Organ Therapy of your choice
    (See section 4)

III. 998,977 (Allergy therapy)
    Input: None
    Output: Large mat on back + 2 red cables to hand electrodes/balls

    Input Beaker: Allergen (sample or vial)

CHIP or MINERALS (drops) should be used throughout the session.

Session Two:

I. Basic Therapy: decided from conductance
   Input: Left hand
   OR
   Basic Therapy: decided from quadrant reading
   Input: Highest quadrant reading (black cable)
   Output: Large mat on back + lowest quadrant reading (red cable)

Input Beaker: Saliva

II. 1197 Eliminating Organs Therapy
    OR
    Eliminating Organ Therapy of your choice
    (See section 4)

III. 944 (Allergy therapy)
    Input: None
    Output: Large mat on back + 2 red cables to hand electrodes/balls

    Input Beaker: Allergen (sample or vial)
Session Three:

I. **Basic Therapy**: decided from conductance
   **Input:** Left hand
   **OR**
   **Basic Therapy**: decided from quadrant reading
   **Input:** Highest quadrant reading (black cable)
   **Output:** Large mat on back + lowest quadrant reading (red cable)

   **Input Beaker:** Saliva

II. **1197 Eliminating Organs Therapy**
   **OR**
   Eliminating Organ Therapy of your choice
   (See section 4)

III. **968, 964 (Allergy therapy)**
    **Input:** None
    **Output:** Large mat on back + 2 red cables to hand electrodes/balls

    **Input Beaker:** Allergen (sample or vial)

**NOTE:** Each session takes approximately 30 minutes (not allowing for set up time etc.). This means that in a one-hour session there will be time to treat one more strain. E.g. another food, an environmental strain, an infection or a synthetic strain.

At the end of the third session ask client to wait four days and then introduce the food and note the results. If they are now able to tolerate the food they can gradually reintroduce it into their diet. If there is still a slight reaction then the following protocol is recommended.

**Extra Session**

At the beginning of the session provoke a reaction to the food by placing the specific food vial in the input beaker. Patient has mat on back. Then run program 196. This is an ‘A’ program, which runs for five minutes as a provocation.

Then carry out the same treatment protocol you carried out in session three. This will then make sure the client no longer reacts to the food. It should be noted, however, that the standard three treatments is all that is usually required and the provocation treatment is needed for a very few clients.

Whilst this section has concentrated on central foods, **other foods** can be treated in the same way. It is our recommendation that you do not work with **anaphylactic clients** until you are much more experienced therapist.
6: INFECTION STRAINS

6:1 INTRODUCTION

Testing and treating infections is a very successful part of BICOM therapy and difficult conditions such as chronic fatigue and fibromyalgia can be greatly improved (even eliminated). Antibiotic resistant strains of bacteria respond well to BICOM treatment, as do viral infections, which never respond to antibiotics. Treating infections is also very successful in eliminating many types of joint pain (without the pain therapy treatment). Even Candida, (fungal/mould infection), a notoriously difficult condition to treat, can be successfully eliminated with BICOM Therapy.

As with any BICOM treatment, accurate testing leads to successful treatment but it is possible to eliminate infections without knowing what the infection is. And sometimes, even when a therapist is an excellent tester, a vial of the infection the client is suffering from will not be available. (New strains of viral infections are commonplace, for example).

We do this by:

- **Either** taking the unhealthy signal of a body fluid containing the frequency of the infection
- **Or**, by picking up the “disharmonious’ signal from the infected (or painful) part of the body.

**IDEALLY WE WOULD COMBINE BOTH METHODS**

6:2 ‘1149’ INFECTION CALMING THERAPY

This program (See Appendix 3, p57 for a list of programs that can be added to your machine under the menu programs/ own programs) is called infection calming because it will de-activate any type of infection (bacterial or viral). It is a ‘Di’ program and so only picks up and reverses the unhealthy signal. This unhealthy signal can be taken from any body fluids (bloods, saliva, earwax, urine, nasal secretions, catarrh vaginal swab, anal swab, or infectious material from an open wound) and would depend on your clients’ symptoms. The signal can also be taken with an input electrode from an infected area of the body (lungs, intestine, hip, teeth etc.) or from an area where the client has most pain (neck and shoulders for example). A magnetic electrode is often best.

This program can be used for acute infections, for example, if a client you are already treating comes in with flu etc. or for someone who phones up for an emergency appointment because they have an unknown virus.

It can also be used in chronic conditions (such as chronic fatigue, auto-immune conditions etc.) where the infectious load is likely to be high. This can be carried out from a second appointment onwards. In this way it is used as general treatment to reduce / deactivate all infections.
TREATMENT PROTOCOL (INFECTIONS)

Program 1149 (select 2 on main menu screen and then type in program number)

Input: Fleximag(s), hammer or black and white electrode, on problem area. For example, ear, jaw (teeth) mastoid, C7 and shoulders, liver, stomach, intestines, kidneys, bladder, vagina, anus etc.

Output: Large modulation mat on back or down centre of front of body if input is from an area on the back.

Input Beaker: appropriate body fluid
Output Beaker: minerals OR Chip

With an acute infection treatment needs to be carried out two/three times, two/four days apart.

With chronic infections allow four/seven days between each treatment. With someone who is very sensitive and who may have been ill for some time the minerals (drops) rather than a chip should be used (chip is applying treatment continuously and may be too strong).

In both cases treatment away from the BICOM, either with the use of a chip, or with minerals is definitely recommended, as this will stop the infections from continuing to reproduce.

ALWAYS FOLLOW AN INFECTION CALMING TREATMENT WITH A DETOX. PROGRAM (SECTION 4), EITHER 1197, OR ANOTHER OF YOUR CHOICE.

IF THE TREATMENT IS PART OF A ONE-HOUR SESSION WHERE YOU HAVE APPLIED A BASIC AND SUPPORT FOR AN ELIMINATING ORGAN AT THE BEGINNING OF THE SESSION, THERE IS NO NEED TO DO ANOTHER DETOX. AFTER THE INFECTION CALMING TREATMENT.

NOTE:
If the client has been medically diagnosed with a specific infection and you have a vial for that infection, you can use the protocol for natural environmental strains on p.27.
7: ENVIRONMENTAL STRAINS (NATURAL)

7:1 INTRODUCTION

In this section we are dealing with environmental strains that cause allergic reactions but are classed as ‘natural’ substances. This would include: pollens, grasses etc.; animal hair (saliva); moulds, fungi; insects (bite reactions); dust (+ mites); smoke etc.

In order to treat these you can obtain ready-made vials but it is often necessary to collect local samples – either yourself or your clients. Below are some suggestions.

The Therapist

- Collect samples of all grasses and pollens in your area. This will probably need doing each season until you have collected a full years’ worth of samples. You can dry the samples by placing them in a sunny spot, for example a windowsill, in an unsealed envelope. It will take approx. one week to dry. Ensure that the sample is really dry before placing it in a moisture free vial, with a screw top. This will avoid your sample going mouldy.
- You can also obtain this type of sample by placing a strip of Micropore tape around a cotton wool bud with approx. three inches (seven cm) of tape hanging down from the stick of the bud. (Like a flypaper.) Place this outside for a few days to collect a sample of pollens etc. then place in a glass, screw top vial. As above you will need to collect various samples spread out over a year.
- A final way to collect this type of sample is to collect a sample of rainwater. This will also contain information of pollens etc. Again, you should collect samples each month/season to ensure a complete range.
- You can collect all the other types of strains (see above) in the same way.

The Client

- Client to hang tape (see directions above) in bedroom, outside house etc. (depending upon symptoms). This can then be used for their treatment.
- Client can also bring in samples from their vacuum cleaner, mould from windows/bathroom etc.

The samples that a client needs to bring in are those specific to them and their environment and which the therapist hasn’t got access to. Otherwise the samples the therapist has are usually enough.
TREATMENT PROTOCOL (ENVIRONMENTAL, NATURAL)

Session One:

I. **Basic Therapy**: decided from conductance
   **Input**: Left hand
   **OR**
   **Basic Therapy**: decided from quadrant reading
   **Input**: Highest quadrant reading (black cable)
   **Output**: Large mat on back + lowest quadrant reading (red cable)

   **Input Beaker**: Saliva

II. **1197 Eliminating Organs Therapy**
   **OR**
   Eliminating Organ Therapy of your choice
   (See section 4)

III. **998,978 (Allergy therapy)**
    **Input**: None
    **Output**: Large mat on back + 2 red cables to hand electrodes/balls

    **Input Beaker**: Allergen (sample or vial)

CHIP or MINERALS should be used throughout the session.

Session Two:

I. **Basic Therapy**: decided from conductance
   **Input**: Left hand
   **OR**
   **Basic Therapy**: decided from quadrant reading
   **Input**: Highest quadrant reading (black cable)
   **Output**: Large mat on back + lowest quadrant reading (red cable)

   **Input Beaker**: Saliva

II. **1197 Eliminating Organs Therapy**
   **OR**
   Eliminating Organ Therapy of your choice
   (See section 4)

III. **944 (Allergy therapy)**
    **Input**: None
    **Output**: Large mat on back + 2 red cables to hand electrodes/balls

    **Input Beaker**: Allergen (sample or vial)
Session Three:

I. Basic Therapy: decided from conductance
   Input: Left hand
   OR
   Basic Therapy: decided from quadrant reading
   Input: Highest quadrant reading (black cable)
   Output: Large mat on back + lowest quadrant reading (red cable)

   Input Beaker: Saliva

II. 1197 Eliminating Organs Therapy
    OR
    Eliminating Organ Therapy of your choice
    (See section 4)

III. 968, 963 (Allergy therapy)
    Input: None
    Output: Large mat on back + 2 red cables to hand electrodes/balls

    Input Beaker: Allergen (sample or vial)

NOTE: Each session takes approximately 30 minutes (not allowing for set up time etc.). This means that in a one-hour session there will be time to treat one more strain. E.g. a food, environmental strain, infection or a synthetic strain.
8: ENVIRONMENTAL STRAINS (SYNTHETIC)

8:1 INTRODUCTION
There is no doubt that today we are living in a chemical world. Thousands of chemicals are added to our foods, either directly or via the sprays our crops are overloaded with. We are subject to them in the air we breathe, the water we drink, in the buildings we live in, from the clothes we choose to wear, and the offices, factories and workplaces where we spend most of our time.

In this section we are dealing with environmental strains that cause allergic reactions but are classed as ‘synthetic’ substances. This includes chemicals and metals. It is not possible to list all the chemical strains we are exposed to and good advice for any client would be to avoid those chemicals they can avoid (Cosmetics, cleaning materials, detergents, food additives etc.). As for treatment, there are a number of vials that a therapist can use, for example, pesticide/herbicide mix, food additives kit etc. Others can be collected by the therapist and samples brought in by clients.

Below are some suggestions but there are many more.

Chemical
- Household chemicals: cleaning materials; detergents; air fresheners; hair products such as shampoo; cosmetics etc.
- Foods: synthetic colours; preservatives; flavours; bread improvers etc.
- Work related: farmers; doctors; nurses; dentists; hairdressers; cleaners; nail technicians; photographers; artists; builders (all types) etc. The list is as long as the jobs that people are employed in.
- Drug related: recreational; medications.

Metal
- Dental: amalgams, crowns, bridges, implants, braces etc.
- Medical: from implants; joint/hip replacements; other surgical procedures
- Jewellery
- Work related

Some of the above examples your clients will supply, for example we have four large boxes of vials filled with chemicals from our clients’ work related problems. We have more boxes filled with medications (clients can often give you a sample), or you can make a copy.

Making Vials involves putting the medication in the input beaker and a vial filled with either homeopathic pillules or a water/alcohol solution, in the output beaker. The chip maker or modulation mat is unplugged so that the entire signal goes directly into the output beaker. Program 196 is then run and on completion you will have a copy of the medication ready to label and use for your client and any future clients. **You can treat someone for the side effects of any medication but you must never tell them to stop taking anything prescribed by a doctor.**

NB Remember to plug your mat back in afterwards.
8:2  TREATMENT PROTOCOL

Session One:

I. Basic Therapy: decided from conductance
   Input: Left hand
   OR
   Basic Therapy: decided from quadrant reading
   Input: Highest quadrant reading (black cable)
   Output: Large mat on back + lowest quadrant reading (red cable)

   Input Beaker: Saliva

II. 1197 Eliminating Organs Therapy
   OR
   Eliminating Organ Therapy of your choice
   (See section 4)

III. 998,979 (Allergy therapy)
   Input: None
   Output: Large mat on back + 2 red cables to hand electrodes/balls

   Input Beaker: Allergen (sample or vial)

CHIP or MINERALS should be used throughout the session.

Session Two:

I. Basic Therapy: decided from conductance
   Input: Left hand
   OR
   Basic Therapy: decided from quadrant reading
   Input: Highest quadrant reading (black cable)
   Output: Large mat on back + lowest quadrant reading (red cable)

   Input Beaker: Saliva

II. 1197 Eliminating Organs Therapy
   OR
   Eliminating Organ Therapy of your choice
   (See section 4)

III. 944 (Allergy therapy)
   Input: None
   Output: Large mat on back + 2 red cables to hand electrodes/balls

   Input Beaker: Allergen (sample or vial)
Session Three:

I. **Basic Therapy**: decided from conductance
   **Input**: Left hand  
   OR  
   **Basic Therapy**: decided from quadrant reading  
   **Input**: Highest quadrant reading (black cable)  
   **Output**: Large mat on back + lowest quadrant reading (red cable)

   **Input Beaker**: Saliva

II. **1197 Eliminating Organs Therapy**  
    OR  
    Eliminating Organ Therapy of your choice  
    (See section 4)

III. **968,963 (Allergy therapy)**  
    **Input**: None  
    **Output**: Large mat on back + 2 red cables to hand electrodes/balls

    **Input Beaker**: Allergen (sample or vial)

**NOTE**: Each session takes approximately 30 minutes (not allowing for set up time etc.). This means that in a one-hour session there will be time to treat one more strain. E.g. a food, environmental strain, infection or a synthetic strain.
9: CONSTITUTIONAL THERAPIES

As you look through the Regumed Program Handbook (supplied with your Optima machine) you will see there are hundreds of constitutional programs. These cover the many conditions and symptoms that your clients are experiencing. Experienced practitioners have developed them over many years and many therapists have found that they are extremely helpful.

As with any BICOM treatment, testing and individualizing the amplification and time of specific programs gives the best results. But, until then, choose specific programs based on the major symptoms of your client. Many of our students have done just that, with amazing results.

As practitioners, we do not favour one program over another, but there are some programs that are used on a regular basis and a few of these are listed below.

- Activate vitality
- Auto-regulation – disturbed
- Bowel action – to improve/or balance
- Energy – lack of
- Intestinal flora – to improve
- Metabolism
- Tissue Processes (chronic)
- Sinusitis
- Oxygen uptake – to improve
- Resistance – to increase powers of
- Yin/Yang balance
- Thymus activation
- Weak immunological response
- Immunodeficiency
- Hormonal control

Please note, these are not listed in any particular order.
10: USING CHANNEL TWO

10:1 INTRODUCTION

With the development of the Optima, and channel two, BICOM therapy took a big step forward because it enabled the practitioner to carry out two operations (types of therapy) at the same time. This “additional therapy module” means that support to increase and strengthen the clients’ constitutional health thus improving their overall resistance to disease, can be accomplished whilst reducing the toxicity of the body by eliminating food allergies and other toxic strains. Clients feel the benefits of treatment quicker, word spreads about the benefits of BICOM treatment, and the result is a full appointment book.

10:2 CHANNEL TWO THERAPY

As you become more familiar with your Optima and the types of programs available (e.g. ‘H’, ‘Di’, ‘Ai’ etc.) you will see that channel two therapies use only ‘A’ programs. This means that whatever treatment the client receives either from a substance (vial in Ch. 2 honeycomb) or a program (homeopathic stored substances), this is ‘amplified’ into their body through the modulation mat.

**THIS MEANS YOU MUST ONLY EVER USE BENEFICIAL SUBSTANCES IN THE CHANNEL TWO HONEYCOMB.**

Activating Channel Two as an Additional Therapy Mode

- First set up your required channel 1 program (e.g. allergy therapy etc).
- One you are ready to start this therapy, press the channel 2 yellow button.
- **Select either:**
  1. (from honeycomb); or 2. (saved substance complexes).

  a). If you choose the honeycomb option, place the vial in the channel 2 honeycomb (see below for examples of the type of vials you could use).
  b). Once the vial is in the honeycomb, press Enter.
  c). Press the channel 1 Start button (blue) to activate both treatments (both Start buttons should be lit up).

- **Or select:**
  2. (substance complexes).

  a). Choose either 1 (categories) or 2 (alphabetical) and follow the prompts until you reach the desired stored substance.
  b.) Press enter and then press channel 1 Start button. This will activate both channels (both Start buttons should be lit).

  **See appendix (after p. 58) for a list of stored substances.**
Examples of vials (ampoules) that can be placed in channel two include:
5 element (element or meridian vial); CTT stabilizing ampoules (pink labels);
homeopathic preparations; tissue salts; propolis or other anti-fungal/viral/bacterial
preparations; Bach/bush flower remedies; allopathic remedies etc. These are just a
few of the many examples.

Using Channel Two as a Single, Stand-alone Therapy

- Select 6 from the main menu.
- From here, follow the steps above – “using saved substance complexes”.

See appendix (after p. 58) for a list of stored substances.

10:3 CHANNEL TWO PROTOCOLS/INDICATIONS WITH HONEYCOMB

Here are just a few examples of channel two indications (only CTT Five Elements). You
will learn more from the Fulda conference proceedings, which are available and will be
extremely valuable as you gain more experience.

Eye Disease: CTT ampoule – Liver/ metabolism.
Cerebral malfunction: CTT – Earth/CNS/ brain/metabolism.
Intestinal problems: CTT – Metal/ large intestine; Fire/ small intestine.
Detoxification Issues: CTT – liver/gall bladder; kidney/lymph.
Joint Issues: CTT- Wood/large and small joints.
Skin Disease: CTT – Metal/skin/large intestine; Water/kidneys.
Cardiovascular: CTT – Fire/heart/circulation.
Hormonal Imbalance: CTT Fire/triple warmer/female/male hormones.
Immunodeficiency: CTT – lymph/kidneys/large intestine.
Gastric Complaints: CTT – Earth/stomach/metabolism
Pollinosis: CTT – Metal/lungs/large intestine; Water/sinus/allergy
11: PAIN THERAPY

11:1 INTRODUCTION

“Pain is the cry of the connective tissue for flowing energy” Dr. Weichel

There are different kinds of pain, and different treatment approaches. Often pain is not just a local process but also a ‘system’ problem. The BICOM can be very useful when treating pain, however it cannot treat and directly correct structural problems.

Some examples of pain include:
- Recent injuries – falls, accidents etc. Treat as ‘acute’
- Pain from old injuries and scars. Treat as ‘chronic’.
- Surgery – operations
- Back, neck and shoulder pain
- General pain not attributable to injury or accident.
- Menstrual pain

The BICOM can treat pain by:
- Stimulating healing
- Reducing inflammation
- Treating scars and meridians that run through areas of pain
- Treating painful areas directly
- Removing blockages (which may cause pain)
- Stimulating detoxification (e.g. ‘gall bladder’ headaches at the forehead)

11:2 BICOM PROGRAMS

There are three approaches to treating pain.

1) Using general BICOM “pain therapy” programs 425/426.

There are three steps:

1) Basic therapy
2) Meridian flooding. The meridians running through the area of pain are treated on both sides of the body before using these programs in line with Dr. Weichel’s statement above. (see Practical Part 2, p51)
3) Local therapy of the pain area.

In step 3, program 426 (‘A’, all frequencies) is only used for 1 minute as a provocation before program 425 (‘Ai’, all frequencies). Amplification should be tested. An alternative which may be used without testing is program 133 modified as an ‘all frequencies’ program instead of the standard ‘frequency sweep’. This alternates between provocation (A) and relief (Ai) and sweeps amplification. Stored as program 1133 (see p37.)
For recent (acute) injuries, output on the painful area and input farthest away from the pain. For long standing problems (chronic), input from the pain with a magnetic depth electrode (hammer or fleximag) and output far away from the pain, or on the opposite side.

Alternative electrode placements for specific joint problems are listed below.

<table>
<thead>
<tr>
<th>JOINT (input with hammer or fleximag)</th>
<th>OUTPUT (small mat or fleximag)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cervical spine</td>
<td>stomach</td>
</tr>
<tr>
<td>Shoulder-neck</td>
<td>kidneys</td>
</tr>
<tr>
<td>Shoulder joint</td>
<td>heart</td>
</tr>
<tr>
<td>Shoulder blade</td>
<td>lungs</td>
</tr>
<tr>
<td>Elbow</td>
<td>liver</td>
</tr>
<tr>
<td>Wrist</td>
<td>spleen/pancreas/lumbar</td>
</tr>
<tr>
<td>Hip</td>
<td>intestinal area –left</td>
</tr>
<tr>
<td>Knee</td>
<td>gallbladder</td>
</tr>
<tr>
<td>Ankle</td>
<td>bladder</td>
</tr>
<tr>
<td>Breastbone</td>
<td>intestinal area - centre</td>
</tr>
</tbody>
</table>

2) Specific BICOM programs for pain which include the following:

<table>
<thead>
<tr>
<th>INDICATION</th>
<th>PROGRAM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anti-inflammatory (general)</td>
<td>131</td>
</tr>
<tr>
<td>Tissue process, acute OR chronic</td>
<td>922 OR 923/925 can be used as basic therapy</td>
</tr>
<tr>
<td>Muscular pain</td>
<td>630</td>
</tr>
<tr>
<td>Nerve pains</td>
<td>911</td>
</tr>
<tr>
<td>Bone pain</td>
<td>650</td>
</tr>
<tr>
<td>Burns</td>
<td>432</td>
</tr>
</tbody>
</table>

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“Dry injections” (using program 192) of Five Element ‘Wood’ vials can be useful support for pain at the end of a session.

Drops or oil can be made up from all pain programs to continue treatment at home, or a BICOM Chip.

3) Virus-related joint pain. (Infectious arthritis)

Dr Pam Tatham, who specializes in pain treatment in the UK, finds that viruses and other infections are almost always associated with painful joints. Our experience is that this is very important in Australia because of the prevalence of mosquito-borne viruses which cause sore joints. Herpes (e.g. EBV, CMV, Zoster) and other nervous system viruses are often associated with head, neck and shoulder pain. We have found bacterial infections such as golden staph. (staphylococcus aureus) causing pain in knees, wrists and hips and Pam has found amoebic dysentery affecting joints. Our modification of her protocol is as follows.

1) Basic therapy. Our recommendation would be ‘virus calming’ 1149.
2) Detoxification program – tested and individualized (usually 1043 or 1097 ).
3) Elimination of specific viruses found (998, 978). In the first session for pain, treat only the highest priority virus for time reasons.
4) Muscle pain (630) or nerve pain (911) program.
5) Dry injection (192,198) of 5-E Wood vials (if time).
12: PUTTING IT ALL TOGETHER

The average patient needs six treatments (less for children with simple problems, more for long term illnesses).

Below is a simple guide to how this might work out.

- **First appointment**

- **First follow up:**
  - Basic therapy;
  - support for eliminating organs;
  - elimination of **two** toxic strains (foods, infections, chemical etc).
  - If time, constitutional therapy to support either the general constitution or specific condition.
  - PLUS: Channel two support (either saved substances or supportive vials) can be used at each stage of treatment.

- **Second follow up:**
  - Repeat follow up treatment above but using stage two of the protocols for treating the strains you are dealing with.

- **Third follow up:**
  - Repeat follow up treatment above but using stage three of the protocols for treating the strains you are dealing with.

This process can then be repeated (excluding first appointment) with two or three new strains.
APPENDIX ONE

THE ROLE OF CENTRAL FOOD ALLERGIES AND INTOLERANCES ON OVERALL HEALTH FROM BIRTH TO OLD AGE

INTRODUCTION

“The number of allergens these days has reached astronomical heights.”

Reinhold Will

In 1906, when Claus von Pirquet introduced the word “allergy” to describe maladaptive reactions to foods and substances in a person’s environment, he did not realize the controversy this would cause decades later.

Today, in medical schools, allergy is taught as meaning a reaction producing an IgE antibody. These reactions, however, account for less than 5% of maladaptive reactions. Orthodox medicine is probably entrenched in this way of thinking because these reactions can be severe and lead to death.

Clinical ecologists, on the other hand, are concerned with all forms of maladaptive reactions, as the ‘non IgE’ ones may not kill but can cause severe discomfort and chronic illness over many years and drastically reduce quality of life. Classic texts on allergy by clinical ecologists (1,2,3,4) prioritise foods as playing a central role in “allergic” conditions. Indeed foods dominate the list of “top ten allergens” of three eminent practitioners: Dr Vicky Rippere (London Institute of Psychiatry); Prof. John Soothill (Great Ormond Street Hospital); and Dr Joseph Egger (Munich) – see table below.

Top Ten Allergens

<table>
<thead>
<tr>
<th>Rippere</th>
<th>Soothill</th>
<th>Egger</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Wheat &amp; wheat products</td>
<td>Cow’s milk</td>
<td>Chocolate</td>
</tr>
<tr>
<td>2. Dairy (cow’s) produce</td>
<td>Egg</td>
<td>Colourings</td>
</tr>
<tr>
<td>3. Food additives</td>
<td>Chocolate</td>
<td>Cow’s milk &amp; chemicals</td>
</tr>
<tr>
<td>4. Coffee, alcohol</td>
<td>Orange</td>
<td>Egg</td>
</tr>
<tr>
<td>5. Chocolate</td>
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<td>6. Citrus</td>
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<td>7. Corn</td>
<td>Tomatoes</td>
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<td>8. Egg, cane sugar</td>
<td>Rye</td>
<td>Nuts</td>
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<td>9. Tea</td>
<td>Fish</td>
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<td>10. Oats</td>
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It can be seen from this table that two of the staple foods in western society, that is, wheat and dairy produce (cow’s), are common to all three studies and Dr Keith Mumby states in his book *Diet Wise* that, in his experience, “if one were simply able to persuade the entire population to give up just these two foods, the change in the health of the nation would be dramatic.”

In fact, opinion is leaning more and more towards the belief that central foods (i.e. those most commonly consumed on a daily basis) are significant in many chronic conditions and illnesses. Before looking at these foods individually, however, an understanding of three underlying principles linked to maladaptive reactions is not only helpful but necessary. These principles are: Total Body Load (TBL) concept; target organ theory; and General Adaptation Syndrome (GAS).

**TOTAL BODY LOAD**

During our lives we encounter numerous environmental stressors that, most of the time, we manage to cope with. Stressors are cumulative and include:

- **Biological:** food, bacteria, viruses, vaccines
- **Chemical:** food additives, pesticides, toxic metals, drugs
- **Physical:** radiation (nuclear, X-ray, microwave, computers etc.)
- **Emotional:** changes hormonal balance

If we think of our bodies as an empty barrel at birth, the diagram below depicts the eventual outcome of ‘overload’. Living in an industrialised world results in an increasingly toxic load and eventually our barrel overflows, our total body load now exceeds our defences and we become ill.

![Overload of stressors](image_url)

The last stressor affecting the body and causing the overflow produces symptoms but this particular stress is not the underlying cause but “the straw that breaks the camel’s back”. The symptoms are usually the cumulative effect of a number of stressors building up over time. So, for example, someone with a wheat allergy might suffer from hay fever in the pollen season. The underlying cause, or biggest stressor, is wheat. The pollens are the added stress and, once the wheat allergy is removed, it is possible that they may no longer be a problem.
**Resistance** is the combined effect of the immune and detoxification systems. In the barrel analogy, it is the size of the barrel. Someone with a big barrel can hold a lot more stressors before it overflows. Where the total body load of ‘stressors’ exceeds the resistance, illness sets in. Another way of looking at this is shown in the graph below.

![Schematic Representation of the Total Body Load Concept](image)

Before eliminating some of this ‘load’, for example a central food such as wheat or dairy, we have the situation on the left: resistance is low and body load is high. After eliminating these foods, we have removed two major stressors, significantly reducing the TBL. In the following months we expect the resistance to continue to rise and the person to become less prone to infections such as winter flu.

Treatment, therefore, is based on removing the largest stressors first as this will bring down the total body load faster and, in most cases, the largest stressors are expected to be central foods rather than environmental allergens; for example, wheat rather than pollen.

If the person’s resistance is high, removal of just a few stressors will be all that is needed for the total load to fall below the resistance. A person with low resistance will need more stressors removing. Nutritional support can be used at the same time to strengthen resistance.
TARGET ORGAN CONCEPT

It has often been observed that one part of the body always receives more of an allergic reaction than the rest.

Keith Mumby

Whatever the environmental stressor, whether it is a food, a chemical, a hidden infection or some other insult to the tissues, the symptoms caused by this stressor will often appear at the weak point in the body. They are ‘referred’ to this organ, regardless of the actual trigger and the symptoms experienced will depend largely on the function of this organ and its state (excited - acute phase, or depressed - chronic condition). In theory, each person has an individual body load and therefore unique toxic signature, in practice, there are associations between stressors and diseases, for example, cow’s milk and asthma.

So, a particular allergy or intolerance, say dairy, attacking the lungs may cause asthma; in the bowel it will produce abdominal pain, bloating and maybe diarrhoea or vomiting; if the joints are the target then aching and stiffness may result; and in the head, headaches may occur.
GENERAL ADAPTATION SYNDROME

Any discussion of ‘allergens’ within the field of environmental medicine must include reference to Hans Selye’s hypothesis of stress adaptation. It is something widely accepted within the field of clinical ecology as it seems to agree not only with long-term, daily observations but also explains many of the experiences of both researchers and those who suffer from various symptoms and health issues.

Selye’s research, carried out over many years, led him to develop a model of stress and adaptation, which explained the disease process in human beings. Seyle concluded that a person’s ability to fight off disease was determined by how well they could adapt to the cumulative effects of any/all stresses they encounter. These toxic stressors include foods, infections, environmental factors, job pressures and emotional stress, to name just a few.

This stress can trigger a three-stage adaptation syndrome: The alarm stage; the adaption phase; and the exhaustion stage. The first phase, the “alarm” reaction, occurs when a person is exposed to one or a number of combined stressors. The body then reacts and, if strong enough, the stress is ‘resolved’ and homeostasis is re-established. If this doesn’t happen and the person continues to be exposed they will eventually ‘learn’ to adapt and will no longer have an obvious reaction. This is classed as the adaptation phase and the stress reaction becomes chronic. At this point it may seem that the stressor is no longer a problem but in fact this is now in the more dangerous “masked” reaction phase. In the final “exhaustion” phase the body’s defence systems are worn down and other “interfering factors” can have nearly limitless effects. Illness then develops and often the initial cause goes unrecognised.

So, for example, a baby who is introduced to cow’s milk at too early an age may experience an allergic reaction (for example colic). If the parents continue to include milk in the diet (thinking that the child ‘needs’ it and not knowing that it is in fact causing a problem) the child may ‘learn’ to tolerate it. At this stage, the ‘allergic’ symptoms will reduce or disappear. This, then, represents the “adaption” stage. It may be many years before the child moves into the final phase (with, say, just the occasional bouts of illness or digestive problems). But the body’s resistance is gradually wearing down and, finally, the reaction will reappear either with much more severe reactions similar to those first experienced, or, with one or more different problems, for example, migraine, eczema plus digestive problems.

1 Someone with a chronic problem will often find it almost impossible to identify the trigger food, as the acute reaction no longer occurs, having been replaced by one or more chronic conditions. In other words the reaction has become masked. This is illustrated very clearly in Herbert Rinkel’s story.

“If someone eats a certain food daily or almost daily he/she can be allergic to it without ever suspecting that particular food to be the cause of their symptoms. It is common that the person feels better having eaten the food than before its ingestion.”

Herbert Rinkel
This American physician recognised this phenomena when he experienced it first-hand.

As a medical student, with little money, his diet contained a great many eggs. His father, a farmer, supplied him with large quantities to help Rinkel out. During his time as a student Rinkel became increasingly unwell (esp. sinus and nasal catarrh). After reading a publication by Rowe, he decided his symptoms might be linked to eggs. To test his theory, he ate six eggs but didn’t suffer a reaction. In fact, he felt a little better. Rinkel then forgot his theory for another four years, when further study led him to try a different approach. Firstly, he eliminated eggs from his diet for a few days. At this point, he felt significantly better. Five days later, (his birthday) he ate some of his birthday cake and ten minutes later he was unconscious and remained so for several minutes. When he discovered there were three eggs in the cake he surmised that he had become hypersensitive to eggs. To test this, he repeated the process of abstaining for five days and then exposing himself to eggs. Again, he had a severe reaction. From this, he developed a test method to uncover ‘masked’ allergies. His elimination diet is still popular today.

2. Central allergens/intolerances are chronic and are often masked. 2. Symptoms usually diminish or disappear (after the initial worsening). 3. If the patient ingests the problem food within a certain period of time it can sometimes help to alleviate the symptoms. (1-3 days). 4. If the problem food is completely eliminated from the diet (or environment) for 3-4 days (Rinkel) then an acute reaction will occur when it is reintroduced.
CENTRAL FOODS

“Chronic allergies/intolerances are triggered by substances to which a person is exposed daily or often, or with which the body is in constant contact. (Reinhold Will p71)

When we talk about central allergies and intolerances we are no longer talking about acute reactions but the long-term effects of substances to which a person is frequently exposed. People who have a genetic predisposition often develop one or more chronic allergies in early childhood, reacting to a staple food (one ingested daily).

A reaction to cow’s milk is very common because it is usually the first foreign protein a baby is exposed to. Wheat follows closely behind. These two foods are by far the most important triggers for central allergies. They are virtually the only foods that Westerners have ingested daily since childhood and reactions are numerous and varied. Other allergens, other foods, pollens, animal hair etc. usually developed as a result of the body being under stress from these central strains.

ADDRESSING CENTRAL ALLERGENS

When first questioned, some clients may appear to be sensitive to a large number of strains. When this occurs a treatment plan to eradicate them all would take weeks, or months and may not even be possible. In such cases, eliminating the central, problem, foods first, often reduces the load sufficiently for the body’s self-regulation to deal with minor offenders.

If we view eradicating ‘allergens’ like trying to demolish a house, then knocking out the central ones is comparable to knocking out the cornerstones of a house. It is likely that the house will crumble from strategic hits. Likewise, the ‘allergic condition’ can be broken when central foods are eliminated.

It should always be remembered that central allergens could well be the foundation for the client’s developing history of ill health. Whilst a wheat allergy, for example, might not seem as serious as, say, a major infection, chemical exposure, or Candida, it is likely the basis from which the other problems occur. All allergies can weaken the immune response and, for this reason, the allergies considered central are of paramount importance.

The food types listed below, therefore, are the most common. Depending on environment, ethnicity, and personal preferences, however, the central food group is a movable feast. So, for example, when I started in practice (fifteen years ago, in England), salicylate was not a common problem for my clients. Working in Australia, where there are large groups of people from the Mediterranean, and where the availability and range of fruit and vegetables has always been plentiful, salicylate intolerance is almost as common as wheat and dairy.

1. Dairy: casein and less often lactose
2. Wheat
3. Gluten
4. Eggs
5. Sugar
Whilst anything we put in our mouth can be problematic in certain conditions, research indicates that wheat (gluten) and dairy (casein) cause the most problems. It seems likely that Dr Keith Mumby’s comments (see earlier) have validity and the reason is likely to be these two are significant factors in many serious autoimmune conditions.

Wheat is the greatest source of gluten in the Western diet and gluten, like cow’s milk protein (casein) it is a tough, sticky, large molecule substance which often presents problems to anyone with a weak digestive system. The presence of poorly digested proteins in the gut encourages inflammation and dysbiosis, causing the walls of the intestine to become more permeable and so allowing the undigested particles to pass into the blood stream. Here they attract antibodies and form circulating immune complexes (CIC’s) which trigger histamine and ‘intolerance’ reactions. These can occur anywhere in the body with the resultant linked symptom, for example, headache, skin reaction, fatigue etc.

In fact researcher Dr Nadya Coates’ studies have led her to conclude that many health problems are linked to gluten (and perhaps casein) because it’s sticky ‘nature’ means it can, and often does, encapsulate smaller molecules such as sugar, cholesterol, peroxidized fat molecules, or salts, which are then also transported into the blood stream before they are fully digested. Arriving at one or more of the body’s major organs they then become embedded in the organ tissue, blocking the passage of nutrients and oxygen. This has become especially problematic with gluten since gluten isn’t easily degradable and its molecular weight and density is so high that it can imitate human protein chains. Once lodged in body tissues mucus and large numbers of white blood cells are released to act as a defence and so degenerative and autoimmune conditions are likely.

CENTRAL FOODS: INTOLERANCE AND LINKED SYMPTOMS

In this final section I have listed the most common symptoms and illnesses linked to the central foods typical in our Western diet. It is important to note, however, that someone suffering from any of the central food intolerances/allergies may only experience one (or very few) of these symptoms at an early age. Later in life symptoms may move to a different target organ and the number and type of symptoms may also increase as more organs (and area of the body) are affected. Finally more serious, often autoimmune, conditions and illnesses will develop.

GENERAL SYMPTOMS THAT MAY BE ATTRIBUTABLE TO ALLERGIES

KEY SYMPTOMS

1. Over or under weight.
2. Persistent fatigue, not helped by rest.
3. Swelling around eyes, hands, abdomen, ankles etc.
4. Palpitations or speeded heart rate, particularly after meals.
5. Excessive sweating, not related to exercise.
OTHER SYMPTOMS

1. **Head:** headache; migraine; sick heads; solid feeling; pressure; throbbing; stiff neck; stabbing pain.
2. **Eyes:** redness; itching; blurred vision; sandy/grittiness; seeing spots; heavy eyes; seeing flashing lights; dark rings under eyes; periodic double vision; unnatural sparkle in eyes; watering.
3. **Ears:** ringing in ears; hearing loss; itching/redness of outer ear; recurring infections; earache.
4. **Cardiovascular:** rapid or irregular pulse; chest pain; palpitations after eating; tight chest; pain on exercise (angina); raised blood pressure.
5. **Lungs:** Tightness in chest; wheezing; hyperventilation; coughing; coughing; poor respiratory function.
6. **Nose/Throat/Mouth:** metallic taste; post-nasal drip; mouth ulcers; stuffed/blockered nose; frequent sore throats; sinusitis; stiffness of throat/tongue, sneezing.
7. **Gastro-intestinal:** nausea; diarrhoea; constipation; variable bowel function; abdominal bloating; flatulence; abnormal hunger pangs; acidity; pain in stomach; abdominal distress.
8. **Skin:** eczema; hives (urticaria); rash; excessive sweating; itching; blotches; chilblains.
9. **Musculoskeletal:** swollen, painful joints; aching muscles; muscular spasm; shaking, esp. on waking; cramps; fibrositis; pseudo-paralysis; arthritis.
10. **Genito-Urinary:** PMT; menstrual difficulties; frequency of urination; genital itch; bedwetting; urgency; burning urination.
11. **Nervous System:** inability to think clearly; memory loss; ‘dopey’ feeling; stammering attacks; terrible thought on waking; insomnia; maths/spelling errors; blankness; delusion; crabby on waking; hallucinations; difficulty waking; desire to self-injure; convulsions; light-headedness.
12. **Overactive Mental State:** silliness; anxiety; panic attacks; hyperactivity; irritability; rage; tenseness; restlessness; fidgeting; general speeding up; restless legs.
13. **Depressed Mental State:** brain fag; depression; feeling withdrawn; melancholy; lack of confidence; low mood; depersonalised feelings; confused; tearful.
14. **Other Symptoms:** sudden tiredness after eating; sudden chills after eating; vertigo; abrupt changes – well to unwell; feeling generally unwell ‘all over’; drained/exhausted;

CONDITIONS THAT MAY BE ATTRIBUTABLE TO ALLERGIES

As we have already discussed, if the body is overloaded with toxic stressors, illness occurs. Some condition, however, are directly related to allergies and below some of these are listed. This is not an exhaustive list, merely an indicator.
- Arthritis
- Asthma
- Brain Allergies (behaviour etc.)
- Chronic Fatigue
- Cystitis
- Hay Fever
- Hormonal Conditions
- Ear infections
- Headaches/migraines
- Intestinal Complaints
  - Irritable Bowel Disease
  - Crohn’s Disease
  - Colitis
- Sinusitis
- Skin Disorders

CENTRAL FOODS AND SYMPTOMS

DAIRY

“In our society, cow’s milk is the first foreign protein that an infant is confronted with”
(Reinhold Will, p72)

The most commonly used ‘milk’ products are:

1. Cow’s milk
2. Goat’s milk
3. Soy Milk
4. Rice Milk

Of these, cow’s milk is the most commonly consumed in Western society, and it is the culprit for many allergic symptoms as it contains both proteins and carbohydrates or sugars (lactose).

Lactose is a disaccharide of D-glucose and D-galactose and is found in any ‘mammalian’ milk, including human. Apart from the hereditary lactose deficiency (absence or inferior activity of lactase in the small intestine walls), acquired lactose intolerance may also occur when allergic mechanisms cause the intestinal villi to be damaged (for example from an allergic reaction to gluten). If someone is lactose intolerant it means they will have a problem with milk from any animal.

While lactose intolerance is widely credited as an allergy, most often it is the milk protein that causes problems. Consuming reduced-fat milks increase this problem, as there is a higher content of protein without fats. A milk protein allergy may appear at any age but usually occurs within the first few months of life, and symptoms can include:
Babies/Infants

- Crying excessively
- Cradle cap
- Colic
- Vomiting (including other gastro-intestinal symptoms)
- Wheezing and other breathing problems
- Skin irritations
- Loose stools
- Ear infections (otitis media)
- Nasal secretions (thick, mucus type)
- Sleep disorders

Older Children/Adults

- Asthma
- Sinusitis
- Various intestinal complaints (Crohn’s, colitis, IBS etc)
- Migraines
- Hives/eczema/psoriasis etc
- Anaphylaxis

Symptoms of lactose intolerance can include those listed above but commonly include:

- Swollen or enlarged abdomen
- Stomach pain
- Excessive gas
- Diarrhoea

Skin rashes attributable to a milk allergy are evident:

- Firstly on the face and head- (wet and scabby – cradle cap)
- Secondly progress to stomach and back and extremities
- In the creases of elbows and behind the knees.

WHEAT

“Wheat is generally the second foreign protein with which the baby is confronted. An allergy exists to the protein found in wheat, and usually appears in the second year of life.”

(Reinhold Will p 72)

After dairy, wheat is the second foreign protein most people in the Western world are exposed to. It is a plant that has been manipulated and altered more than any other food product and this over-cultivation has led to an increase in allergen potency. This is borne out
by the fact that reactions to *Triticum Spelta* (spelt flour), the original form of wheat, are much rarer.

In the nineteenth century (and earlier) wheat products were not the staple of most people’s diets. Breakfast consisted of oats or proteins such as eggs, and one or more forms of meat. Lunch, for most, was a hot meal (stew, meat and vegetables etc) and the evening meal (or supper) may have included bread but for most this wasn’t the highly refined loaves of the present day. Cakes, pastries, and sweets containing wheat were few and far between for most and the modern practice of using wheat as a filler or thickener was unheard of. Today, it is not uncommon to have wheat as part of every meal consumed, either in the form of bread, pasta, pizza, pies, pastries cakes etc. or as part of the many processed and takeaway meals that are common to many peoples’ diets. Symptoms of wheat intolerance may include:

**Babies/Infants**

- Crying excessively
- Colic
- Vomiting (including other gastro-intestinal symptoms)
- Skin irritations
- Loose stools

**Older Children/Adults**

- Hay fever and sinus problems (wheat is a grass)
- Diarrhoea / Constipation
- Gastro-intestinal complaints (Crohn’s, colitis, IBS etc)
- Skin irritations including hives /eczema/psoriasis etc
- Anxiety/restlessness/various behavioural problems
- Arthritis

**Skin rashes attributable to a wheat allergy include:**

- Dry and scaly, infected due to scratching
- On the face (eye area, mouth and neck)
- Outside of the arms above and below elbows, back of hands, on toes.

*(Reinhold Will p72)*

Many people reactive to wheat are also reactive to its close relatives, barley, rye, and oats. This is likely to be linked to ethnic factors. For example, wheat for Western Europeans but oats in Scotland and Scandinavia, rye in Eastern Europe.

**GLUTEN**

Gluten is a mixture of individual proteins found in wheat, classified into two groups, Prolamines and Glutelins.
As already discussed, gluten is a very tough, sticky substance and like cow’s milk protein, egg protein and yeast, it can present problems for a weak digestion. The frequent presence of poorly digested gluten in the gut encourages gut inflammation and dysbiosis, which makes the intestinal wall more permeable to the undigested particles. These then enter the bloodstream and attract antibodies, forming circulating immune complexes (CICs). CICs trigger histamine release and consequent “allergic” reactions known as food intolerances. These can take place anywhere in the body, resulting in digestive problems, hyperactivity, headaches, fatigue, skin reactions, kidney inflammation and so on.

Coeliac disease, the most well-known condition caused by a gluten allergy, occurs when the target organ is the small intestine. It results in a malabsorption syndrome, which damages the lining of the small intestine. Regarded as a ‘true’ allergy by Western medicine, it develops because of a reaction to a particularly tough protein fraction known as gliadin found in gluten. This fraction consists largely of a specific combination of the amino acids glutamine and proline. An especially destructive type of chronic inflammation results from gliadin allergy, which reduces the height of the folds (called ‘villi’) and hence the absorption area for nutrients. Eventually the mucosal cells (microvilli) are destroyed leading to chronic diarrhoea containing undigested food particles.

Coeliac disease is also associated with a variety of autoimmune disorders, carcinomas of the gastrointestinal tract and lymphomas. Severe effects of gluten/gliadin allergy, however, are apparently not restricted to the gut and some coeliacs also suffer from mental and neurological problems, including schizophrenia. Dr William Philpott (author of Brain Allergies) found gluten allergy to be highly addictive and present in two-thirds of his schizophrenic patients. It is also associated with many less serious mental and neurological disorders such as ADHD. In these cases, it is the brain that is the target organ, rather than the small intestine.

Whilst the gut, and increasingly the brain are seen as target areas associated with gluten, any area of the body can be affected, depending on the particular patient and interestingly, new research has discovered that gluten has been shown to affect thyroid function.

**OTHER SYMPTOMS**

**In general, symptoms are very similar to those listed for wheat.**

From our own experience in our clinic we have also noticed other indicators of wheat (+ gluten) and dairy (casein). These are listed below. **It is important to stress the list comes from our own experience and not from clinical trials.**

**SIMPLY: WHEAT INFLAMES, DAIRY CLOGS.**

**Digestion:**
**Wheat:** Bloating soon after eating. Pain, which comes and goes in waves. Diarrhoea / constipation / irregular bowel movements.

**Dairy:** Feeling full/heavy/food doesn’t feel as if it’s been digested. Uncomfortable rather than painful. Irregular bowel movements / constipation / diarrhoea.
Breathing:
**Wheat:** Susceptibility to lung infections, colds etc. Painful sinuses, sore, runny itchy eyes, runny nose, and sneezing.
**Dairy:** Asthma, ear infections, blocked nose, swollen and painful sinuses.

Head:
**Wheat:** Anxiety through to ADHD (esp. if gluten is involved).
**Dairy:** Heavy, sick headaches and migraines.

Skin:
Wheat: See appropriate section for areas affected.
Dairy: See appropriate section for areas affected.

Body:
**Wheat:** Causes inflammation of joints and will often lead to osteoarthritis in later life.
**Dairy:** General feeling of heaviness, lethargy and sometimes muscle aches / pains.

**EGG**

“One of the most common causes of food allergy in infants and young children is the egg.”
*(Reinhold Will p 73)*

It seems to be that egg yolk is only rarely involved in an allergic reaction. Commonly it is the white of an egg that is problematic and there is, therefore, a discrepancy between IgE proof and allergic reactions. Investigations with babies have shown that immuno-globulins against egg white may be formed at a very early age. In many cases, however, this antibody remains dormant. Once a patient has developed a reaction to egg white, the reaction can be very strong (even anaphylactic). Contact-allergic reactions are also common, including swollen lips/mucous membranes in the mouth and throat.

**Major symptoms include:**

- Allergic rhinitis
- Asthma
- Dermatitis
- Diarrhoea
- Gastrointestinal symptoms
- Vomiting
- Hives
- Wheezing,
- Nausea
- Anaphylaxis

**NOTE:** Many foods contain egg derivatives, which can sometimes be labelled as binder, emulsifier, and lecithin (sometimes made with egg yolk). Some vaccines are grown on eggs and an egg allergy can be an indication of a reaction to an early vaccination.
SUGAR (SUCROSE/FRUCTOSE/GLUCOSE)

Refined sugar (sucrose) is a disaccharide of D-glucose and D-fructose extracted from cane or sugar beet. During the nineteenth century it was seen as an expensive product imported from Asia. Now, due to the ever-increasing over-consumption, it poses a serious problem to our health. Most people will agree that sugar can be harmful if eaten in large quantities, particularly with its links to diabetes. Its role as an allergen, however, is still open to debate. Nevertheless, it does seem that some individuals (particularly children) do ‘react’ to sucrose. Others react to the glucose component of sucrose and since glucose is the end product of carbohydrate metabolism in the body, a reaction to glucose may be interpreted as an indicator of carbohydrate intolerance.

It is important to realize that whilst eating large quantities of refined sugar causes problems, problems can also occur with the ‘healthier’ sugar, fructose. This problem has increased with the over-consumption of fruit juice and the availability of fruits of all kinds. In North America the artificial sweetener, high fructose corn syrup (HFCS) is widely used. Some people will only react to fructose. This is because these people have replaced refined sugars and fizzy drinks with high-sugar fruits (including dried fruits) and fruit juice. They believe that in replacing the refined sugar with a natural one they are making healthy choices but sugar is sugar and too much in the diet can lead to health problems. Fruit juice can be particularly bad as one glass contains a great deal of sugar. Fructose is responsible for the creation of visceral fat (around the abdomen), which causes a number of health problems including insulin resistance.

Major symptoms include:

● Associated with behavioural problems, particularly hyperactivity, ADHD etc.
● Skin irritations, itchy skin which, when scratched, will lead to neurodermatitis.
● Fatigue
● Depression and muddled thinking
● Any inflammatory condition. Symptoms dependant on target organ. EG. Head: runny nose, itchy red eyes, nasal drip, sneezing etc.

YEAST

Yeast allergies are often related to Candida, fungus and mould allergies and yeast should be suspected when patients have skin rashes and swelling (localized or general) and digestive problems either minor, or the more severe dysbiosis type problems.

Yeast can be broken down into two categories, bakers’ yeast and brewers’ yeast. Bakers’ is used as an aid in the cooking of bread, buns, biscuits, and cakes etc. As well as being used in beer production, brewer’s yeast is also used in certain supplements. As with many food intolerances, some people go through life feeling the discomfort but not knowing the cause and yeast can be difficult to detect as it has similar symptoms to other foods such as wheat.
Symptoms of a yeast allergy can include:

- Fatigue
- Constipation/diarrhoea
- Digestive problems including pain, bloating etc
- Depression
- Dizziness
- Fuzzy head, unable to think clearly
- Muscle and joint pain
- Skin rashes, hives etc

SALICYLATE

“The trouble with fruit and other natural foods is that they were not designed to be the perfect foods for humans. It is easy to forget that fruits are primarily the sexual organ of plants. All plants contain hundreds of natural chemicals, some of which can cause unfortunate reactions.” (Sue Dengate , p133)

This statement is controversial because Linus Pauling maintained that we evolved as fruit eaters, which is why today we require supplementation of vitamin C for optimum health. Probably the truth is that as hunter gatherers we ate ripe foods in season and ate widely from the food chain and so avoided the overindulgence of a few favourite foods made possible by today’s farming and distribution systems. This system has also led to many of our fruit and vegetables being sold and consumed before they are ripe, which means they have much higher salicylate content and so are more likely to cause problems than in past times. A salicylate heavy menu roughly equates with the Mediterranean diet of tomatoes, olives, zucchini, capsicum, etc. and traditionally, salicylate sensitivity is commonly associated with people from Southern Europe. As already stated, however, changes in the eating patterns in the colder European countries, means that this is becoming a more widespread problem.

Salicylates are chemicals found in plants, the best-known form of which is aspirin, originally from willow bark (botanical name *Salix*) and problems with this food group are usually classed as a “pseudo-allergy”. This means it is a quantitative rather than qualitative phenomenon. Unlike the other forms of allergy, a reaction occurs only when a certain amount of the triggering allergen is reached. The critical factors are the individuals’ sensitivity and the total amount of the substance which is often supplied in different foods and in varying chemical composition.

So, for example, foods containing salicylate: Stone fruit, almonds, strawberries, raspberries, blackberries, blackcurrants, grapes, oranges, lemons, bananas, rhubarb, peas, vinegar, wine, beer, etc. can be tolerated until a certain quantity is consumed over a specific period of time. The amount needed to trigger the reaction varies from person to person, as does the period of time critical to the quantity consumed. The list of foods, most of which we could consider to essential in a healthy diet is extremely wide and people suffering from salicylate problems will be unable to completely eliminate them from their diet. In these cases it is recommended that the person should eat more widely from the groups of foods which have a low salicylate
content, limiting themselves to only small quantities (eaten separately) of foods with the highest salicylate content. They should also avoid under-ripe fruit and vegetables.

**Symptoms attributable to a salicylate allergy may include:**

- Hyperactivity in children
- Painful joints
- Heartburn and Reflux
- Digestive problems, esp. pain
- Asthma
- Headaches
- Nausea
- Tinnitus
- Sinus problems and hay fever
- Skin irritations

It is clear from the symptoms and illnesses listed above that central allergens are a major problem. Therapists aim to reduce the “barrel’s” load and central allergens should be considered as the most significant, long-standing, and causing the most damage. By eliminating these toxic allergens we are able to give our clients the most effective and long-term help in regaining and maintaining health and we can do it in the most efficient way.

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## APPENDIX TWO

### CENTRAL FOODS AND ALTERNATIVES

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<tr>
<th>FOOD</th>
<th>ALTERNATIVES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WHEAT</strong>&lt;br&gt;White and brown bread, wheat germ, cakes, biscuits, pasta, cereals, most whisky, bitter beers etc.</td>
<td>All the above products can be made with other flours such as: corn, maize, rice, oats, soya, potato, buckwheat, rye with Spelt flour the best for bread and corn for pasta.</td>
</tr>
<tr>
<td><strong>GLUTEN</strong>&lt;br&gt;Anything made from wheat, rye, barley, oats, Spelt flour. Bread, pasta, whisky, beer etc.</td>
<td>Rice, millet, buckwheat, potato, sweet potato, corn (unless allergic to salicylate).</td>
</tr>
<tr>
<td><strong>COW’S MILK</strong>&lt;br&gt;Cheese, yoghurt, cream, butter, custards, cakes, Milo, Ovaltine, Horlicks, powdered milk (cow’s), ice cream, butter, margarines, dairy chocolate, mayonnaise and lactose tablets.</td>
<td>Soya milk, oat milk, rice milk, coconut milk. Sheep’s and goat’s milk are good alternatives but in some cases sensitivity to other animal milk occurs following introduction particularly with young children.</td>
</tr>
<tr>
<td><strong>LACTOSE</strong>&lt;br&gt;All dairy products including goat/sheep.</td>
<td>Soya, oat milk, rice milk, coconut products.</td>
</tr>
<tr>
<td><strong>EGGS</strong>&lt;br&gt;Any foods made with eggs such as: cakes, quiches, custards, egg white and meringues.</td>
<td>Whole egg replacers or egg white if appropriate.</td>
</tr>
<tr>
<td><strong>YEAST</strong>&lt;br&gt;All forms of yeast in bread, cakes, alcohol etc.</td>
<td>Soda bread (yeast and sugar free), fresh food as much as possible, all alcohol be avoided, filtered water and also Chapattis are OK.</td>
</tr>
<tr>
<td><strong>CORN/MAIZE</strong>&lt;br&gt;Corn cereals, corn bread, corn snacks (Tortilla chips), crisps cooked in corn oil (Pringles), popcorn, gravy mix, cornflour, sweet corn and sauces (HP brown sauce). May also be found in talcum powder, toothpaste and back of envelopes and stamps.</td>
<td>Wheat or Arrowroot for thickening gravy. (no licking stamps and envelopes).</td>
</tr>
</tbody>
</table>

*Please note when uncovering a masked food allergy you must look at all food labels of all products you buy in order to be sure you have not inadvertently eaten some of the product you are abstaining from.*

*If box is ticked, avoid that food and use the alternatives*
APPENDIX 3 “Own Programs” for the Optima

Here’s a list of programs we find useful and how to put them into the Optima. Listed is the starting program that you can modify (easier than making the program from scratch), the changes to make and the final number and name they are stored under.

<table>
<thead>
<tr>
<th>Program Number and Name</th>
<th>Start Program</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1149 infection calming</td>
<td>199</td>
<td>change time to 8 min</td>
</tr>
<tr>
<td>1049 LDF infection calming</td>
<td>3131</td>
<td>Change Ai to Di, set Di = 64</td>
</tr>
<tr>
<td>1043 Liver sweep</td>
<td>430</td>
<td>select “SW increase (3)”, Ai=10,</td>
</tr>
<tr>
<td>Sweep speed =8, time=6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1048 Kidney sweep</td>
<td>480</td>
<td>select “SW increase (3)”, Ai=32,</td>
</tr>
<tr>
<td>Sweep speed =8, time=6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1097 Toxin elimination sweep</td>
<td>970</td>
<td>select “SW increase (3)”, Di=10, Sweep speed =8, time=6</td>
</tr>
<tr>
<td>1003 Ear allergy first</td>
<td>993</td>
<td>select “SW increase (3)”, Ai=64,</td>
</tr>
<tr>
<td>Sweep speed =8, time=2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1004 Ear allergy second</td>
<td>994</td>
<td>select “SW increase (3)”, Ai=64,</td>
</tr>
<tr>
<td>Sweep speed =8, time=2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1000 Adrenal calming</td>
<td>128</td>
<td>change Di to 0.25</td>
</tr>
<tr>
<td>1091 Strain test lowest</td>
<td>191</td>
<td>Ai = 0.025, t=30</td>
</tr>
<tr>
<td>1033 Deblock basic attenuate</td>
<td>133</td>
<td>change Ai to 1.0, A to 0.5</td>
</tr>
<tr>
<td>1133 Deblock basic pain</td>
<td>133</td>
<td>select “without bandpass (4)”. This is what was called “all frequencies” on BICOM 2000. Time = 10 min.</td>
</tr>
<tr>
<td>1030 Lymph or bowel sweep</td>
<td>930</td>
<td>change to “A+Ai”, A=32, Ai=64, Freq = 270Hz, SW Increase, Sweep speed =8, time=6</td>
</tr>
</tbody>
</table>

Sequences we have stored

40001 Staying Healthy 1049, 1149,,1097,,1043 (two commas means a pause to let you change electrodes)

40049 Infection Calming 3013,1049,1149. (3013.0 is “regulating strain from pathogens”)

Supporting Pages in the Optima Manual Quick Start Guide

Sequences pp46-50
 Naming programs p50
 Changing programs pp58-63. The screen at the bottom of p63 lets you check all the parameters before saving under a new number.

Example, step by step – 1043
 Enter 430. “5” to change. At amplification preferences choose SW increase. Ai=10. SW speed =8. Time=6. Press 4 to save. Enter 1043 at the “number” screen and press full stop to get the “name” screen. Using SMS typing (see p 50) enter “Liver” then zero twice to get a space then “sweep”.
 After entering programs they will show under “Own Programs”. If you want to delete just one because you made a mistake, go to own programs and delete it from there. If you try to delete from preferences = 9 in the main screen it will delete ALL your programs.
Symmetrical Amplification Sweep Programs based on Sissi Karz experience (published in Fulda papers)

<table>
<thead>
<tr>
<th>Program Number and Name</th>
<th>Start Program</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1153 Laterality sym sweep</td>
<td>535</td>
<td>select sym sweep, sweep speed 44 sec.</td>
</tr>
<tr>
<td>time = 8 min. Can also be used in place of 530 programs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1143 Liver sym sweep</td>
<td>430</td>
<td>select sym sweep, sweep speed 44 sec.</td>
</tr>
<tr>
<td>Ai=10, time = 8 min</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1148 Kidney sym sweep</td>
<td>480</td>
<td>select sym sweep, sweep speed 44 sec.</td>
</tr>
<tr>
<td>Ai=30, time = 8 min</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1197 Toxin sym sweep</td>
<td>970</td>
<td>select sym sweep, sweep speed 44 sec.</td>
</tr>
<tr>
<td>Ai=10, time = 8 min</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1010 Scars sym sweep</td>
<td>910</td>
<td>select sym sweep, sweep speed 33 sec.</td>
</tr>
<tr>
<td>Ai=1.75, time = 6 min</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1172 Radiation sym sweep</td>
<td>702</td>
<td>select sym sweep, sweep speed 44 sec.</td>
</tr>
<tr>
<td>Di=10, time = 6 min</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1034 Hypothyroid sym sweep</td>
<td>934</td>
<td>select sym sweep, sweep speed 28 sec.</td>
</tr>
<tr>
<td>Ai=12, time = 5 min</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1100 Vitality sym sweep</td>
<td>900</td>
<td>select sym sweep, sweep speed 40 sec.</td>
</tr>
<tr>
<td>Di=4.0, time = 5 min</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Some Low Deep Frequency (LDF) Detox Programs (already in the Optima)

3028 Large Intestine
3036 Regulate Detox
3041 or 3042 Skin/mucosal
3063 Liver
3064 Liver/Gall Bladder
3066 Lymph
3078, 3079 or 3080 Kidney
<table>
<thead>
<tr>
<th>Allergy (pollen + other forms)</th>
<th>Musculoskeletal system</th>
</tr>
</thead>
<tbody>
<tr>
<td>_ Spring pollen allergy</td>
<td>_ Polyarthritis</td>
</tr>
<tr>
<td>_ House dust allergy</td>
<td>_ Rheumatism (soft tissue)</td>
</tr>
<tr>
<td>_ Dog hair allergy</td>
<td>_ Ruptured tendon</td>
</tr>
<tr>
<td>_ Cat hair allergy</td>
<td>_ Tendovaginitis</td>
</tr>
<tr>
<td>_ Summer pollen allergy</td>
<td>_ Tennis elbow</td>
</tr>
<tr>
<td>_ Heat allergy</td>
<td>_ Injury acute/bloody</td>
</tr>
<tr>
<td>_ Allergy to the cold</td>
<td>_ Tension</td>
</tr>
<tr>
<td>_ Leather allergy</td>
<td>_ Strain</td>
</tr>
<tr>
<td>_ Sun allergy</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Eyes</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>_ Ablation (retinal detachment)</td>
<td></td>
</tr>
<tr>
<td>_ Glaucoma</td>
<td></td>
</tr>
<tr>
<td>_ Cataract (grey cataracts)</td>
<td></td>
</tr>
<tr>
<td>_ Conjunctivitis, allergic</td>
<td></td>
</tr>
<tr>
<td>_ Conjunctivitis, purulent</td>
<td></td>
</tr>
<tr>
<td>_ Conjunctivitis, hormonal</td>
<td></td>
</tr>
<tr>
<td>_ Conjunctivitis, viral</td>
<td></td>
</tr>
<tr>
<td>_ Macular degeneration</td>
<td></td>
</tr>
<tr>
<td>_ Retinal infarct</td>
<td></td>
</tr>
<tr>
<td>(hemorrhaging)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Bacteria</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>_ Anaerobic bact.</td>
<td></td>
</tr>
<tr>
<td>_ Borrelia</td>
<td></td>
</tr>
<tr>
<td>_ Diphtheria</td>
<td></td>
</tr>
<tr>
<td>_ Suppuration, local</td>
<td></td>
</tr>
<tr>
<td>_ Erysipelas</td>
<td></td>
</tr>
<tr>
<td>_ Escherichia coli</td>
<td></td>
</tr>
<tr>
<td>_ Gaseous gangrene</td>
<td></td>
</tr>
<tr>
<td>_ Gonorrohea</td>
<td></td>
</tr>
<tr>
<td>_ Helicobacter</td>
<td></td>
</tr>
<tr>
<td>_ Leprosy</td>
<td></td>
</tr>
<tr>
<td>_ Syphilis</td>
<td></td>
</tr>
<tr>
<td>_ Proteus mir.</td>
<td></td>
</tr>
<tr>
<td>_ Dysentery</td>
<td></td>
</tr>
<tr>
<td>_ Salmonella</td>
<td></td>
</tr>
<tr>
<td>_ Serratia</td>
<td></td>
</tr>
<tr>
<td>_ Staph. aureus</td>
<td></td>
</tr>
<tr>
<td>_ Streptococci</td>
<td></td>
</tr>
<tr>
<td>_ Streptococci, haem.</td>
<td></td>
</tr>
<tr>
<td>_ Tuberculosis</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dermatology</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>_ Acne rosacea</td>
<td></td>
</tr>
<tr>
<td>_ Common acne</td>
<td></td>
</tr>
<tr>
<td>_ Alopecia</td>
<td></td>
</tr>
<tr>
<td>_ Eczema, allergic</td>
<td></td>
</tr>
<tr>
<td>_ Epidermolysis bullosa</td>
<td></td>
</tr>
<tr>
<td>_ Skin atrophy</td>
<td></td>
</tr>
<tr>
<td>_ Hyperhidrosis</td>
<td></td>
</tr>
<tr>
<td>_ Neurodermatitis</td>
<td></td>
</tr>
<tr>
<td>_ Psoriasis</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Electronic smog</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>_ E-Smog 100 MHz</td>
<td></td>
</tr>
<tr>
<td>_ E-Smog 133 MHz</td>
<td></td>
</tr>
<tr>
<td>_ E-Smog 25 MHz</td>
<td></td>
</tr>
<tr>
<td>_ E-Smog analogue mobile network</td>
<td></td>
</tr>
<tr>
<td>_ E-Smog GSM 1800 MHz E (mobile) network</td>
<td></td>
</tr>
<tr>
<td>_ E-Smog GSM 900 MHz D (digital) network</td>
<td></td>
</tr>
<tr>
<td>_ E-Smog HAARP project</td>
<td></td>
</tr>
<tr>
<td>_ E-Smog power lines</td>
<td></td>
</tr>
<tr>
<td>_ E-Smog microwave</td>
<td></td>
</tr>
<tr>
<td>_ E-Smog satellite dish antenna</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Endocrine system</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>_ Acromegaly</td>
<td></td>
</tr>
<tr>
<td>_ Diabetes</td>
<td></td>
</tr>
<tr>
<td>_ Diabetes insipidus</td>
<td></td>
</tr>
<tr>
<td>_ Hormone deficiency ovary</td>
<td></td>
</tr>
<tr>
<td>_ Hypercorticism</td>
<td></td>
</tr>
<tr>
<td>_ Hypertestosteronism</td>
<td></td>
</tr>
<tr>
<td>_ Hyperthyroidism</td>
<td></td>
</tr>
<tr>
<td>_ Hypoglycaemia</td>
<td></td>
</tr>
</tbody>
</table>
### Musculoskeletal system
- Arthritis
- Arthrosis
- Degenerative process in intervertebral disks
- Dupuytren's contracture
- Suppuration, local
- Ganglion
- Carpal tunnel syndrome (CTS)
- Bone fracture
- Bone healing
- Muscular pain
- Scar (skin/organ)
- Scar (bone)

### Vessels
- Arteriosclerosis
- Lymphangitis
- Swollen lymph nodes
- Lymphostasis
- Lymph pharynx
- Phlebitis
- Thrombosis
- Ulcus cruris

### Geopathy
- Feng Shui (spatial orientation)
- Geopathy horizontal disruption PWL (plant growth laser)
- Geopathy deep crevice (GP72)
- Geopathy mineral-bearing water
- Geopathy watercourse
- Gravitational anomaly

### Goodies
- Build up elderly male
- Build up elderly female
- Energetic boost
- Energetic boost nerves
- Vit. A C E B + Omega fatty acids
- Vitamins circulation

### ENT
- Loss of hearing, concomitant
  - Laryngitis
  - Otitis media acute
  - Otitis media chron.
  - Pollinosis (hay fever)
  - Frontal sinusitis, acute
  - Frontal sinusitis, chron.
  - Maxillary sinusitis, acute
  - Maxillary sinusitis, chron.
  - Tinnitus
  - Tonsillitis acute
  - Tonsillitis chron.

### Jaw
- Amalgam contamination (deposits)
- Amalgam contamination (filling)
- Gangrene granuloma
- Gangrenous pulp
- Foci of the jaws
- Osteosclerosis of the jaw
- Periodontosis
- Pulpitis

### Bone marrow/ blood
- Anaemia
- Immunodeficiency
- Leukopenia
- Leukocytes autoimmune (leucosis)
- Thrombocytopenia
<table>
<thead>
<tr>
<th>Gynaecology</th>
<th>Liver</th>
</tr>
</thead>
<tbody>
<tr>
<td>_ Adnexitis acute</td>
<td>_ Gallstone colic</td>
</tr>
<tr>
<td>_ Adnexitis chron.</td>
<td>_ Gallstones</td>
</tr>
<tr>
<td>_ Amenorrhoe</td>
<td>_ Hepatitis A</td>
</tr>
<tr>
<td>_ Endometriosis</td>
<td>_ Hepatitis B</td>
</tr>
<tr>
<td>_ Hormone deficiency ovary</td>
<td>_ Hepatitis C</td>
</tr>
<tr>
<td>_ Menopausal symptoms</td>
<td>_ Hepatosis</td>
</tr>
<tr>
<td>_ Mastopathy</td>
<td>_ Liver autoimmune</td>
</tr>
<tr>
<td>_ Myoma</td>
<td>_ Steatosis</td>
</tr>
<tr>
<td>_ Oestrogen deficiency</td>
<td></td>
</tr>
<tr>
<td>_ Ovarian cysts</td>
<td></td>
</tr>
<tr>
<td>_ Progesterone deficiency</td>
<td></td>
</tr>
<tr>
<td>_ Periods, irregular</td>
<td></td>
</tr>
<tr>
<td>_ Period pain</td>
<td></td>
</tr>
<tr>
<td>_ Infertility</td>
<td></td>
</tr>
<tr>
<td>_ Vaginitis</td>
<td></td>
</tr>
<tr>
<td>_ Labour, premature</td>
<td></td>
</tr>
<tr>
<td>_ Poor contractions, stillbirth</td>
<td></td>
</tr>
<tr>
<td>_ Cervicitis</td>
<td></td>
</tr>
<tr>
<td>_ Intracyclic menstrual bleeding</td>
<td></td>
</tr>
<tr>
<td>_ Cardiovascular system</td>
<td></td>
</tr>
<tr>
<td>_ Stenocardia, concomitant</td>
<td>_ Asbestosis</td>
</tr>
<tr>
<td>_ Arrhythmia</td>
<td>_ Asthma</td>
</tr>
<tr>
<td>_ Arteriosclerosis</td>
<td>_ Bronchitis chron.</td>
</tr>
<tr>
<td>_ Bradycardia</td>
<td>_ Bronchitis putrid</td>
</tr>
<tr>
<td>_ Cardiac insufficiency</td>
<td>_ Emphysema</td>
</tr>
<tr>
<td>_ Hypertension</td>
<td>_ Cough</td>
</tr>
<tr>
<td>_ Hypotension</td>
<td>_ Pulmonary infiltrate</td>
</tr>
<tr>
<td>_ Risk of infarction</td>
<td>_ Pneumonia</td>
</tr>
<tr>
<td>_ Cardiovascular stress</td>
<td></td>
</tr>
<tr>
<td>_ Tachycardia</td>
<td></td>
</tr>
<tr>
<td><strong>Gastro-intestinal and pancreatic complaints</strong></td>
<td></td>
</tr>
<tr>
<td>_ Appendicitis, chronic, concomitant</td>
<td>_ Ac (actinium) deficiency</td>
</tr>
<tr>
<td>_ Ulcerative colitis</td>
<td>_ Ar (argon) deficiency</td>
</tr>
<tr>
<td>_ Improving intestinal flora</td>
<td>_ As (arsenic) deficiency</td>
</tr>
<tr>
<td>_ Small intestine autoimmune</td>
<td>_ Au (gold) deficiency</td>
</tr>
<tr>
<td>_ Duodenitis</td>
<td>_ B (boron) deficiency</td>
</tr>
<tr>
<td>_ Intestinal dysbacteria</td>
<td>_ Ba (barium) deficiency</td>
</tr>
<tr>
<td>_ Gastritis acute</td>
<td>_ Br (bromine) deficiency</td>
</tr>
<tr>
<td>_ Gastritis chron.</td>
<td>_ Ca (calcium) deficiency</td>
</tr>
<tr>
<td>_ Gastro-intestinal colic</td>
<td>_ Ce (cerium) deficiency</td>
</tr>
<tr>
<td>_ Pancreas autoimmune</td>
<td>_ Cu (copper) deficiency</td>
</tr>
<tr>
<td>_ Pancreatic insufficiency</td>
<td>_ Dy (dysprosium) deficiency</td>
</tr>
<tr>
<td>_ Pancreatitis acute</td>
<td>_ F (fluorine) deficiency</td>
</tr>
<tr>
<td>_ Lungs</td>
<td>_ Fe (iron) deficiency</td>
</tr>
<tr>
<td>_ Gallstone colic</td>
<td>_ Ga (gallium) deficiency</td>
</tr>
<tr>
<td>_ Gallstones</td>
<td>_ Ge (germanium) deficiency</td>
</tr>
<tr>
<td>_ Hepatitis A</td>
<td>_ He (helium) deficiency</td>
</tr>
<tr>
<td>_ Hepatitis B</td>
<td>_ Hf (hafnium) deficiency</td>
</tr>
<tr>
<td>_ Hepatitis C</td>
<td>_ In (indium) deficiency</td>
</tr>
<tr>
<td>_ Hepatosis</td>
<td>_ J (iodine) deficiency</td>
</tr>
<tr>
<td>_ Liver autoimmune</td>
<td>_ K (potassium) deficiency</td>
</tr>
<tr>
<td>_ Steatosis</td>
<td>_ La (lanthanum) deficiency</td>
</tr>
<tr>
<td>_ Mineral balance</td>
<td>_ Li (lithium) deficiency</td>
</tr>
<tr>
<td>_ Ac (actinium) deficiency</td>
<td>_ Lu (lutetium) deficiency</td>
</tr>
<tr>
<td>_ Ar (argon) deficiency</td>
<td>_ Mg (magnesium) deficiency</td>
</tr>
<tr>
<td>_ As (arsenic) deficiency</td>
<td>_ Mn (manganese) deficiency</td>
</tr>
<tr>
<td>_ Au (gold) deficiency</td>
<td>_ Mo (molybdenum) deficiency</td>
</tr>
<tr>
<td>_ B (boron) deficiency</td>
<td>_ Na (sodium) deficiency</td>
</tr>
<tr>
<td>_ Ba (barium) deficiency</td>
<td>_ Nb (niobium) deficiency</td>
</tr>
</tbody>
</table>
### Pancreatitis chron.
- Irritable bowel
- Roemheld’s synd.
- Gastric/ duodenal ulcer

### Mineral balance
- Ag (silver) contamination
- Al (aluminium) contamination
- As (arsenic) contamination
- Au (gold) contamination
- Be (beryllium) contamination
- Bi (bismuth) contamination
- Br (bromine) contamination
- C (carbon) contamination
- Ca (calcium) contamination
- Cd (cadmium) contamination
- Cl (chlorine) contamination
- Co (cobalt) contamination
- Cs (caesium) contamination
- Cu (copper) contamination
- F (fluorine) contamination
- H (hydrogen) contamination
- Hg (mercury) contamination
- J (iodine) contamination
- K (potassium) contamination
- Mg (magnesium) contamination
- Mn (manganese) contamination
- Mo (molybdenum) contamination
- N (nitrogen) contamination
- Na (sodium) contamination
- Nd (neodymium) contamination
- Ni (nickel) contamination
- P (phosphorus) contamination
- Pb (lead) contamination
- Pd (palladium) contamination
- Pt (platinum) contamination
- Rd (radon) contamination
- S (sulphur) contamination
- Sn (tin) contamination
- Sr (strontium) contamination
- Ta (tantalum) contamination
- Te (tellurium) contamination
- Ti (titanium) contamination
- Tl (thallium) contamination

### Neurology
- Alzheimer's
- Epilepsy
- Muscular dystrophy
- Myelitis
- Neuralgia (e.g. sciatica)
- Neurohormone deficiency
  - female
- Neurohormone deficiency
  - male
- Parkinson's
- Stress
- Wegener's granulomatosis

### Environmental toxins
- Bromophos contamination
- Caprolactam contamination
- Chlormequat contamination
- Chromium contamination
- DDT contamination
- Diazinon contamination
- Dieldrin contamination
- Dimethoate contamination
- Formaldehyde contamination
- Hexamethylene diamine contamination
- Hydrazine sulphate contamination
- Cadmium contamination
- Copper contamination
- Palladium contamination
- Pentachlorophenol (PCP) contamination
<table>
<thead>
<tr>
<th>Parasites</th>
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<tbody>
<tr>
<td>Ascariasis</td>
<td>Liver fluke</td>
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<tr>
<td>Oxyuris</td>
<td>Taenia sag.</td>
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<tr>
<td>Trichinella</td>
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<table>
<thead>
<tr>
<th>Fungi</th>
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<tr>
<td>Aspergillus</td>
<td>Candida</td>
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<td>Fungi general</td>
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<thead>
<tr>
<th>Radionuclides, ionising radiation</th>
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<tbody>
<tr>
<td>Radionuclide caesium</td>
<td>Radionuclide iodine 131</td>
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<tr>
<td>Radionuclide cobalt 60</td>
<td>Radionuclide plutonium</td>
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<tr>
<td>Radionuclide strontium</td>
<td>Radionuclide thallium 201</td>
</tr>
<tr>
<td>Radionuclide uranium</td>
<td>Radionuclide caes+stront+pluto</td>
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<tr>
<td>Radon</td>
<td>X ray exposure</td>
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<td>Radiation injury</td>
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<th>Other pathogens</th>
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<tr>
<td>Chlamydia</td>
<td>Concomitant with vaccination</td>
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<thead>
<tr>
<th>Metabolism</th>
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<tbody>
<tr>
<td>CO \textsubscript{2} \text{ excess}</td>
<td>Gout</td>
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<tr>
<td></td>
<td>Hypercholesterolaemia</td>
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<tr>
<td></td>
<td>Eliminating anaesthetic</td>
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<tr>
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<td>Oxygen deficiency</td>
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<td>Acidaemia</td>
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<th>Urology</th>
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<td>Urinary tract infection chron.</td>
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<tr>
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<td>Peyronie's disease</td>
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<td>Nephrosis</td>
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<td>Renal colic</td>
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<tr>
<td></td>
<td>Prostate adenoma</td>
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<tr>
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<td>Prostatitis acute</td>
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<tr>
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<td>Prostatitis chron.</td>
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<td>Irritable bladder</td>
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<td>Cirrhosis of the kidney</td>
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<tr>
<td></td>
<td>Urethritis</td>
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<td>Cystitis acute</td>
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<tr>
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<td>Cystitis chron.</td>
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<td>Epstein Barr virus</td>
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<tr>
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<td>Hepatitis A / B / C</td>
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<tr>
<td></td>
<td>Herpes simplex</td>
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<tr>
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<td>Herpes zoster</td>
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<tr>
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<td>Mumps</td>
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<td>Papilloma</td>
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<td>Polio</td>
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<td>Virus 1995 / 01</td>
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<td>Virus1997 / 02-05 / 07 / 10-12</td>
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<td>Virus 2000 / 01</td>
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<td>Viral immune deficiency</td>
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</tbody>
</table>
Tumours, chemo

- Cisplatin/ para-platin chemotherapy
- Basalioma
- Colon cancer
- Breast cancer
- Melanoma
- Meningioma
- Prostate cancer
- Uterine cancer

Environmental toxins

- Aluminium contamination
- Aniline contamination
- Arsenic contamination
- Asbestos contamination
- Atrazine contamination
- Benzene contamination
- Benzpyrene contamination
- Beryllium contamination
- Lead contamination