# Practical Observations of Multiple Sclerosis Patients Treated with Esogetic Medicine and an Audacious Clinical Trial Proposal

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#### **KEYWORDS**

Multiple sclerosis, Esogetic medicine, Colorpuncture, Peter Mandel, practical observations, clinical trial

# **ABSTRACT**

Health outcomes in this practical treatment of patients with multiple sclerosis were dependent on the appropriate use of therapeutic technologies and the application of Esogetic medicine: Colorpuncture, Color Connective Tissue Massage, Lower Heel Clock, Coordination therapy, Conflict therapy, and Transmitter Relay treatments, among others. Forty-three patients were treated with Peter Mandel's Esogetic medicine over nearly five years in Naples, Florida, United States. Anecdotal responses to the Esogetic treatments were nearly all positive. Temporary improvements in gait, reduction in chronic pain, elevation of mood, and resolution of numbness were effected. Four extraordinary outcomes are reported. An audacious clinical trial is proposed in which twenty multiple sclerosis patients under the care of a Certified Colorpuncture Practitioner (CCP) are observed, treated with or without the application of Esogetic medicine, and provided a specific journal/questionnaire to maintain for one year. MRIs and cholesterol testing are required of participants.

# **INTRODUCTION**

Multiple sclerosis, or MS, is a frustratingly difficult disease to diagnose and treatments are varied. Diagnosis typically consists of an MRI (magnetic resonance imaging), or spinal tap (lumbar puncture), or VEP (visually evoked potential) and, ideally, a complete description of the symptoms reported by the patient. Clinical observations are made of the patient's responses to visual stimuli, gait, knee and ankle reflexes, and limb strength and stiffness.<sup>1</sup> Currently, 2.5 million people worldwide have been affected.<sup>2</sup> Women with MS outnumber men three-to-one.<sup>3</sup> MS affects Caucasians more frequently than Hispanics and Blacks.<sup>4</sup> It is relatively rare among Asians and African Blacks.<sup>5</sup> Children are the fastest growing group worldwide diagnosed with the disease.<sup>6</sup>

MS is known as a disease of multiple scarring which can affect the transmission of electrical signals to nerve cells. The medical community classifies MS as a chronic "immune-mediated" disease<sup>7</sup> in which the body's defense system attacks the myelin sheath (fatty substance) that surrounds and protects the nerve fibers of the brain, the optic nerves, and the spinal cord. This attack by macrophages is in response to an inflammation in these areas. In a healthy human body, the myelin sheath allows the nerve impulses to move quickly along the nerve path. In an MS patient, macrophages attack the myelin sheath, causing lesions (holes) to form. This process is termed demyelination. When the patient can regenerate the myelin sheath, nerve function will return to normal. However, when the myelin sheath is damaged and does not regenerate, the lesion can heal into scar tissue that impairs nerve function. With each

new lesion, nerve impairment can increase, depending on the placement of lesion(s). The level of disability in the patient can also increase with each new lesion.

MS symptoms vary and include issues with sensory and motor function. Fatigue, lassitude, numbness, pins and needles, loss of balance and coordination, slurred speech, sexual dysfunction, tremors, chronic pain, neuropathy, dysesthesia (burning pain), bladder and bowel dysfunction are common. Other symptoms are more debilitating: paralysis, blindness, and cognitive problems are among them.

The treatment protocol for MS calls for the patient to begin self-injections with Avonex, Betaseron, Copaxone, or Rebif immediately after the diagnosis. The patient does not experience pain relief because the medications do not address the sensory and motor function symptoms of MS. Avonex and Rebif are prescribed to reduce the frequency of relapses and to slow the progression of myelin sheath deterioration. Copaxone is used to reduce the frequency of exacerbations and Betaseron is prescribed in relapsing and remitting MS to reduce the frequency and severity of exacerbations.<sup>8</sup>

Patient compliance in administering the injections can be an issue in those with cognitive problems. Other patients do not want to inject the drugs because the long-term effects are not known. The side effects from using the steroidal medications (interferon beta-1a and interferon beta-1b) are flu-like symptoms of fatigue, chills, fever, and muscle aches, pain or swelling at the injection site, depression, anxiety, confusion, and sleeping and eating disorders. These side effects typically subside in one to three days after the medication is administered.<sup>9</sup>

With acute exacerbations a steroidal infusion, usually Solu-Medrol or Decadron, is given to reduce the inflammation and to close the blood brain barrier. The infusion may be followed by oral corticosteroids such as Prednisone. The National Multiple Sclerosis Society states, "The side effects of long-term continuous steroid use are serious and well-documented. These include stomach ulcers, weight gain, acne, cataracts, osteoporosis (thinning of the bones), deterioration of the head and of the thigh bone and chemical diabetes." <sup>10</sup>

The current neurological treatments for MS do not prevent the disease, do not cure the disease, do not repair the myelin sheath, and do not aid in the repair of lost functions. For example, the common loss of bladder function has a cascading effect in a predictable path beginning with an infection. The infection is treated with an antibiotic. The use of an antibiotic often leads to candida, which requires further drug treatment. A CCP is able to alleviate the bladder dysfunction to stop the cycle of infection and treatment by modulating the kidney and bladder systems. The antidepressants, anti-anxiety, and pain medications which may also be prescribed add to a patient's existing condition, if any, of decreased sexual function, constipation, or drowsiness. Certainly, these problems indicate the need for alternative therapies.

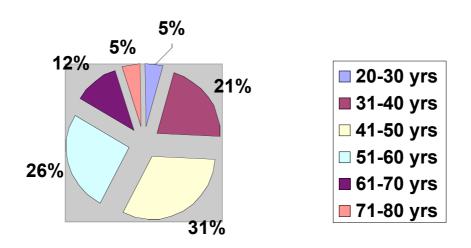
Under the care of a CCP, forty-three multiple sclerosis patients in the United States effected temporary but significant gains in their physical or emotional health when treated primarily with Color Connective Tissue Massage and Lower Heel Clock therapies. The patients were able to subdue their chronic physical pain as well as decrease their emotional stress, often in their first sessions. Other observed gains

were, in varying degrees, alleviating muscle stiffness, numbness, speech clearing, fatigue, cognitive problems, and bladder/bowel control. Ongoing treatments were required for continued positive health outcomes.

# METHODS: ESOGETIC MEDICINE, PRACTICAL OBSERVATIONS, AND PATIENT RESPONSES

In the therapies and practical observations described in this paper, MS patients were treated with Esogetic medicine as part of the holistic care program offered by a multiple sclerosis wellness center in the United States. Thirty-four were female (79%) and nine were male (21%). They were predominately Caucasian with 7.5% Hispanic. The patients ranged in age from twenty-eight to eighty at the start of treatments. Two patients were twenty to thirty years old. Nine patients were thirty-one to forty years old. The forty-one to fifty year old category was the largest with thirteen patients. Eleven patients were between fifty-one and sixty years old with five patients between the ages of sixty-one and seventy. One patient was seventy-one and one patient was eighty at the beginning of her treatment.

# Percentages of Patients by Age



MS Home: The Multiple Sclerosis Center of Southwest Florida, Inc., is a nonprofit organization in Naples, Florida, USA. It includes a Wellness Program offering therapeutic treatments for two hundred and fifty people with MS. Esogetic Medicine has been an integral part of the MS Home's Wellness Program since December 2001.

The patients treated had a combination of relapsing-remitting MS, primary progressive MS and secondary-progressive MS. Some were taking Avonex, Betaseron, Copaxone or Rebif while others were not taking any medications. A number of them were on Prozac or Wellbutrin. Many were supplementing with herbs, vitamins and minerals. Seven of the patients were receiving live sheep cell injections at the Villa Medica in Edinkoben, Germany as part of their MS treatment.

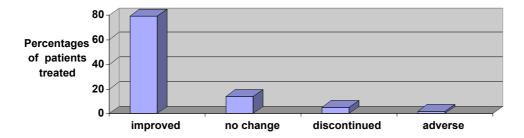
Each patient brought a wide range of health concerns that are typical for people with MS: numbness, loss of balance, slurred speech, cognitive problems, bowel and

bladder dysfunction, intolerance to Florida's heat, and leg spasticity. The majority of patients presented more than one concern at each appointment. The CCP started each appointment with a diagnostic black and white Kirlian photograph of the electrical energy output of the patient's hands and feet, provided the appropriate application of Esogetic medicine, and took a follow up Kirlian photograph measuring the patient's electrical response to the treatment.<sup>12</sup>

Patients were primarily treated with Color Connective Tissue Massage and the Lower Heel Clock. Some patients responded better to Coordination One and the Polarity Lines (Thalamus, Limbic or Hypothalamus Lines) alternating with the Conflict Therapies. Other appropriate therapies for specific symptoms included the use of acupuncture needles, spectral and soul spirit light, infrared, ultraviolet, and gray light, and the Esogetic clock.

#### PATIENT RESPONSES

Thirty-four of the forty-three MS Home patients treated (79%) reported that Esogetic medicine improved their quality of life. Six patients (14%) reported little to no change with the treatments. Two patients (5%) discontinued treatment due to missed appointments. One patient (2%) had an adverse reaction to initial treatment that manifested as nausea and vomiting and discontinued treatment.



Patients reported they had been more balanced physically and emotionally when the CCP asked them how they felt in the period between their sessions. Many of them spoke of anticipating their appointments because the treatments helped them to subdue their chronic pain. They reported that they are able to walk more efficiently, have more energy, elevate their moods, and, as one said, "All is right with the world after a Colorpuncture treatment."

# General Responses of Four Patients in Their 40's

KF, a woman in her forties, said, "Everything changes when I'm treated. Whatever's going on is impacted in a positive way. Whatever is treated dissipates." When KF was diagnosed with MS she was a self assured, high-powered businesswoman. She was hospitalized and given steroidal drips for her blindness. Ten days after her hospitalization she developed debilitating anxiety that made it difficult for her to fly or drive in traffic. In her ongoing treatments, she has been cleared of her anxiety and completely calm when flying or driving.

LC, a man in his forties, gained better range of motion in his right arm with a combination of treatments. He was better able to walk because the treatments stopped the progression of the numbness in his leg. WJ, also a man in his forties, had a

dramatic health improvement after three Esogetic treatments. He gained self-esteem and began to hold his head up so that he could look at others. He began to interact with them instead of isolating himself. His treatments consisted of coordination treatments, Life Stream therapies and the Lower Heel Clock and CCTM.

ME, a wheelchair bound woman in her forties, improved her bladder control with her Esogetic treatments. She was on Detrol, but still had urinary incontinence, nocturia and bladder infections. She was treated with kidney therapy on the head, the feet, Puttkamer's segments and the Shu points. Two weeks later she reported no accidental bladder release. She said, "It's really working!" Eight weeks later she reported that the single treatment was continuing to provide relief. Her mother reported that ME's sleep had greatly improved. Her mother also expressed satisfaction that she no longer had to change bedding nightly or identify a convenient restroom when they were out and hoped that this would end visits to the doctor for this problem.

## Extraordinary Responses of Four Patients

Two patients experienced tremendous changes in their speech with the treatments. The first, MP, a forty-six year old woman, was treated with the Coordination Therapy in the ear and her slurred speech was improved before the session was over. When MP came to her next session one week later her speech was still clear. The second, JL, a forty-one year old woman, had numerous MS related problems, among them slurred speech. One of the most interesting aspects of JL's treatments was that her speech always cleared with the first point of light on her body. She would begin the treatment session talking in an indistinct voice and no matter which treatment she received in the session, her voice quality immediately improved when the light pen was set on her skin.

DD, a disabled nurse in her forties, reported neck and debilitating back pain that started at the twelfth thoracic vertebra. The Spinal Rhythms were done at that treatment. At the follow up visit, DD said that her friends and family remarked about her extraordinary improvement in walking after the treatment. She said, "I walked with an almost normal gait for two to three days following the last treatment!"

PL, a fifty-three year old woman, presented pain in the lumbar region, fatigue and stress. She was treated with the Pain Ellipse and the conflict lines were stroked for her first visit. She reported that she felt "relieved, stress free and euphoric" after the treatment. She had a marked decrease in her lumbar pain. It no longer felt "like a nail was driving into my back," she said.

PL was extremely physically stressed with her work as a corrections officer working twelve-hour night shifts. Her Kirlian photograph indicated moderate endocrine system impairment and she was treated with the Endocrine Test Therapy. Following this, she reported that she had no pain in her lower back for the first time in four and a half years.

# **COLORPUNCTURE TREATMENTS**

# Transmitter Relays

Treatments are a series of concentric circles starting at the hairline and moving forward to the face and backward to the back of the head. They are performed with

the spectral and soul spirit colors. The genital or drive relays are a set of three circles drawn on each palm and on each foot. They are performed using the spectral and soul spirit colors.

ML, a forty-three year old wheelchair bound woman, was in an unhappy marriage and she had important choices to make regarding her three children. She was fearful of leaving her husband and questioned whether or not she could take care of her children as a single parent. She said that she "gained clarity" from the treatments. She said that she "made choices I never would have made" after the initial Transmitter Relay treatment. She started psychotherapy and began to make decisions regarding her future

CJ, a fifty-three year old man, was angry with his father for neglecting him during his childhood. In the course of the Transmitter Relay treatments he had dreams and memories of his father taking him to work with him and buying him work clothes so he could look like his dad on the job. The Drive Relays were very interesting for CJ. He was the type of man who would work his way to the front of a line and not feel guilty. This caused problems with his wife and a few friends. After having the Drive Relay treatments CJ remembered a night when he was six or seven. His sister was in a dance recital and his father wanted photos. Because CJ was small, his father gave him the camera and told him to go in front of all of the people to take pictures. CJ didn't want to go, but his father pushed him and loudly forced him to move in front of the others to take pictures. This realization allowed him to perceive his behavior as it appeared to others. He was then able to release the anger he held about his father.

Coordination 1 and Polarity Line Treatments Alternating with Conflict Therapies Coordination 1 is a series of six points on the midline of the body, front and back, used to harmonize the brain. The six points are treated in the spectral colors. The Polarity Lines address issues with the hypothalamus, the limbic system, and the thalamus. The points on the Polarity Lines run up the back onto the head. The Limbic Line has additional points on the feet. The points are treated in the spectral colors

Conflict therapy in this context is a series of three circles around the head. The first circle is level with the brow line and is traced on the left side of the head and then the right. The second line is in the middle of the forehead and is treated like the first. The third line is at the hairline and follows the same stroking pattern. Points are then radiated on the lines. Lines and points are subsequently treated on the top of the head. These lines address the cortex of the brain, the limbic system, and the medulla. This therapy uses the soul spirit colors.

NC, a sixty-six year old woman, loved this series of treatments. The Limbic Line helped her immensely. Physically she felt good and her anxieties lessened. The first time she was treated with this combination she felt great after the treatment. "I felt so alive and able to concentrate. I still feel great a week later. This is the best treatment yet."

KF, a forty-three year old woman, was taking Clonazepan, Zoloft, HTP and birth control. She was nineteen when she was diagnosed with MS. She was treated with massive steroidal infusions for blindness. Following the infusions KF experienced

anxiety and panic attacks. Fifteen years later she was officially diagnosed with Panic Disorder. After five months of Esogetic Colorpuncture treatments (mostly Coordination and Line Treatments alternating with Conflict Therapies) and intradermal needles in Shenmen she took a trip in which she had to fly. She reported, "The trip was great. I had no problems with the flying. I love these treatments." This was important to her because she had always traveled but was unable to do so after the steroidal infusions.

After six months she said, "I am not anxious in the least. It's the first time ever!" Two months later she traveled by plane again and said, "It was a piece of cake. I can't remember ever feeling this way!"

Three months later she traveled again and she continued to feel confident. She was able to drive in areas unfamiliar to her. She had only a small sense of panic, which quickly dissipated. Because she was feeling self-assured, she took four flights in two weeks. She was very proud of herself when she returned. A month later she flew again and all went well. She was no longer anxious when traveling. She recently scheduled a trip that included a fifteen-hour flight each way.

MC, a forty-nine year old woman, was a disabled registered nurse. She was diagnosed five years prior to her first Esogetic treatment. She said that she had symptoms three years before the diagnosis. She reported undergoing knee surgery, a tonsillectomy, an appendectomy and a hysterectomy. She came for treatment of pain and weakness due to the MS. She felt a pins and needles pain in her arms and legs that was worse on her right side. She said she had "an electric feeling" in her body when she lay down. Her thighs felt "like the muscles are smashed". Her upper body was almost constantly spasming. She stated that her sleep was "not good due to pain" and that her energy was "very poor". She reported balance problems and migraine headaches.

She was taking Neurontin, Klonipan, Zoloft and multiple vitamins. She was participating in a University of Miami trial study for Copaxone that started three years earlier. She was not certain if she was receiving the Copaxone or was in the placebo group.

The first treatment consisted of infrared on the appendix and tonsil points and the medulla converter. For twenty-four hours following the therapy she felt "flu like symptoms". The next therapies were alternating the Hypothalamus, Thalamus and Limbic Lines combined with Coordination 1 with the Conflict Therapies. She was better able to see and emotionally experience traumas she thought she had dealt with. When she was in her early twenties she lost her grandpa, mom and grandma to death within a couple years. Her father was now ill and she was upset about her sister wanting to take on the entire burden of his care. She was now better able to handle situations. Her migraines ceased. Her back and shoulders were feeling good and she felt more relaxed. At this point in her therapy she had other health problems and ceased treatments.

# Combined Treatments Using Coordination 1 and Polarity Lines Alternating with Conflict Therapy, CCTM and Lower Heel Clock

Therapies are performed using Esogetic treatments described elsewhere in this paper.

RB, a forty-four year old man, was in a wheelchair and he wanted to walk again. He also wanted better use of his hands. He stated, "As the day goes on I kind of go downhill a little bit". RB was diagnosed with Type 1 diabetes at ten years old. He was diagnosed with MS at the age of twenty-seven. He was a tri-athlete, a college student in a Masters Program and a jazz musician.

The combination of the diabetes and MS caused eye problems for RB. When RB was thirty-eight he had problems with his eyes crossing. Then he had laser treatments for diabetic retinopathy.

The first treatment consisted of the Basic Conflict Treatment because the Kirlian photograph of his feet showed numerous conflict signs. At the following treatment he felt "different, better". He was thrilled because he could click his fingers again. His second treatment was the Lower Heel Clock and the CCTM.

When he returned for his third treatment his vision was improved and he could see colors more clearly. He felt "mentally relaxed" instead of his usual revved up feeling. The Basic Conflict Treatment and the small Territorial Triangles were done at this visit. After this treatment RB had better range of motion with lifting his arms. He could grasp with his fingers and he could touch his nose with his eyes closed. Prior to this treatment he could not do any of these things. His mother said that he was doing more things around the house. RB's treatments continued with the Lower Heel Clocks, CCTM and the Conflict therapies.

### General Combined Therapies

General combined therapies are performed using Esogetic treatments described elsewhere in this paper.

AP, a sixty-three year old woman on Avonex, came for treatments to address dysesthesia and neuropathy in her feet, reflux, constipation and leg numbness. The Basic Conflict Therapy was done at the first visit and was followed with the Bone and Joint treatment at the second appointment. At her third visit she reported using less ice on her feet. The Lymph Rhythms were done at this visit, and at the fourth visit AP reported feeling very good and the burning pains in her feet had stopped.

ST was diagnosed with MS at age thirty-one. He is a thirty-five year old meat cutter who stood for eight to ten hours a day at work. He reported mid to lower back pain due to standing. He experienced dizziness with exertion. The first therapy was the Ear Coordination with the Coordination 5. Five days later he reported relief from the back pain. He had no dizziness and he could get through his workday with no back pain.

OM was able to get out of her wheelchair and walk with a cane after one treatment session using Coordination 1. She stated that her left leg was coordinated and moving much better. When the practitioner switched from Coordination 1 to Coordination 8, her weakness in her right hand was better for two or three days and then it wore off. Her hands became stronger with repetition of the treatments. She stated, "I have consistently improved over the last two months. I am walking much better. I have a better mental spirit. The heat is getting to me but I am doing much better."

BL, a woman in her fifties, complained of left leg spasticity. She was therapy resistant and reported no change after treatments. However, she continued weekly sessions and her Kirlian photographs recorded changes. When the Esogetic Clock was used on her forehead to treat "leg spasticity" in a particular session, and she saw her physical therapist immediately after her session, the physical therapist was amazed at the reduction in her leg spasticity. BL noticed no change when the Clock treatment was performed.

# Color Connective Tissue Massage and Lower Heel Clock Treatments

Color Connective Tissue Massage (CCTM) is performed with a flat focus pen on the patient's back from the anal crease to the occiput. It is performed with spectral colors only. The Lower Heel Clock consists of three concentric circles drawn on the ball of the heel. It also uses points on the heel circles. Both spectral and soul spirit colors are used.

ED, a forty-seven year old man, was taking Copaxone. He came to treatment for anxiety and pain relief. After a treatment with the Lower Heel Clock and CCTM, his anxiety lessened and he had pain relief in his back, neck, and feet. His feet and legs relaxed and the muscular tension was relieved. He said, "I feel relaxed, calm, and more at peace."

Following his second CCTM and Lower Heel Clock treatment he stated, "I feel much stronger after your treatment and I leave with a lighter step." He continued with these treatments. He said, "My anticipation of my visit with you helps to subdue my pain. Life is better. I walk a lot better and I have more energy."

LL, a woman in her forties, was treated with the Heel Clock and the large CCTM. At her appointment the following week she said that the treatment "was incredible. The most important thing is that I felt more balanced from this treatment. My whole core is stable. My balance is stable. I actually got a good night's sleep and my (chronic) back pain held off for three days. I am better overall."

MJ, a forty-nine year old woman, operated her own business. She was diagnosed at forty-one with Primary Progressive MS. Her symptoms were vision problems and a right side deficit. Previously she was treated in a University trial with chemotherapy and she had tremendous improvement. She moved from a wheelchair to a walker to a cane to walking with no aid. At her first visit she asked for help with fatigue and restless sleep. Her photograph indicated endocrine system impairment and drips from her fingers. She was treated with the Triangle of Remembering and the Passive Air Center and Shadow.

One week later her photo no longer indicated endocrine impairment. She "felt a lot more energy for two days. My vision improved. I am really pumped!" She was next treated with the Lower Heel Clock and the small CCTM.

She cancelled her appointments many times before the CCP saw her again. When she came again she stated, "I loved that last treatment. I had a days worth of energy. I also had so many dreams." This was the last time that MJ came in for treatment. She began to miss appointments. The missed appointments were typical of a few of the MS patients whether due to memory problems, fatigue or transportation issues.

SJ, a thirty-nine year old man, came to treatment for lower back and shoulder pain. He used a walker. He stated his sleep was "no good". The first therapy was the Basic Conflict Treatment and infrared on the tonsil point on the head. One week later he said that he felt good. He had gotten a great night's sleep after the treatment and he had relief in the left rib cage and left arm. Five days after the treatment he said he felt depressed and needed "a Colorpuncture fix". He was treated with the Lymph Crosses in infrared followed with color at his second session. At his third visit he was able to walk back to the treatment room with no help. He reported muscle stiffness that lasted all day. At this session he began the Lower Heel Clock and the CCTM. These treatments were repeated for a number of visits. His shoulder pain decreased, his legs lost stiffness and he reported being energized after the therapies. He loved the Lower Heel Clock and the CCTM therapies and reported that "overall I am much better".

SR, an outgoing woman in her fifties, responded moderately to her treatments. After her first session with the Lower Heel Clock and the CCTM, SR felt a shift in her anger and depression. After two more sessions with the same treatments SR said, "I'm good. I'm walking. I've had some good dreams. I feel great with this treatment. I feel energized and happy." Many of the MS patients spoke of having dreams after their treatments, indicating their internal conflicts were surfacing.

#### **CASE STUDIES**

Five MS patients' symptoms, treatments, and file notes are reported in detail. One set of three photographs for each patient is found at the end of this paper indicating pretreatment condition, post-treatment condition, and pretreatment condition at the following session.

# Study #1

GL, aged forty-three, came to Esogetic medicine two years after she was diagnosed with MS. She reported an extremely high level of mental and emotional stress and numbness in her right occipital region, foot, and thumb. She also reported pain in the right hip joint. Her childhood was filled with stress because of an overpowering manic father and a neglectful mother. She was a full time wife and mother with three children.

Her therapies started with endocrine treatments such as the Endocrine Test Therapy, the Mental Crosses, the calming triangle on the feet and the Kundalini Coordination. After eight months of Esogetic treatments, GL realized that years of psychotherapy hadn't removed the pain she carried from her childhood.

The Lower Heel Clock and the CCTM treatments were introduced. She could feel her buttocks and thighs loosen and relax during the first session. At the next visit she said that she was agitated off and on following the treatment, but that she had better control of her leg muscles. However her feet remained numb.

After two sessions of the Lower Heel Clock and the CCTM, GL said she "had a good week both mentally and physically". At session four she stated that her mood had been great and that she thought the treatments were helping. Her husband noticed positive changes in her physical and emotional health.

At the fifth session she related that she "felt great over the weekend" but overexerted herself and didn't feel as well on Monday. She stated that the treatments were helping the foot numbness. At treatment six she said, "I know that this is helping me. Let's keep doing these treatments."

At her ninth session she reported that her MRI showed no new lesions and that her present lesions were shrinking. Her neurologist told her at that point that her MS would not disable her. Other Esogetic treatments were added according to her Kirlian photograph, but the Lower Heel Clock and the CCTM were always interspersed. Seven months later she had symptoms that were consistent with previous flair ups. Every May or June for the last four years she had had flair ups that started as a left eye twitch and then moved into numbness in her temporal region. Three Lower Heel Clock and CCTM treatments later her flair up subsided.

Her visits became less frequent after this. Seven months later she reported nonstop burning in her lower right leg to her toes and in her left leg from her ankle into her foot.

After one treatment with the Lower Heel Clock and the CCTM GL's feet "feel better". She stated that she felt "really agitated after the last treatment and ready to erupt." The numbness in her foot began to lift four days after the therapy.

The treatments were changed to the Material Existence Ellipse, medulla treatments, Fear Rhythms and the calming triangle on her feet. She felt "really, really emotionally good" with this series of therapies. She felt as if she "could walk forever" because her legs felt strong.

The Mesenchyme and Medulla Rhythms with the Vogler Crosses benefited her greatly at this point in her treatments. They proved to be calming within two hours and she was free of dizziness. She then stopped therapy because she took a full time job and returned to college to work on her Masters Degree. GL received one hundred and ten treatments over a three-year period.

#### Study #2

LS, a twenty-eight year old woman, worked as a server in an upscale restaurant. She was diagnosed with MS when she was twenty-five, but her MS symptoms started at the age of fifteen.

She said that her childhood was difficult. When LS was sixteen, LS's mother divorced LS's father when she realized she had been sexually molested by her father during her childhood. It was an insidious relationship in which her father used her as a surrogate spouse. The neighbors knew that something was strange because the two went on special dates, but no one said anything. LS moved into a new home with her heartbroken father. This meant that she went to a different school and had to make all new friends. The new kids made fun of LS's curly hair, her glasses and her weight. LS had her tonsils and adenoids removed at age nineteen.

LS's chief complaint was back pain above both hips. Her back spasmed when she turned her body suddenly. A pain starting in the lower thoracic region worsened with inactivity.

LS's Kirlian photograph indicated endocrine imbalance with dripping in the breast area on both little fingers. The radiation showed anxiety. The first treatments were the infrared points on the forehead for bone pain, the ear lumbago treatment in infrared and the lower back converter points. The follow up photograph showed a clearing of the anxiety and the dripping and the radiation in her fingers filled in.

At her second visit she reported that she felt great when she left the first session. However, later in the evening her back became sore. The next day she had no pain and was almost pain free all week. The treatments at the second visit were Coordination 1 and Coordination 5.

At LS's third visit she said that she was able to sit in class for four days in a row pain free, but she had severe sciatica the day of her visit. The Basic Conflict Therapy and the small territorial triangle at C7 were done this day. During the treatment LS realized that her back pain was directly related to the stress of her work. She talked of changing her work.

Five months after the start of the Esogetic therapies LS's MRI showed no active lesions. This excellent news relieved LS because her husband wanted her to take one of the drugs for MS and she didn't want to take drugs.

The next treatments consisted of the Breast Interferences, the Gray Conflict and Coordination 8. LS changed her job during this period. She also realized that she was unhappy in her marriage. At this point the therapies were changed to the Thalamus Interference, Lymph Rhythms, Mental Crosses and Soul Coordination. These therapies supported her through the break up with her husband. LS had twenty-four treatments during one year. Then she was not treated for more than one year. She has recently returned to treatment.

### Study #3

EL, a payroll clerk, was diagnosed with MS and began Esogetic treatments when she was thirty-seven years old. She had symptoms for three to four years prior to her diagnosis. She reported pain in her right leg and right arm and in her neck. The pain in her right arm ran from her shoulder to her hand. She reported, "My shoulder feels like the bone is popped out. The palm of my hand goes numb. It feels like there is too much in my arm. It is worse at night and when I'm tired." The right leg pain was medial on her thigh and down the back of her leg from her knee down. Her leg had the same feeling of fullness as her arm and her foot was numb like her right hand. She complained of dizziness and fatigue. EL had dysarthria (slurred speech), but she didn't think anything could help that. She was taking Topamax and Betaseron.

EL was born deaf. When she was two years old plastic eardrums were placed in her ears and she began to hear. When she came for treatment she was deaf in her right ear and was losing the hearing in her left. She had her tonsils removed when she was a child. She had a Caesarean section ten years prior for the birth of her only child.

The Original Gray treatment was done at her first visit. Two weeks later EL returned and reported that she had "felt real good" following the treatment but that her pain returned a few days later. She was able to feel her right foot again and her vertigo slightly lessened after the treatment. The Thalamus Line and Coordination 1 therapies were done at this session.

One week later EL said, "I feel great when I leave here. For the first few days after the treatment my pain is gone. My speech is better when I leave the treatment. I have no pain in my right arm like I did three weeks ago. I am doing so much better." She lost her vision earlier that day, but her attitude improved with her treatment so that she was able to cope with her temporary loss of sight. The Basic Conflict therapy was done at this visit.

She returned two days later and reported that her right leg still hurt but it felt "pretty good". With the first two points of Coordination 1 her speech instantly became distinct. The Thalamus Line and Coordination 1 were done at this visit. At the next weekly visit she stated that her vertigo was worse after the treatment but cleared soon after. Her speech had improved with the treatment, but had returned to slurred. She reported that her right leg and right arm "have been real good".

Two weeks later she returned and stated that she had felt great until three days before the session. Her left thigh and foot were now numb. The Basic Conflict treatment was done and the numbness disappeared before she left the office.

At her visit two weeks later she told the practitioner that when she was nine her sister had died in a car and train accident. Her best friend was killed by a school bus the same year. EL reported no left sided numbness but right hip and leg pain. Her sister had just been diagnosed with a brain tumor.

A week later EL returned. She said that she has less vertigo after the Conflict treatments. She reported a little pain in her right thigh and her lower back. She said that her speech had improved 80%. She discontinued taking Topamax.

At her visit a week later she said, "I felt good all week. I had no pain, no problems. I wasn't dizzy. Yesterday was the best day I've had in a long time." The CCP started the Lower Heel Clock and the small CCTM at this visit. EL returned one day later and the Gray Conflict was done.

EL said that she was able to shop for hours after the treatment and she didn't have any pain until two days later. Then she had right leg pain and left thigh numbness. She requested the Lower Heel Clock and the CCTM.

Two weeks later she reported that she had been doing really well for the first week, but then had pain in both legs and it was difficult for her to walk. Her speech was slurred and she reported vertigo. The Lower Heel Clock and the CCTM was repeated. EL began to lose weight. Her neurologist ordered liver and thyroid tests. Those test results were within normal range.

EL's roommate indicated that EL "blew up" at home following the conflict treatments. She later became calmer and shared more of herself and was able to voice her feelings. Her roommate also indicated that EL had forgiven someone, "a really major step for EL." EL told the practitioner that she had finally forgiven her exhusband and ex-best friend for having an affair and then marrying. Her ex-husband was chronically ill, so this healed relationship was very important to their daughter.

At the next visit EL reported that she was molested at age nine by her stepfather. The practitioner concentrated on treating age nine and the various medulla therapies (Gray Medulla, Coordination 6, Medulla Interference and the Medulla Ellipse) for the next several weeks. During this time she reported that she had an exacerbation that lasted only a few hours.

Five months later she reported that she and her ex-husband and his wife had become very good friends. They had dinners together and had a joint birthday party for their daughter. She said that she was forever grateful to Esogetic medicine for improving her life physically, emotionally and spiritually beyond anything she could imagine. At this point she discontinued her treatment due to work pressures. EL received thirty-four treatments consisting mostly of medulla therapies, conflict therapies, gray treatments and lymph treatments.

## Study #4

JT, a retired sixty-eight year old teacher, came to Esogetic medicine for peripheral neuropathy. His left toes were primarily affected with pain and burning. He was unable to stand in the shower because the water pressure hurt his toes. He was diagnosed with MS in his thirties. He reported having scarlet fever and an appendectomy at age twelve, asthma, infectious hepatitis, impotence and sleep apnea. He also reported that his cognitive skills had dropped. He was IQ tested prior to the MS with an IQ of 131. After a number of years his IQ had dropped to 120. He was taking Neurontin, Topomax and Lavitin. He was treated with Coordination 1 and the Limbic Line at his first visit. At the second visit he received the Basic Conflict Therapy.

At his third treatment he reported that his foot was ninety percent better. He felt so good that he bought and planted trees for four hours. This caused him great pain as his toes were pressing on his shoes. The pain returned to its full strength so he spent a day in bed. The following day the pain was gone.

He continued to feel "great" and "wonderful" and within a year he said, "My feet are 95% cured. Only every so often do I have a problem with them." For the first time in years he was able to stand in the shower and his feet didn't hurt. He was now able to spend seven hours on his feet without pain and could walk easily without his cane. He took a trip and was able to walk to experience the things that interested him. He also began taking a Pilates class.

As he continued the Coordination and Line Treatments along with the Conflict Treatments he stated, "I am much more articulate." At many of his treatments he said that he had had a great week and was feeling great.

After two hundred and twelve sessions in a little over four years, JT was diagnosed with kidney and lung cancer. He had surgery on his lung to remove the cancer and two months later his kidney was removed. At this point the treatments changed to the conflict treatments and the lung interferences. JT had great relief with these treatments. Within fourteen months JT died.

# Study #5

LC, a Hispanic man in his forties, had had a horribly abusive childhood. When he was six he was riding his bike and someone in a passing car cut him with a knife. His uncle had also cut him with a knife. He was a building contractor, but he could no longer work and was on disability. He felt ineffective because he wasn't working and had a wife and children to support.

He reported that his body felt like it was asleep. His right side was worse and his right wrist was especially numb. He had no stamina and reported pain in his thighs and lower back. He lost his balance with activity and he used a cane to walk.

The first treatment was the Lower Heel Clock and the CCTM. When he returned for the next treatment he stated that he "just somehow feels better". The Mesenchyme Rhythms and Vogler Crosses were done at the second visit. At the third visit he said that nothing had changed. His wife disagreed and said that he was stronger for three days after the treatment. The Information Barrier was done on his body using ultraviolet and crystal tattoos.

Following this therapy the pain in his lower back was gone. His left leg was no longer numb and he was able to place a sock on his left foot. He was treated with the point synapses on his feet for the lymph and immune system. The next therapy was the Birth Rhythm combined with the birth points on his feet and age nine on his head. He stated, "I feel really good. I am very happy." He and his wife were planning to move and he was hoping to help her with her alterations business.

About three weeks later LC had a stroke. A few months later he died of a heart attack. LC received twenty-four treatments during a sixteen month period.

# CONCLUSIONS FROM CASE STUDIES AND OTHER PRACTICAL TREATMENTS

Multiple sclerosis patients who had Esogetic medical treatments were found to experience temporary relief of physical and emotional pain. After nearly five years of treatments, particularly using Color Connective Tissue Massage and Lower Heel Clock therapy, nearly 80% of patients observed reported that Esogetic medicine had improved their quality of life. They reported feeling more emotionally and physically balanced during the period of their treatments. These evaluations of chronic pain and other symptoms relieved by Esogetic medicine as reported in this paper by MS patients and their practitioner demonstrate a need for further measurable research.

# AUDACIOUS CLINICAL TRIAL PROPOSAL

It is proposed that a clinical trial period of one year be used when a control and treatment group of twenty MS patients has been identified. Using an initial MRI as a marker for lesion(s), each patient will be given various Esogetic treatments once per week with or without actual colored light. During the trial, a Certified Colorpuncture Practitioner will carefully observe, treat, and record each participant's health using Kirlian photography and Esogetic medicine. The MS patient will keep a questionnaire booklet recording his symptoms, physical abilities, and emotional health between sessions. After the clinical trial period, an MRI will be administered to report the condition of the patient's lesion(s). Cholesterol testing will be required

of each patient since new research studies are indicating that low cholesterol levels are responsible for systemic diseases such as MS.

# **REFERENCES**

<sup>&</sup>lt;sup>1</sup>National Multiple Sclerosis Society. March 2006. <u>www.National Multiple Sclerosis Society.org</u>.

<sup>&</sup>lt;sup>2</sup>Kalb, Rosalind, PhD. <u>Multiple Sclerosis: The Questions You Have—The Answers You Need</u>, 2<sup>nd</sup> ed. New York: Demos Medical Publishing, Inc. 2000

<sup>&</sup>lt;sup>3</sup>Ibid.

<sup>&</sup>lt;sup>4</sup>Ibid.

<sup>&</sup>lt;sup>5</sup>Ibid.

<sup>&</sup>lt;sup>6</sup>Ibid.

<sup>&</sup>lt;sup>7</sup>Answers to Common Questions About MS. May 2006. University of Maryland Medical Center. www.umn.edu.

<sup>&</sup>lt;sup>8</sup>Multiple Sclerosis Treatment. May 2006. www.ms.about.com.

<sup>&</sup>lt;sup>9</sup>Multiple Sclerosis Medication Side Effects. Healthwise. April 2006. www.yahoo.health.com.

<sup>&</sup>lt;sup>10</sup>National Multiple Sclerosis Society. April 2006. <u>www.National Multiple Sclerosis Society.org</u>.

<sup>&</sup>lt;sup>11</sup>Kalb. <u>Multiple Sclerosis</u>.

<sup>&</sup>lt;sup>12</sup> Kirlian photographs, Esogetic medical pretreatment and post-treatment