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**Fears-Anxieties-Phobias and Depression,**  
**What Can We Do?**

Are drugs the answer to the above topics? Read this newsletter and see what you think. The pharmaceutical industry spends millions of dollars a day to keep us from thinking and making you believe that you need drugs to “feel more like yourself”. This phrase I took from article that appeared in Sunday Review of The New York Times on 9/30/12, by Robin Marantz Henig, “Valium’s Contribution to Our New Normal”. It talks about the history of tranquilizer drugs starting in 1960’s with Librium. However this class of drugs, first described in a now-historic article published in The British Journal of Pharmacology in 1946 eventually became a minor tranquilizer meprobamate, best known as Miltown from Wallace Laboratories introduced in 1955.

A number of psychological methods have developed from Applied Kinesiology Technique, which was founded by my mentor and friend George J. Goodheart, D.C. in 1964, which uses muscle testing as a functional neurological tool to diagnose and treat various problems. Goodheart tied the emotions to the Neurovascular Reflexes of stomach (Pectoralis Major Clavicular) on the forehead in his Work Shop Procedural Manual 12<sup>th</sup> Edition 1976.

A number of emotional treatment methods developed from AK. The first was from John Diamond, M.D., a psychiatrist in his book “Behavioral Kinesiology”, Harper & Roe, 1979. Second started in 1980, when Roger J. Callahan, Ph.D. a Californian clinical psychologist who took the basic one hundred hour AK course. This developed into a book titled “Five Minute Phobia Cure”: Dr. Callahan’s Treatment for Fear, Phobias and Self Sabotage, published by Enterprise Publishing, Inc., 1985. In the mid 1980’s Scott Walker, D.C. developed a method using AK muscle testing and the acupuncture meridian system to treat the emotional stress with a method of tapping. In the 1990’s and engineer by profession Gary Craig studied with Callahan and developed his version Thought Field Therapy (TFT) and called his method Emotional Freedom Technique (EFT).

The common dominators for all the above mentioned method is the tapping on various acupuncture meridian point while tuning to the problem, which changes the way the Autonomic Nervous System (ANS) work and changes the production of certain neurotransmitters. These systems (TFT-NET-EFT) have shown profound positive effect of treating fears, anxieties, phobias and depression (mild to moderate). I have been using TFT since 1985 for many emotional problems and I have made permanent changes that have lasted for months and even years. What I like about these methods is that I can teach my patients how to treat themselves and avoid drugs such as benzodiazepines (Valium, Xanax, etc.), as well as selective serotonin reuptake inhibitors known as S.S.R.I. (Prozac, Zoloft, Cymbalta, etc.). You must also remember that you cannot mix most tranquilizers and antidepressants. A critical study that was just published in The British Medical Journal (BMJ) on 9/28/12, Benzodiazepine use and risk dementia: prospective population base study. What this study proved, that older individuals increased the rate of becoming senile by 50% with the prolonged use of tranquilizers.

After using TFT for twenty seven years for many different emotional problems that patients have presented to me in December 2011, I had the opportunity to use this technique to treat a patient’s athletic injury to her right ankle. Let me explain how this all came about.

A family who had lived in the Cleveland, Ohio region was referred to me by an AK practitioner who had been treating this whole family. The entire family has become patients since she came to my office in October 2011. Most of her health issues were stabilized and cured by her chiropractor with AK and nutrition. However, she was still having a problem with an athletic injury to her left ankle, which I diagnosed to be a Tarsal Tunnel Syndrome. My structural corrections and stabilization of the muscular support gave her a 75 reduction of pain immediately. On the following visit a week later I was reexamining her ankle and she said to me that she thought this problem has an emotional reason for being. I thought to myself, how a foot/ankle injury be caused by some emotional problem. Since this patient has her Ph.D. in Psychology and been practicing psychotherapy form many years, maybe I should add TFT to my treatment. I figured what harm could adding this therapy method, possibly do.

I started by checking for “psychological reversal” (PR), meaning that the conscious mind is in agreement of the subconscious mind. Simply speaking that a positive statement will not weaken a strong muscle and a negative statement will weaken the strong muscle. If you weaken to the positive and are strong to the negative you are PR and will probably not have positive results from what every system of health care treatment you are receiving for your problem. This is usually the case in all chronic conditions, in the case of chiropractic care having to treat by adjustment the same vertebra subluxations every visit.

In the case of this foot/ankle problem I took part of NET and traced through muscle testing with the patient stating the source of this problem was connected to a specific period of time, and in this case it turned out to be age 26. In this particular case that was more then twenty years before. So, why is this associated with a current injury and problem? I do not have any logical answer to this question, but I can tell you that after I found her associated point to this problem, in her case over her jaw joint (TMJ), small intestine (SI-19). We graded this with Subjective Unit of Discomfort at a “6” on a scale of 0 to 10. While she thought about her symptoms I proceeded to tap SI-19 both right and left and reevaluate every 30 seconds which took a total of 90 seconds all the pain was gone and has not come back for the past ten months. Not bad for the price of admission!

Another interesting case referred to my office two years ago, with a history of a fall on steps and hitting the back of his head. He was examined at the hospital and released, no fracture or concussion noted. Some weeks later while at work he passed out or fainted for about 30 seconds, this is known as syncope. Shortly thereafter he started with severe headaches and neck pain that was continuous with migraine headaches about 4 times a week, and episodes of syncope 8 or more times a week. His has been evaluated at Columbia Presbyterian Hospital and at John Hopkins University neurological centers. No specific causes have been found for the continued symptoms and various medications have been tried with no success. My care is the only thing so far that has given any relief. During his August visit he mentioned that he was just evaluated at John Hopkins and was given a twenty page questionnaire, which had many psychological overtones, so I decided to try TFT.

My examination using TFT gave me a SUD level of “9” for the migraine level of pain, my treatment point was Gall Bladder or GB1. I initiated treatment by tapping GB-1 and repeated till my SUD level was zero, when I finished the headache was gone. Patient continued to use the tapping of this point and this continued to work for a month. He returned a month later with a level of “9” migraine. I found another point that needed to be treated which was SI-19 over the TMJ, this cleared the pain completely.

I have now added a psychologist to the office to help with TFT services.