Experimental

INSTRUMENTAL RESPONSE TO ADVANCED KINESIOLOGY TREATMENTS IN A "CONDITIONED" SPACE

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ABSTRACT

A "conditioned" laboratory is like a "sacred" space in that it manifests a higher electromagnetic gauge symmetry state than a normal environment. To test whether or not such a laboratory is also a very sensitive detector of subtle energies, we performed advanced kinesiological treatments on three subjects, with fairly difficult health challenges, within the confines of such a laboratory that was multiply instrumented to remotely monitor energy exchanges that might occur. Highly treatment-correlated, large amplitude signature, multiple perturbation responses simultaneously appeared in the data streams from five of these instrument stations. Such a "conditioned" laboratory is definitely a sensitive detector of subtle energies.

KEYWORDS: Kinesiology, "conditioned" space, subtle energy emission, instrumental detection

INTRODUCTION

In an earlier paper a discussion was provided of the general procedure utilized to "condition" a laboratory so as to manifest a higher physics Gauge symmetry state.[1-3] Instrumental indicators of a mixed U(1)/SU(2) Gauge symmetry state had been evident in the Payson Laboratory for some time, via a variety of anomalous signal events prior to our conducting the present experiment.[4] From this, two of us (WAT and WED) had reached the tentative conclusion that the measuring instruments of such a laboratory constituted an extremely sensitive detector of one or more types of subtle energy perturbations occurring in the general environment, much like the RNG-revealed (random number generator) phenomena of Nelson and Radin.[5] This postulate was supported by the theoretical perspective we utilize that a "conditioned" space represents a vacuum state containing stable domains of order in a vast territory of complete disorder.[4] A part of our "working hypothesis" was also that RNG devices could reveal temporal departures of the completely amorphous local physical vacuum from its normal U(1) Gauge symmetry condition (complete disorder).

When Dr. Krebs, an internationally known teacher and practitioner of advanced kinesiological techniques, asked one of us (WAT) if he might visit Payson to discuss *future* collaborative experiments, the answer was "yes" and the present experiment spontaneously unfolded as a "trial balloon," so to speak.[6] Serendipity provided us with three subjects in need of treatment for chronic health challenges so we set up a treatment table in the laboratory upon which the subjects could be treated by one of us (CTK). The other two, observed, made time-marked notes and monitored the various measuring instruments.

The next section describes some essential aspects of the kinesiological procedures utilized as well as the various instrumental stations in the laboratory that were continuously recording their particular measurements. The following section shows the very exciting results of this pilot experiment while the last section discusses some of its implications for subtle energy research and energy medicine research.

For some readers, the following may be a useful glossary:

pH: This is a quantitative measure of the hydrogen ion, H^+, concentration in an aqueous solution.

Fourier Spectrum: Any spatial or temporal pattern can be exactly decomposed into a set of waves having a range of frequencies and amplitudes. The plot of amplitude as a function of frequency for this wave-set is called the pattern's Fourier spectrum that consists of the fundamental frequency and all it's higher harmonics.

Deltrons: Postulated particles from the emotion domain of reality that couple coarse, electric, particle substance traveling at velocities less than electromagnetic (EM) light with fine, magnetic, information wave substance traveling at velocities greater than EM light.

D-space Level: This level of physical reality has a space-time reference frame (RF) useful for describing the many qualities of coarse, electric particle substance.

R-space Level: This level of physical reality has a reciprocal space-time RF useful for describing the many qualities of fine, magnetic information wave substance.

BRIEF KINESIOLOGY TUTORIAL

General Background

Kinesiology is a type of biofeedback using subconscious muscle response to detect "stressors" within the body. Kinesiology uses manual monitoring of specific muscles, which may either "lock" and hold strong, or "unlock" and give, to determine imbalances of stressors not only within the muscle systems themselves, but also within interfacing subconscious body systems. These systems include not only the generally recognized autonomic and proprioceptive feedback of the nervous system, but also the subconscious emotional and mental processes underlying our feelings and thought. More importantly from the point of view of these experiments, the subconscious muscle system also interfaces with the subtle energy systems of the body, the Chakra-Nadi system of the Yogis and the Acupuncture meridian system of Chinese Medicine. An in-depth presentation of Kinesiology is beyond the scope of this paper, but has been presented elsewhere.[6-8]

Initially, kinesiology was applied only to muscle imbalance and feedback of subconscious nerve reflexes but, early on, a fairly consistent experimental relationship was observed in Applied Kinesiology (AK) between specific organ or gland dysfunction and weakness in specific muscles.[9,10] These findings led

to the development of the Muscle-Organ/Gland-Chinese Meridian matrix, in which imbalances within organs or glands and their associated meridians were linked to specific muscle imbalances.[11,12] Thus, when a muscle is monitored manually, it can respond to disturbances or imbalances within Qi flow of the Chinese meridians or Pranic flows within the Chakra-Nadi system by suddenly "giving" under pressure when linked to a meridian or chakra via touching the acupoint or nadi point while simultaneously monitoring the muscle. This permits detection of energetic stresses affecting the body's function.

The Chinese meridian Qi flows and Chakra-Nadi pranic flows directly affect the physiological function of the organ, glands and nervous system, and are important for the maintenance of homeostasis.[13] Detection of imbalances and "stressors" affecting these systems then provides a means to locate effective acupressure corrections to eliminate these imbalances normalizing physiologic function.

Likewise, subconscious emotional and mental "stresses" can also lead to imbalance in these energetic systems, with concomitant disturbances of underlying physiology, and these "stresses" can be identifiable by muscle response.[14,15] The Chinese even associated specific emotional-mental states to specific meridian Qi flows several thousand years ago.

ADVANCED KINESIOLOGY PROCEDURES

The observations and principles of AK were extended to include a synthesis of acupressure and physiology labeled Applied Physiology (AP) by its founder.[12] AP formatting is a procedure of stimulating a combination of acupoints associated with a specific physiological system or anatomical structure while a muscle is monitored. This provides a means of detecting imbalances or "stressors" affecting very specific components of these systems or structures via a change in muscle response. Once an imbalance has been identified, application of various acupressure techniques can release the "stressor" affecting that system or anatomical structure resulting in a return to normal function.[6]

The LEAP® program was developed using the concept of AP acupressure formatting and applying it to specific brain functions. Specific sequences of acupoints are stimulated to activate both cortical or subcortical brain structures

such as the occipital lobes or amygdala, respectively.[6] Then via muscle response, any "stress" or imbalance within specific brain structures can be detected. Once a "stressed" function has been located, application of standard LEAP® and Applied Physiology acupressure techniques effectively resolves the "stress" normalizing function.

The acupressure treatment is accomplished either with finger pressure, or with a specific acupoint stimulator called a Tei Shin, or needleless acupuncture by the Chinese who developed this technique. Acupressure has a number of advantages over traditional acupuncture in this application, as it is non-invasive, not painful, and well tolerated by people. Also, the problem of sterile needles and bleeding are eliminated. Most importantly, the LEAP® acupressure corrections rely on multi-point sequential stimulation, something very difficult to achieve with needles, and are not part of traditional acupuncture theory. However, this multi-point sequential acupressure stimulation is capable of powerfully stimulating specific brain structures and re-synchronizing brain function, as evidenced by the profound changes in people's performance on standardized psychological tests, and in the classroom following LEAP® treatment.

EXPERIMENTAL PROCEDURES

Three initial subjects were chosen to represent several physical, physiological, and emotional/mental conditions to which AP and LEAP® acupressure formats and corrections would be applied. No description of the specific medical challenges borne by these subjects is given because it did not seem particularly relevant to the results obtained.

Several locations in the lab were chosen to be instrumental monitoring stations prior to this experiment. The purpose of these stations was to allow us to monitor the progress of "space conditioning" at different locations in the lab to determine if some "structure" in the local vacuum of the lab space might be detected. This was accomplished by recording different physical and chemical material properties at the various stations shown in Figure 1 as well as others not shown. At most stations, the pH of purified ASTM type I water was monitored continuously via computer.[4] At all stations either the air temperature or water temperature or both was monitored continuously using both

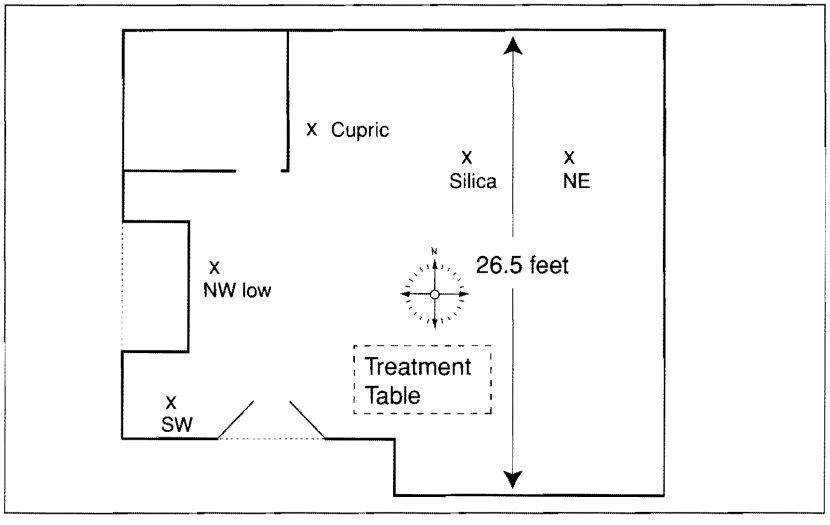

Figure 1. *Location map (scale shown) showing positions of various recording stations in the Payson Lab.*

high resolution (0.001°C) and lower resolution (0.1°C) thermister-based digital thermometers. pH was measured using Accumet 50 & 150, Denver Instruments 225 and Orion SensorLink® pH meters with high performance, combination pH electrodes (automatic temperature compensation).[4] The measurement accuracy was better than ±0.01 pH unit while calibration involved the use of buffer standards pH 4 and pH 7. Measurements and calibration were performed by placing the pH electrode in unstirred solution and recording the pH-time variation via computer.

EXPERIMENTAL RESULTS

Measurements of pH typically exhibited oscillations in-phase (or 180° out-of-phase) with temperature fluctuations occurring in the lab air space.[1,4] This has been a consistent "signature" of the development of "conditioning" in this laboratory space. In fact, dependence of pH on a variable (air T) not directly related to the pH measurement (as the water temperature would be) demonstrates that some mixed U(1)/SU(2) EM Gauge symmetry condition has been attained.[4] Figure 2 illustrates the kind of variation in pH that was

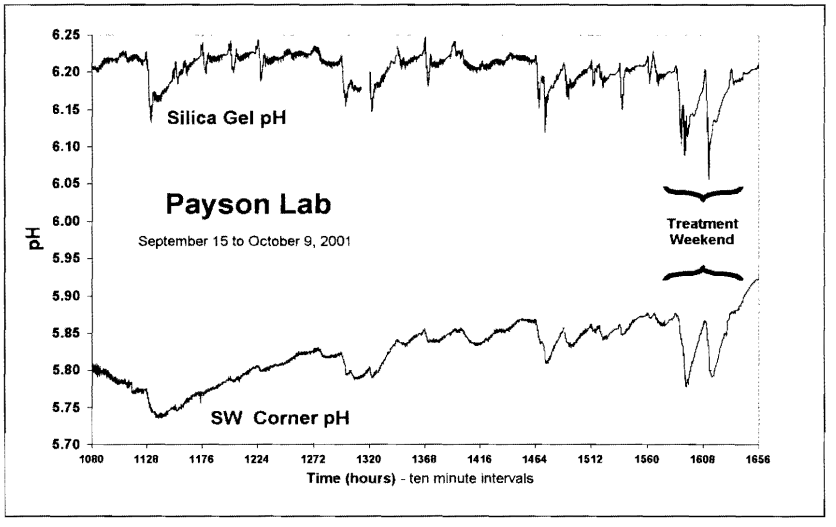

Figure 2. *pH vs. time plots for the period of kinesiological treatments plus the prior 21 days before treatments.*

observed in the 21-day period immediately preceding the weekend during which kinesiological treatments were performed in the lab space. *Note the increase in amplitude of pH fluctuations during the treatment period.*

Previous fluctuations occurred regularly sometimes showing a diurnal rhythm but often occurring for unknown reasons. The pH at the silica position shown in Figure 1 represents the measured pH for a solution containing 1g/250 ml silica gel. The much higher pH levels for this solution are due to preferential adsorption of hydrogen ions on silica. Figure 3 illustrates the pH and dissolved oxygen levels measured at the various locations near and during the time of treatments. Levels of dissolved oxygen in water were measured at the NEC location. The onset of the first major pH drop occurred just *before* treatments began. Such precursor changes are not unusual in the conditioned lab space and are thought to represent changes in U(1)/SU(2) symmetry from focused discussion prior to actually starting the experimental treatments. Note how all the pH measurements shown change in concert during the weekend treatment period even though they were separated from the treatment area by several meters (see Figure 1). Smaller fluctuations are due to changes in the air temperature, a characteristic of conditioned spaces as

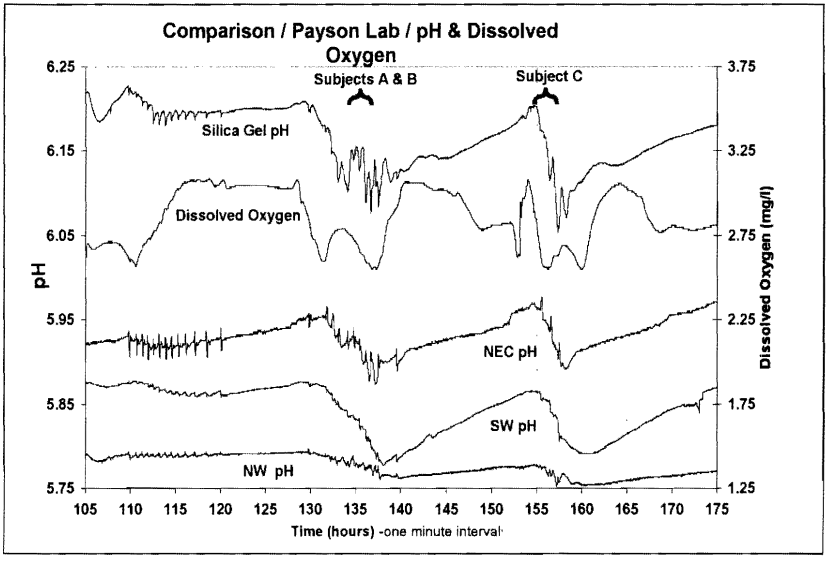

Figure 3. *pH vs. time plots for the period of kinesiological treatments plus the day before treatments.*

mentioned above. The detail illustrated in Figure 4 shows the changes in pH during the following day treatment period with subject C. This detail reveals how the change in air temperature cycles correlate with the detailed changes in pH during this time period. It should be emphasized here that simultaneous measurements of water temperatures did *not* show fluctuations that can account for the pH excursions at the time of the changes in air temperature. Note the completely different response of pH to the air temperature fluctuations at each location. This is not consistent with standard physical chemistry but is quite common experience in this conditioned lab space.

DISCUSSION

It seems clear from Figures 2 to 4 that some type of "special" energy exchange occurred between the treatment subjects and the laboratory environment in response to the specific kinesiological adjustments. Further, by some presently undiscriminated mechanism, all five of these laboratory instruments responded

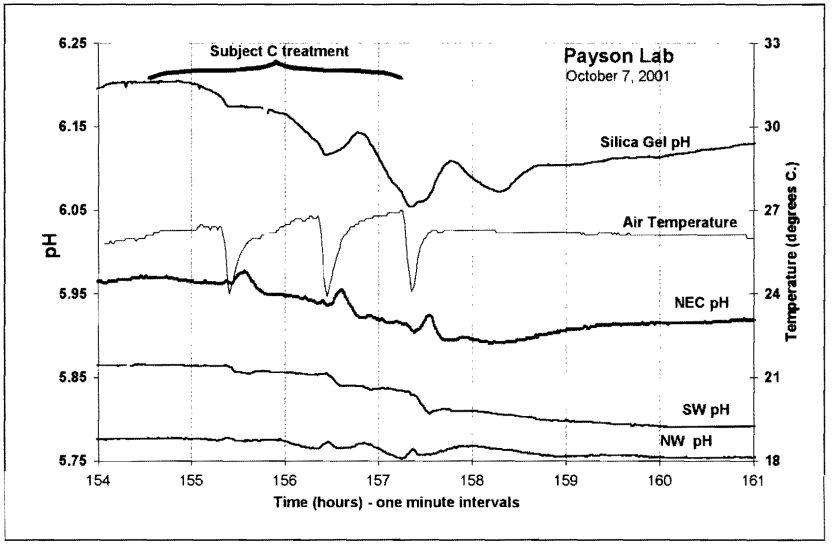

Figure 4. *pH and temperature vs. time plots for the period of kinesiological treatments.*

in a correlated way to the energy exchange. Some possible correlations between persons entering the lab and pH drops had been noted before, but the magnitude of the changes observed in Figures 2 and 3 made us confident that such correlations were indeed real and reproducible. In a broad sense, one can say that the "healing" treatments significantly perturbed the laboratory's energetic "condition," as indicated by Figure 3, and that it had a definite after-effect as can be seen in the long-time record of Figure 5.

In order to explore what happened in the laboratory during this weekend event, we wanted to compare the three behaviors; (1) pre-event period background data, (2) the 48 hour event period data, and (3) post-event period background data for the silica gel pH station. We decided that the Fourier spectra of these three periods might reveal some useful clues. Figures 6a and 6b highlight the pre and post, respectively, diurnal cycle amplitudes in the Fourier spectrum for the 28.44 days on each side of the event. The fundamental and its first five harmonics are clearly seen for the diurnal cycle in Figure 6a and with their relative amplitudes somewhat changed in Figure 6b. Figure 7 provides the Fourier spectrum for the event weekend which, because the period constituted only ~2 days, does not provide a great deal of clear structure.

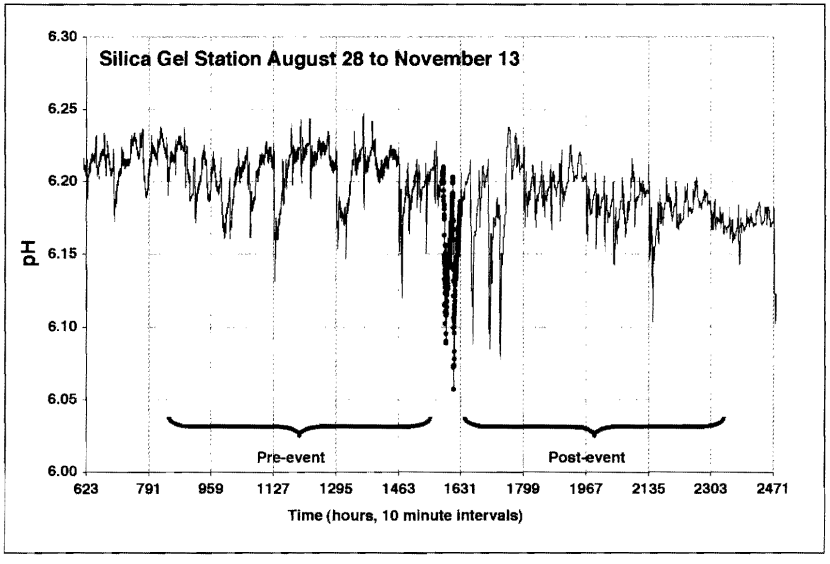

Figure 5. *pH vs. time plot for the time period including kinesiological treatments (circles) plus the 5 weeks before and after treatments.*

Figure 8 provides Fourier spectral amplitude data variation for the diurnal cycle and its first three harmonics over a ~150 day period surrounding the event weekend while Figure 9 sums these amplitudes for this fundamental and its first three harmonics. From these two Figures, one can see clearly that the "treatment" event produced both a significant magnitude short-term perturbation and long-term "after-shock" undulations of remarkably large amplitude. Figure 10 shows the weekly cycle analogue to Figure 9 and we see that the weekly cycle is growing steadily stronger in the post event period. Exactly what these undulations and aftershocks mean is not yet apparent. Much more data of this type gathered in a "conditioned" vs. an "unconditioned" space will be needed before a reliable pattern of understanding emerges. Changing the direction of this discussion, one might rightfully ask "Is there some system or mechanism in human subjects allowing them to broadcast such "release" signatures that are clearly registering themselves at these five experimental stations?" A single type of observation suggests that there is!

It is a fairly common experience in advanced kinesiology studies that a practitioner can slide a small DC magnet (with a central hole) onto the tip of his/her

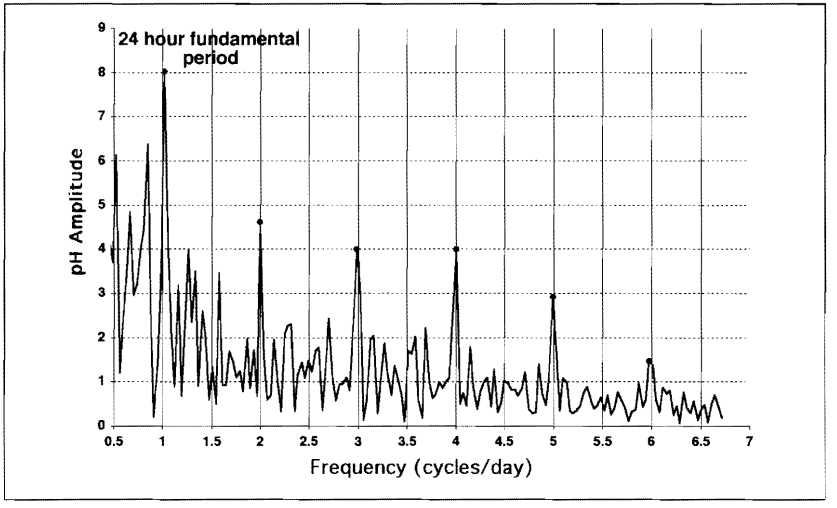

Figure 6a. *Fourier Analysis of the silica pH time series for the period including 28.44 days previous to the treatment week (Pre-event period shown in Figure 5). The fundamental and 5 harmonics of the* ***daily*** *cycle are clearly seen in this segment of the Amplitude-Frequency plot.*

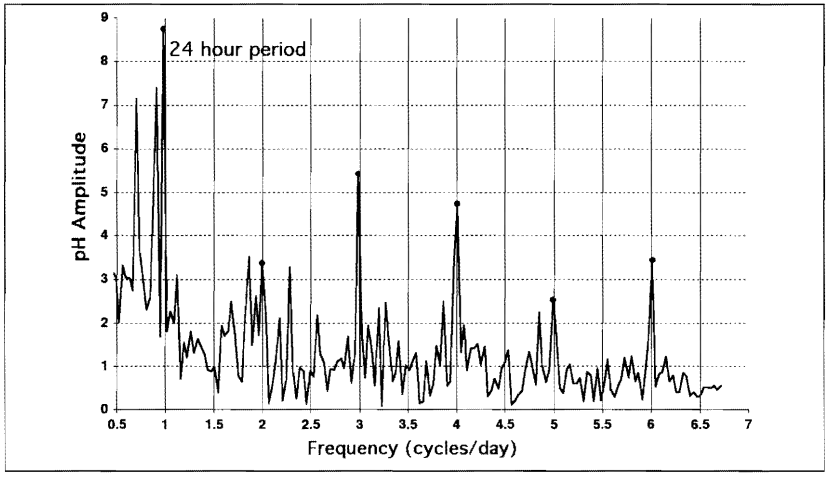

Figure 6b. *Fourier analysis of the silica pH time series for the period including 28.44 after the treatment week (Post-event period shown in Figure 5). The fundamental and some harmonics of the* ***daily*** *cycle are seen in this segment of the Amplitude-Frequency plot but it is evident that the harmonics are not as consistently developed as is seen in Figure 6a.*

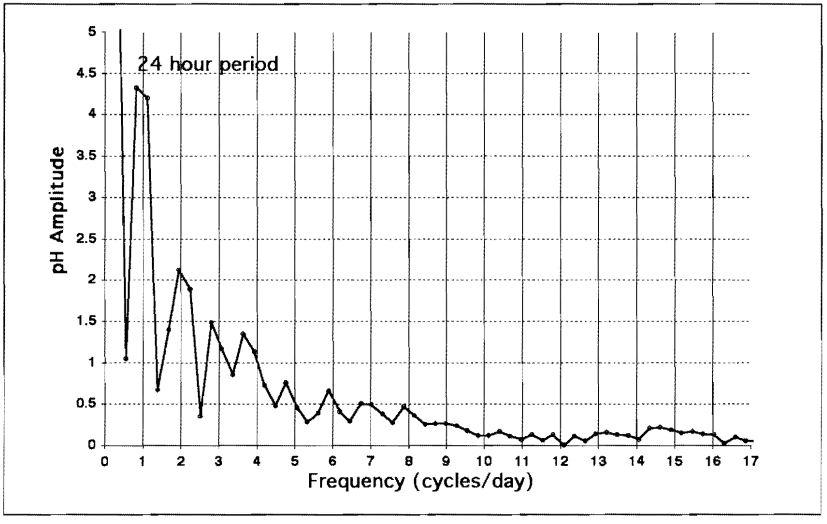

Figure 7. *Fourier Analysis of the silica pH time series for the period including Oct 6 to Oct 10 during the treatment week. The fundamental and some harmonics of the* ***daily*** *cycle are seen in this segment of the Amplitude-Frequency plot.*

finger and, bringing this finger/magnet into the biofield of a particular muscle group of a client, can either strengthen or weaken this muscle group *depending upon which pole points towards the muscle group.* The south-pole facing the group strengthens the muscle while the north-pole facing the group weakens the muscle's response. Thus, since our normal U(1) EM gauge symmetry would not exhibit such a DC magnetic field polarity effect but the higher SU(2) EM gauge symmetry would, it indicates that the human acupuncture meridian/chakra system is probably functioning at this higher EM gauge symmetry level while the rest of the body functions at the lower EM gauge symmetry level.[4] This is exactly the same type of experimental observation that was used to prove that a "conditioned" laboratory space had been transformed to a higher EM gauge symmetry level than that of our normal, cognitive domain (the U(1) level).[1,4]

One consequence of the foregoing EM gauge symmetry difference is that the thermodynamic free energy of the acupuncture meridian/chakra system is at a higher magnitude than that of our normal, cognitive world. This is illustrated in Figure 11.

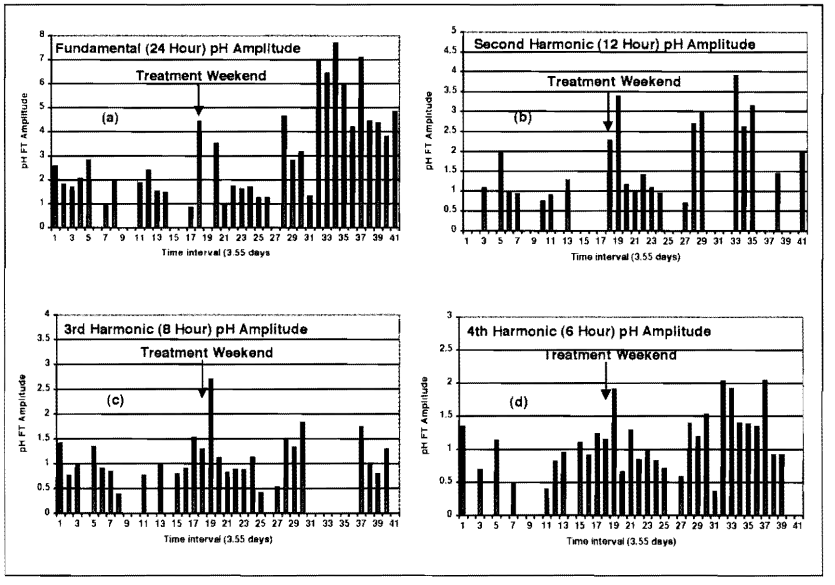

Figure 8. *Column graphs showing variation in amplitudes derived from spectral analysis of pH time series data shown in Figure 5. For each 3.55-day interval, the amplitude of the fundamental periodicity (diurnal) was determined from a Fourier analysis and plotted as shown. (a) Fundamental (24 hour) frequency, (b) through (d) 2nd through 4th harmonics, respectively.*

What this means is that useful work is automatically pumped from any of these states X, Y, SU(2), Z, etc., to the U(1) EM gauge symmetry world provided some conduit can be made between them. Thus, if a single organ or system of the human body was elevated to one of these higher symmetry states at birth and the rest of the body was not, seemingly all functions of the body could be driven by this energy source to exhibit what we call life; i.e., the heart would pump blood, nerve synapses would switch on and off, electric currents would flow, the brain would be activated to direct various body processes, etc.[1,4] This differential system can be labeled a "chi/prana pump" and, as long as the flow rate of this "fluid" at the fine information wave level (R-space level) of the body's physical reality is sufficient to nourish all of the terrain at the coarse particulate level (D-space level) of the physical body, physical health is satisfactorily manifested.[4] However, if some stagnation or blockage occurs in one or more branches of the chi/prana flow field, then pathology can begin to develop in this outermost layer (coarse particulate level) of the human biobodysuit.[4]

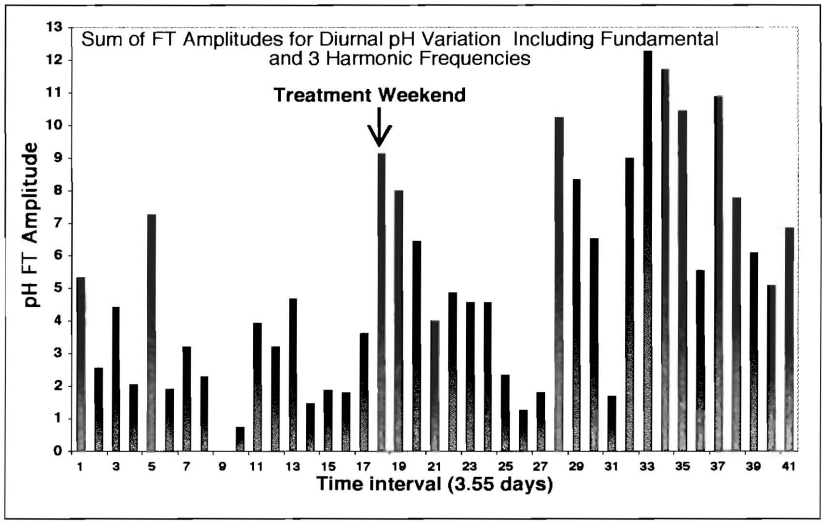

Figure 9. *Column graph showing variation in sum of fundamental and 2nd through 4th harmonic amplitudes derived from spectral analysis of the pH time series data shown in Figure 5.*

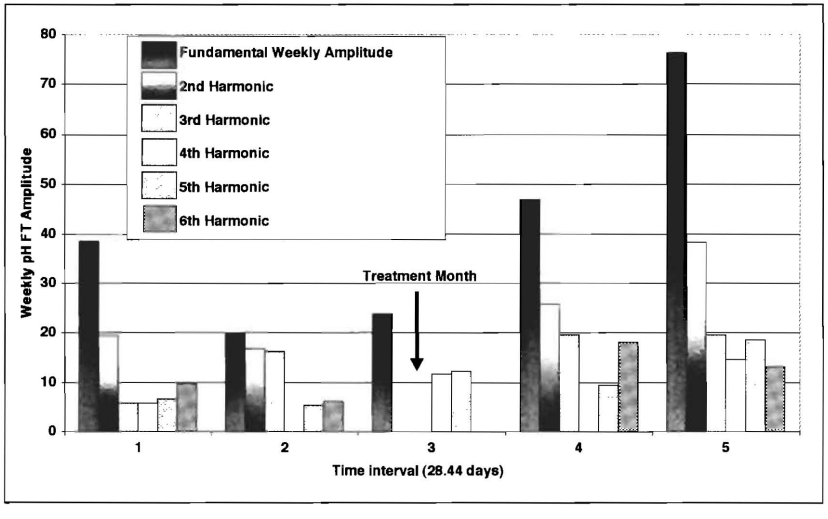

Figure 10. *Column graph showing variation in weekly periodicity for fundamental and 2nd through 6th harmonic amplitudes derived from spectral analysis of the pH time series data covering the ~2.5 months previous to and after the treatment week.*

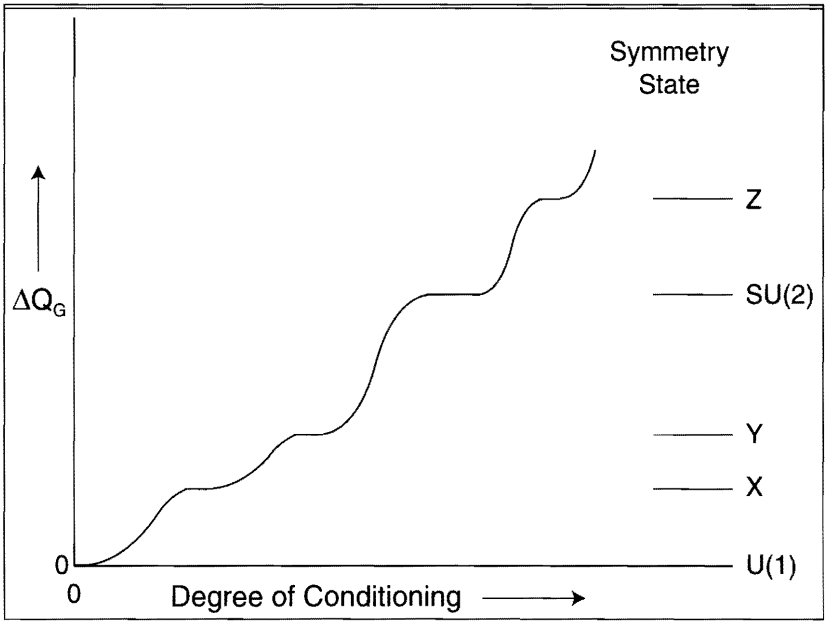

Figure 11. *Schematic illustration of free energy change, ΔQ_G, from the ground symmetry state, U(1), as the degree of locale conditioning increases.*

In the theoretical model used by us to understand this type of process, a higher dimensional substance called "deltrons" from the higher dimensional emotion domain (a nine-space), acts as a *necessary* coupler between the electric-monopole substance of the coarse particulate level and the magnetic-monopole substance of the fine information wave level of physical reality.[4,16] Human intention and consciousness appear to act directly on the deltron coupler substance and thus have an indirect influence on all physical aspects of the human body.[4,16]

The general picture that we would like to leave with the reader as we close this discussion section relates to both how we operate in life with respect to one another and how energy/consciousness emissions can occur when kinesiological manipulations of specific acupuncture meridian circuits restore balance by unblocking stagnated channels of chi/prana flow. Figure 12 illustrates this general picture, whether we be a minister, a healer, a medical doctor, an acupuncturist, a kinesiologist, a performer, a spouse, a

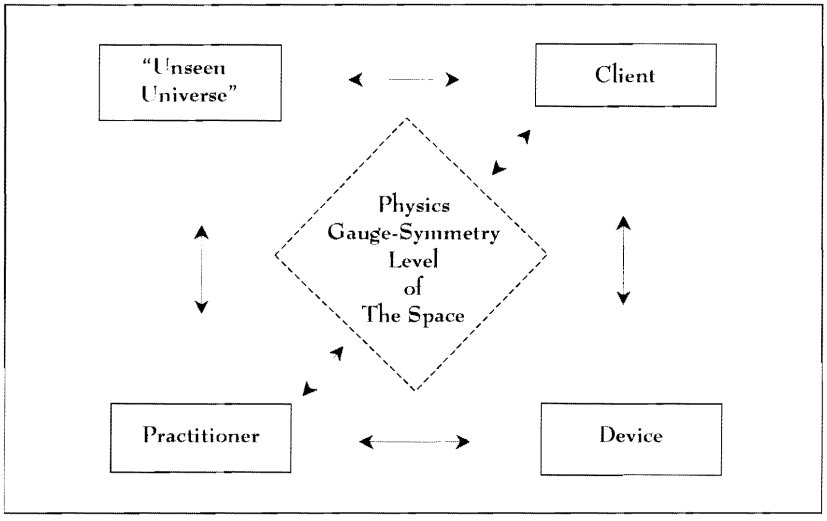

Figure 12. *Schematic illustration of the five key interactive elements involved in any human exchange.*

parent, etc.[17] Usually, all five components of this figure are intimately involved in the interaction even though the practitioner, using some device, may only acknowledge that they and the client are involved in the process. However, it is sometimes the chi/prana pump of the practitioner alone that raises the local EM gauge symmetry state of the room to a level where higher dimensional forces can unblock the client's stagnant irrigation levels at the R-space level of their physical body. Sometimes it is simply the practitioner's love, compassion, devotion to service and intent that can elicit the "unseen" assistance of the universe to co-raise the EM gauge symmetry of the intervening space allowing the intention to be more empowered. Finally, sometimes it is a musical performer augmenting their instrument sounds with their own subtle domain modulations from their chi/prana pump that increases the overall effectiveness of a healing process for someone in the audience.

The point that we all need to realize is that (1) material properties are EM gauge symmetry specific, (2) that all humans (and probably all vertebrates) have their own chi/prana pump that, via focused intention, can metastably raise the local EM gauge symmetry of their surrounding space and (3) this can produce

healings of great variety. We also need to realize that, when an obstructed infrastructure circuit at some level of the human biobodysuit is restored to harmonious balance, a pulse of released energy/consciousness manifests and this complex signal can be detected by physical-type instruments that have been "raised" in functionality by being part of a laboratory space at a higher EM gauge symmetry level associated with a "conditioning" process path underlying the data represented by Figures 2-4.

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ACKNOWLEDGEMENT: We wish to thank Ditron, LLC and the Samueli Institute for partial support of this work.

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