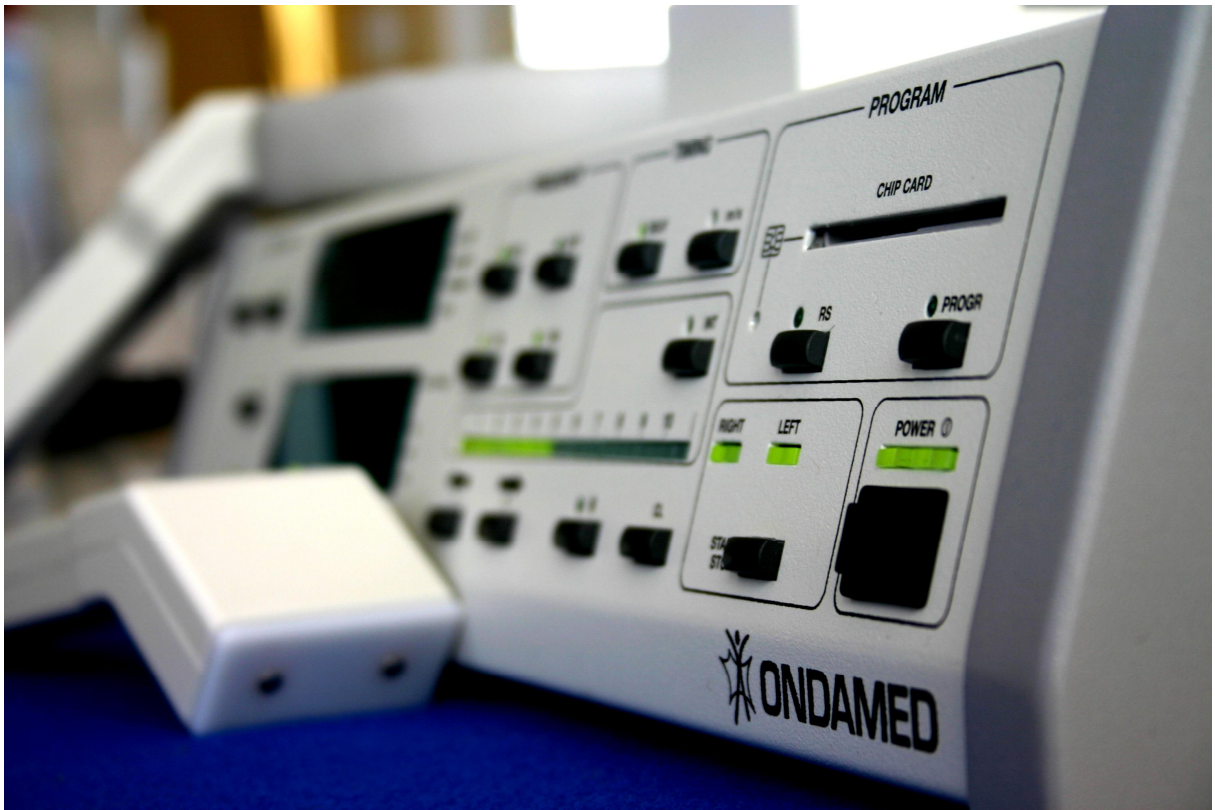


ONDAMED®



A METHOD

DESIGNED FOR YOU

TO SUCCEED WITH YOUR PATIENT

By Wolf-Dieter Kessler, M.D.

It feels so deeply a part of my “destiny” to have become aware of the revolutionary work of energy medicine and the central role of the ONDAMED system in the area of biotechnology and treating illness at its origin rather than symptomatically . I feel blessed and honored as I approach formal association with your wonderful organization and evident shared value of service and devotion to healing and wellbeing through state-of-the-art bio-technological assessment, diagnosis, and interventions with precision and cost-effectiveness in authentically +proving “excellence” in healthcare.

With gratitude and kind regards,

Michael J. Perkins Ph.D.

Licensed Clinical Psychologist
Transformational Coach
Suite 207, 1709 Colley Avenue
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simplify, simplify, simplify

~Henry David Thoreau (1817 –1862)~

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**INTERNATIONAL ONDAMED SYMPOSIUM
MARIOTT HOTEL, BROOKLYN, NEW YORK
OCTOBER 2006**

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ACKNOWLEDGEMENTS AND THANKS TO:

ABOUT THE AUTHOR

Dr. Kessler is the Chief Medical Advisor for Ondamed Inc., USA and Ondamed GmbH, Germany.



Wolf - Dieter Kessler

Wolf Dieter Kessler, MD, has been a physician for 34 years. His clinic in Northern Germany is a leading institute for treating acute and chronic diseases. He was part of the lung transplant team at Montefiore Hospital in New York performing mainly electron-microscopical research on both human and canine transplanted lungs.

I was confronted with a health problem 36 years ago after contracting a chronic infection (Lambliasis and Coxsackie B4) in India and became highly allergic to almost anything. The lack of satisfactory help in conventional medicine made him hunt for both advanced conventional and complementary treatments.

In the late 1980's, I went into private practice in Germany and today employ 9 qualified nurses. The encounters with ONDAMED® have substantially influenced the therapy potential of my clinic. The ONDAMED® device has become an indispensable tool to my clinic for effective therapy results.

Below:

Kessler Clinic and Staff, Victorbur, Germany



COMPANY HISTORY

ONDAMED® GmbH, was founded in 1994 by Rolf Binder, who developed the ONDAMED® Biofeedback System after 25 years of research in biophysical medical testing and therapy. Binder is well known for developing Bioterrain and EAV measurement devices, and other medical electronics equipment.

Inventor & Founder: Rolf Binder

Over the past 20 years Rolf Binder has been working as an electronics engineer "specializing in" technology and medical electronics. He was the leader of several Research & Development divisions of German medical equipment companies focusing on biophysical testing and therapy applications. Binder developed a series of well-established and known therapy systems. The idea for a new therapy evolved due to the shortcomings of existing modalities. In 1993, Binder founded his own company and worked on the development of his new invention. The first prototype was built and in 1994 the ONDAMED® System was launched in Germany. In 2002, Ondamed GmbH opened its U.S. subsidiary, Ondamed Inc., in New York. The Ondamed companies enjoy working with practitioners from around the world.



Rolf Binder

President & CEO: Silvia Binder (aka Locke)

Silvia Binder became President/CEO for the U.S. subsidiary in 2002 and in 2006 she was additionally appointed President for the German parent company. Silvia brings entrepreneurial leadership with a great deal of international experience to the management team. She previously managed both start-ups and on-going operations in the U.S. for a large German semiconductor company. Her experience in business, marketing and finance draws from 16 years of professional accomplishments. She enjoys, "bringing people and continents together that share a common goal in the interest of serving people."



Silvia Locke

Below from left:

George Hamilton, Rolf Binder, Silvia Binder: A4M American Academy of Anti- Aging Medicine, Las Vegas in December 2006



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WHAT IS ONDAMED®?

ONDAMED® is an electromagnetic frequency device that offers a highly specific biophysical analysis and application based on electromagnetic inductivity. Its principles are based on biophysics. Using the patient's pulse as the biofeedback method, the practitioner rapidly scans the body's preferences, determines interference fields, and simultaneously delivers the frequencies that will support the patient's physical and emotional well-being.

The ONDAMED® Biofeedback System makes any current treatment protocol work faster and more effective, as has been proven for the past 13 years. ONDAMED® is a simple and gentle, yet very effective application used for the purposes of supporting healing.

WHO CAN BENEFIT FROM IT

ONDAMED® can be effective for all your patients!

For several decades numerous cases of patients have shown that ONDAMED® unravels complexities that defy medical understanding, potentiating the body's ability to regulate itself and repair itself. Whether you are a medical practitioner or psychotherapist, ONDAMED® will be a valuable addition to your practice and an effective tool for virtually any patient.



The frequencies of the ONDAMED® System break through disordered cellular communication in a stream of intermittent impulses or waves. Hence the name "ONDAMED®" derives from the Latin word "onda" for wave. This pulsatile delivery gives the body time to create counter impulses. The pauses between the wave impulses serve to activate a regulating response in the cells, thereby allowing the body to activate a regulating response in the cells. Consequently, stagnant conditions are transformed into active conditions in the process of normalization.

This transformation leads the body through a rapid reversal of symptoms. A self-healing process will be induced and the patient will respond. Among others, theorist Hans-Heinrich Reckeweg has argued that physics proceeds from the cellular to the humoral level as the organism seeks to repair whatever damage it has suffered. ONDAMED® demonstrates the wisdom of this brilliant physician.

REGULATORY STATUS

In Europe the ONDAMED® System is CE certified as a Class II Medical Therapy Device. The Medical Device Certification GmbH audit has proven that this quality meets all requirements according to Annex VI – Section 3 of the Council Directive 93/42 EEC of 14 June 1993 concerning medical devices.

In the U.S. it is registered with the Food and Drug Administration as a Biofeedback Class II medical device, Category Neurology. In addition, ONDAMED® has been approved as a Non-Invasive Secondary Therapeutic Device by AAABEM, an Institutional Review Board for research of treatment of various disorders, which alleviates pain, discomfort or general malaise.

HEALING ENERGY and JUMP STARTING IT BY MEANS OF PHYSICS

When you become a patient yourself, you are suddenly left with unanswered questions. Why is the repair not activated naturally? Why is it necessary to trigger healing by external signals such as medications or innovative medical devices based on the principals of physics? Will the medication cut through the problem and do the job? How much can we expect?

The vision is that, as physics precedes chemistry, it should be the basis for any therapeutic attempt. While chemical reaction takes a time span of milli seconds, information exchange in electronic conduction takes only femto (10 to the -15) seconds That would mean walking from San Francisco to New York versus a flight with Delta Airlines.

If you have a phobia for physics, you are in excellent company!

1. ELECTRONIC CONDUCTION

Healing energy is believed to be energy of a specific frequency pattern, may it be produced by verbal impulse, or by medical devices based on the principles of physics, or by chemical- , plant- , or homeopathic medication.

Following physical laws, it will stimulate the repair by electronic conduction. Most of us become aware of the ruling power of physics in conventional medicine sooner or later when we ourselves become a patient under the MRI. Not too long ago, scientists who suggested using the electromagnetic emission of the hydrogen atom to produce images for diagnostics had been declared as complete idiots.

If healing is badly needed, it takes vision on the patient's end and the physician's end. There have always been great visionaries who have been aggressively opposed by their peers at the beginning. (Albert Szent-Györgyi 1941, Robert O. Becker 1990) see further below.

2. EXTREME LOW FREQUENCIES (ELF)

Rolf Binder, the inventor of ONDAMED® knew about the discovery by medical researchers to employ magnetic pulses for 'jump starting' the repair mechanism. He favored the extreme low frequencies (ELF), knowing from other researchers that ELF provided a powerful healing approach to the patient's problems. Consequently, while a variety of different frequencies from extremely (ELF) low up to 27 million pulses per second are being used, ONDAMED® is focusing on ELF. The ELF range is arbitrarily defined as frequencies below 100 Hz (Miller 1986). However, ONDAMED® is also using frequencies up to 32 000 Hz, which is still not very high. Through harmonics there will always be also other frequencies involved. You will learn later, that our life is coupling with the low frequency Schumann resonance system, which ranges mostly within 7 – 10 Hz, in special conditions up to 40 Hz. Since our brain waves operate in exactly the same frequencies, I felt blessed when my wife handed me the book of P. Fred Gallo, who introduced Harold Saxton Burr's research on electrical 'Life Fields' to me. Counting one and one together, it made me think!

3. DEFINITION OF ONDAMED®'S WAVE

Low frequencies provide a very long wave length. According to the equation $C = F \times L$ the definition of the ONDAMED® wave is described below

C: the speed of light

F: Frequency

L: Wave length

In other words: if you treat a patient with an ONDAMED® wave of 1 Hz, the wave length will be 186,000 miles long. That is half the distance to the moon.

ELF will all have a very long wave length. Einstein received his Nobel Prize for his findings, that all waves have a dual quality: they are both wave like and particle like. The longer the wave length, the less particle like it is. While long waves are extremely life supporting, short waves with high frequencies such as X-ray, Gamma waves, micro-waves etc. are dangerous and harmful.

ONDAMED®'s waves are very long waves, contain very few particles and consequently are life supporting.

4. SCIENTIFIC PROOF OF WAVE SPECIFICITY IN HEALING

A study performed by Giri Lyengar, M.I.T., Boston, MA, USA, at the (Massachusetts Institute of Technology) in 1996 stated that each human organ would emit a specific electromagnetic spectrum. Prior in 1995, Siskin & Walker listed some of the healing frequencies being tested in medical research laboratories and the types of tissues they affect.

2 Hz	Nerve regeneration, neurite outgrowth from cultured ganglia
7 Hz	Bone growth
10 Hz	Ligament healing
15, 20 and 72 Hz	Decreased skin necrosis, stimulation of capillary formation and fibroblast proliferation
25 and 50 Hz	Synergistic effects with nerve growth factor

Healing effects of specific frequencies (frequency window of specificity) (from Siskin & Walker 1995) in Energy Medicine by JL Oschman, 1988

4. ONDAMED®, THE INDISPENSABLE TOOL

Long waves, which have only very little particle quality lack the aggressive actions electrons might exert. Think about the electron spin of benzol, which causes many cases of leukemia each year. Long waves mainly exert resonance phenomena.

Through resonance, ONDAMED® will tell you where to go, what to treat and how to treat. This ingenious concept allows you to understand the individual story of your patient within a few minutes. For example: your patient may complain about tinnitus. ONDAMED® finds spots over the sinuses, right tonsil, and left kidney. It will further tell you that the ‘special frequencies’ are relating to the smaller intestine. The microorganism test may indicate Acidophilus. It will tell you, that the left kidney needs to be treated foremost. The left kidney will be the main focus.

The information you received within a few minutes is invaluable: tinnitus is caused mainly by a dysfunction of the left kidney caused by a bacterial (Acidophilus) dysbiosis in the smaller intestine. The terrain of the smaller intestine seems to be out of balance and you may think of food intolerance (dairy, flour, sugar, etc.).

Testing of the 173 programs may show resonance to program 72 (lymph activation, detoxification).

Consequences of your findings:

After all, you certainly know a whole lot more about the condition of this health disorder than traditional diagnostics would reveal. The interconnectivity of dysfunctions of organs, elements, vitamins, heavy metals, and microorganisms becomes transparent. The resulting therapy is a specific treatment of the left kidney with frequencies of the smaller intestine, treatment of the left kidney with acidophilus frequencies. A number of lymph treatments may follow.

Rolf Binder envisioned those facts and the needs for the medical community to qualify to understand both the interconnectivity of a problem and the harmonics to solve it.

Below

Treatment of both, left and right kidney, smaller intestine and a trigger point (see Hand Applicator at xiphoid) as found by ONDAMED®.



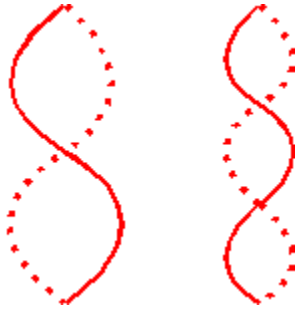
6. HARMONICS

See below about harmonics:

Consider a guitar string. It can vibrate in a simple back and forth motion:



But it can also vibrate in more complex ways, where each half or third of the string is moving in the opposite direction from its neighbors:



Naturally occurring waves in a guitar string involve all three kinds of vibration simultaneously, and an infinite number of others.

Each mode of vibration produces a simple wave with its own frequency and amplitude.

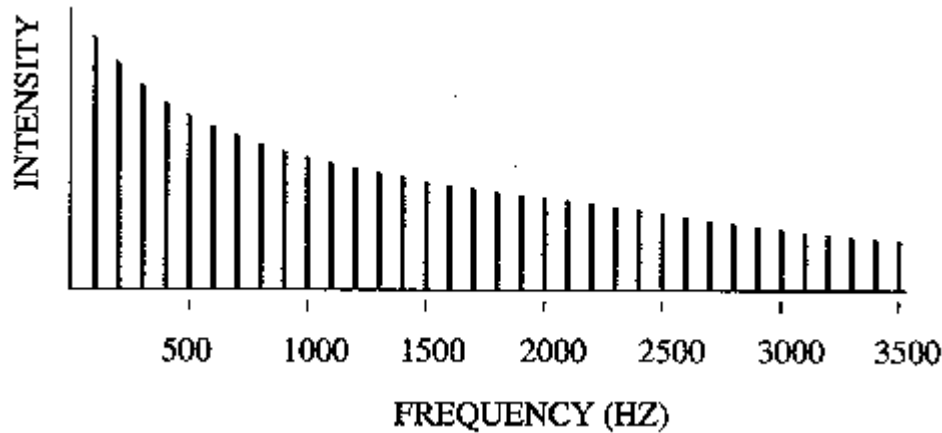
The frequency of the simple wave produced by the simplest back-and-forth motion is called the fundamental frequency.

The frequency of the simple wave produced by the second mode of vibration (where the string is vibrating in halves) is twice the fundamental frequency, or exactly one octave higher.

The frequency produced by the third mode (where the string is vibrating in thirds) is three times the fundamental frequency.

Each of the higher-frequency simple waves is called a harmonic. In naturally occurring vibrations, there is a harmonic at each multiple of the fundamental frequency -- theoretically all the way up to infinity, though the harmonics decrease in amplitude as the frequency rises.

The spectrum of the wave produced by the guitar string would look like:



7. ENERGY MEDICINE AND ONDAMED®, THE INDISPENSABLE TOOL

This part is about two subjects:

First: Energetic medicine using principles of physics has brought about great opportunities for the patient and the physician.

Second: ONDAMED® can play its role as an indispensable tool in clinical practice.

In a few decades scientists have gone from a conviction that energy fields in and around the human body are pure nonsense to an absolute certainty that they exist.

Over three decades I have practiced complementary medicine, techniques considered at best alternative and at worst quackish. More than once the irrational dismissal by my peers and German Medical Association left me dwarfed. To explain complementary healing methods such as “Homeopathy”, “Bioresonance”, “Electroacupuncture”, “Kinesiology”, or “Iridology” etc. in the conventional paradigm was extremely controversial and confusing if not

bluntly impossible. However, I have treated over 10,000 patients so far, and I know by daily observations and successes of my patients, that healing in modern medicine must have something to do with physics.

So I continued to “play” with the electromagnetic life-field (H.S.Burr, Yale University, 1972) of the patient.

I realized that an open minded consideration of using energetic medicine respectively physics has the potential to improve patients who did not respond to conventional methods before.

Even if a patient would develop cancer at a later stage of his life, he had miraculous healing outcome if he had been pre-treated with complementary methods some time before. I saw this both in cases of colon cancer and prostate cancer.

Clinical complementary medicine is so comprehensive and time consuming – yet rewarding – that I could not have proceeded successfully without being blessed with my wife Antje, an expert both in electrodermal screening and in Kinesiology, and our medical director, Karin van Huelsen, ND, who, over the past 21 years, devoted her abilities and her life to our clinic in Victorbur, northern Germany. She not only understood my vision of the rich multi-disciplinary topic “energetic medicine” but humbly and diligently integrated each method into our protocol. This is so important to mention since I truly believe that the reader - a possible fellow physician – will not succeed very far without delegating integrative clinical work to a trusted technician. Simultaneously, I looked for methods to simplify our efforts and increase efficacy.

Healing is possible if we understand the interconnectedness of problems which is one good reason to work as a team in order to succeed as fast and easy as possible.

About ten years ago, I had a profound change in my “complementary medical life” when I met Rolf Binder, the inventor of the ONDAMED® System. Immediately, I could simplify my protocol which saved me time and energy. Like it or not, it is the human energetic electromagnetic field we are dealing with. From then on I was able to not only utilize energy for a healing approach, but also document it as a standardized and safe method in physics. ONDAMED® is the first tool in complementary medicine to produce safe, substantial and successful communication with the diseased patient, as well as safe and impeccable arguments in physics. Thenceforth, I was able to present

this method to the public in Europe and the United States. Meanwhile, the ONDAMED® is used on all continents. The method's secret is electromagnetic resonance phenomena which represents a universal law in physics.

My experiences improving patients using a well defined tool in physics brought us far away from the realm of trickery, fakery, victimized patient, hallucination or the placebo.

As complementary or alternative medicine was a matter of intuition and empirie (knowledge by experience) before, it is now an issue of standard and reproducible structure. ONDAMED® is providing a framework to understand the patient's individual story. Once more I understood that the same disease has a very specific structure which is different in each patient. It takes a detector like communication with the patient, the ONDAMED®, to uncover what seems to be deeply hidden behind. Another issue is treating Osteoporosis with ONDAMED®'s program 58, which represents another indispensable option.

Thanks to Rolf Binder who has been courageous and sensitive enough to convert medical frustration into satisfaction and identity.

Below

Treatment of Osteoporosis with ONDAMED® program 58. NA Neck Applicator in frontal position. MA Matrix electrode along the spine. Treatment time one hour.



8. HEALING EFFECT IS BASED ON SEMICONDUCTION

SPREADING ELECTRONIC ENERGY BY SEMICONDUCTION

Summary:

The perineurium (skin around all nervous fibers) is an array of cells, arranged with regularity in close proximity, as for example in a crystal lattice. The perineurium builds up a low voltage current. ONDAMED® is placing an electromagnetic induction field on the existing low voltage current of the perineurium. The induced magnetic field causes a transversal current in addition to the already existing low voltage current of the perineurium. This phenomenon is known as Transverse Hall effect in physics.

The spreading of energy and resulting tissue irritation can be demonstrated by pulse reflex and ONDAMED®. Tissue excitation, according to the Hall Effect, is based on electronic conduction to proteins which respond as semiconductors.

Apparently, to support possible healing, a larger community of matrix, cells, proteins, atoms around diseased tissue must be jump started by electronic conduction. As proteins act as semiconductors they pick up energy (electrons) as needed to improve function by an excited state, and contribute largely to keep up an electrical 'life field' as postulated by Burr (Yale University). Electronic conduction (information transfer) is regarded to be one of the live forces in living matter.

Albert Szent-Gyorgyi's electronic conduction:

Albert Szent-Györgyi (September 16, 1893 – October 22, 1986) was a Hungarian physiologist who won the Nobel Prize in Physiology or Medicine in 1937 for his discovery of vitamin C. In 1941, after extensive research of the insoluble scaffoldings of the matrix he stated that:

“If a great number of atoms are arranged with regularity in close proximity, as for example in a crystal lattice, single electrons cease to belong to one or two atoms only, and belong instead to the whole system. A great number of molecules may join to form energy continua, along which energy, namely excited electrons, may travel a certain distance” (1941).

The perineurium of the nervous system represents a scaffold of cells which completely encase all nerves.

Its cells are arranged with regularity in close proximity, as for example in a crystal lattice.

In other words, the cells represent a great number of regularly arranged cells, molecules and atoms. This chain of cells, the perineurium, acts as a conductor. A conductor is a substance like a metallic wire that conducts electricity.

The perineurium, the thin skin around all nerves of our nervous system, not only functions as a conductor, but also sets up a low voltage current.

This current is known to control injury repair (Robert O.Becker 1990, 1991). Oscillations of the direct current fields in the brain, called brain waves, direct the overall operation of the nervous system (Becker, in: James L. Oschman, Ph.D., Energy Medicine, 1988)

Ergo, the low voltage current of the perineurium, is building up a transverse electric field (electrons spreading transversely!) if a perpendicular magnetic field is placed on that current. In other words, the perineurium, which is the motor for injury repair, will enlarge its energy field transversely if we impose a perpendicular magnetic field on it. Thereby the field of the current of injury is magnified. As the amplitudes of the waves of that field is magnified, its energy is magnified. Magnification of energy apparently is needed in healing tissue damage.

This explains the wonderful and astounding, yet simple mechanism of the ONDAMED® to improve healing in living tissues of for instance, patients with osteoporosis. It also explains what Rolf Binder has observed for many years: when a certain area has been found by ONDAMED® and pulse feedback, then treated subsequently with same frequencies, the area energy will enlarge specifically, according to the specific tissue needs and ‘damage’ of the patient. According to the cells and atoms which are co-responsible for the stale mate in the healing process, the energetic area will expand horizontally, biased, vertically, or as a circle.

The phenomenon to set up a transverse electrical current by another current after placing a perpendicular magnetic field on it, is known in physics as:

9. TRANSVERSE HALL EFFECT

Development of a transverse electric field in a solid material when it carries an electric current and is placed in a magnetic field that is perpendicular to the current. This phenomenon was discovered in 1879 by the U.S. physicist Edwin Herbert Hall. The electric field, or Hall field, is a result of the force that the magnetic field exerts on the moving positive or negative.

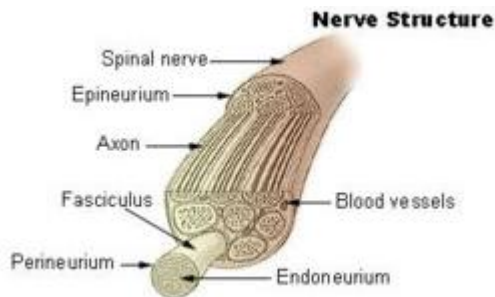
Below:

Cut through the tibial nerve with perineurium



Below:

Nerve structure of a spinal nerve with perineurium



Robert O. Becker discovered that the perineural system is sensitive to magnetic fields. Consequently semiconduction takes place, something Szent-Gyorgyi already postulated in 1941. He found a 'dual nervous system' composed of the classical digital (all or none) nerve network, the focus of modern neurophysiology, and the evolutionary more ancient perineural system, which operates on direct current. It sets up a low voltage current, the current of injury. The current of injury may also be called "the brain waves". It is the direct current of the perineurium of our brain (Oschman, 1988). The brain waves control and modulate all the currents of injury at any moment in time. In other words, if we have to treat a repair field of the body, a field of pain which does not have enough energy, we must take into consideration that the brain waves are also more or less involved in the weakening of that repair field. This is why the ONDAMED® provides a vast variety of brain-related and

psychoautomatic therapy programs to magnify the amplitude of currents in the repair field.

Before you go below to find explanation of semiconduction, you need to understand, **that physics defines ONDAMED® as both a complementary and integrative medical device.** It is by all means not an alternative device. To understand the terminology:

10. TERMINOLOGY (complementary-integrative-alternative)

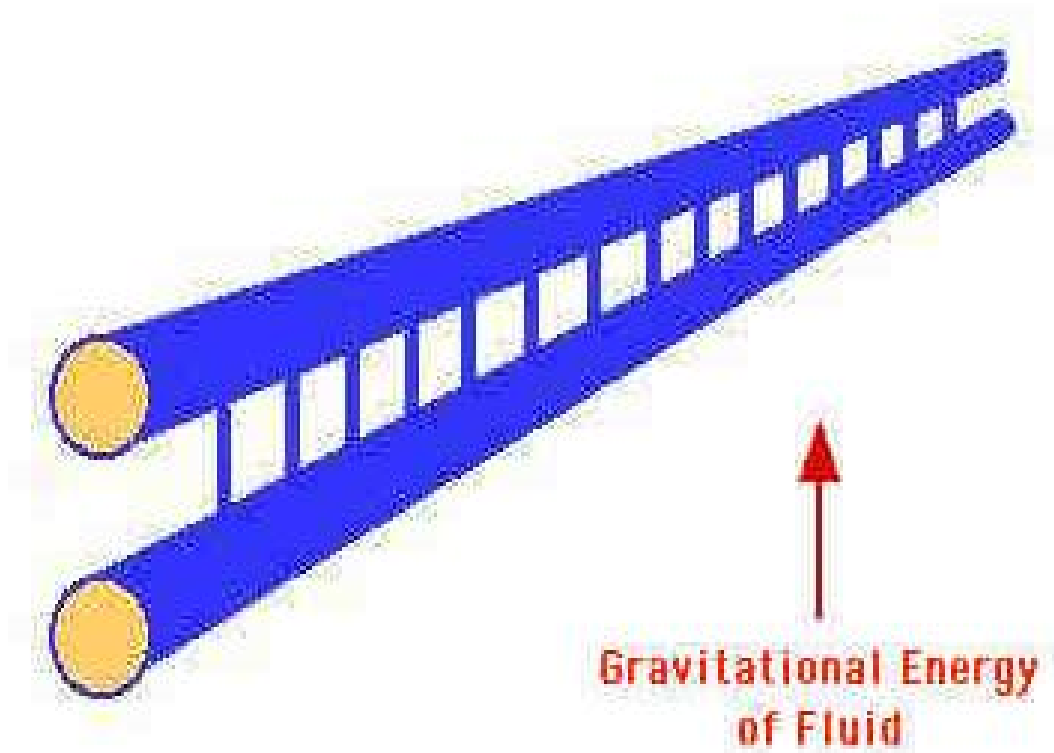
~Complementary means that the new treatment is intended to be used in addition to the standard proven treatment option to improve what we already know to work~

~Integrative means that the treatments are designed to work together, a blending of the best of both traditional and non traditional options~

~Alternative suggests that the treatment is to be used instead of known and accepted treatments~

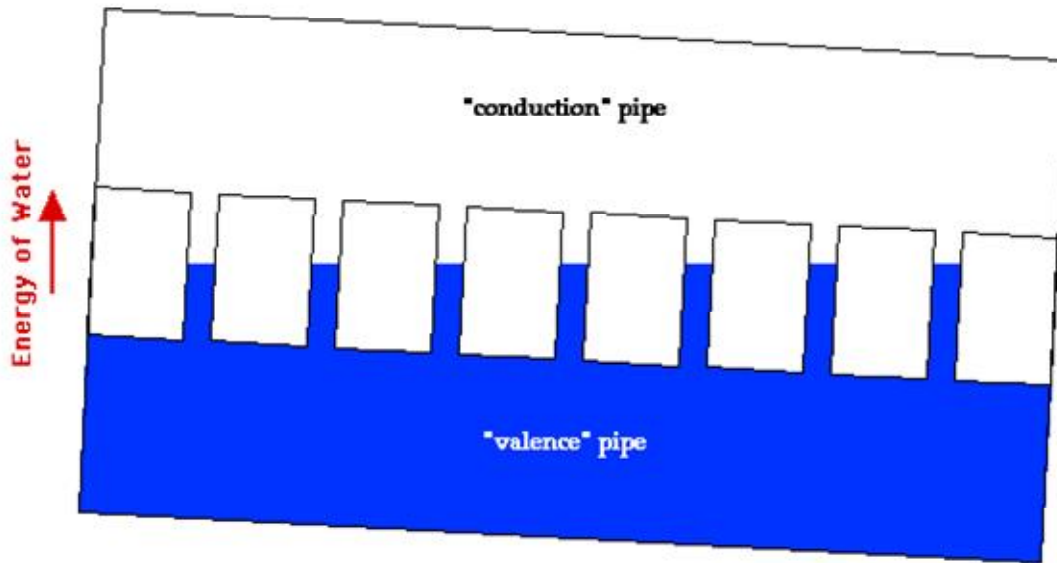
11. SEMICONDUCTORS

For comic relief the two pipe model of semiconductors:



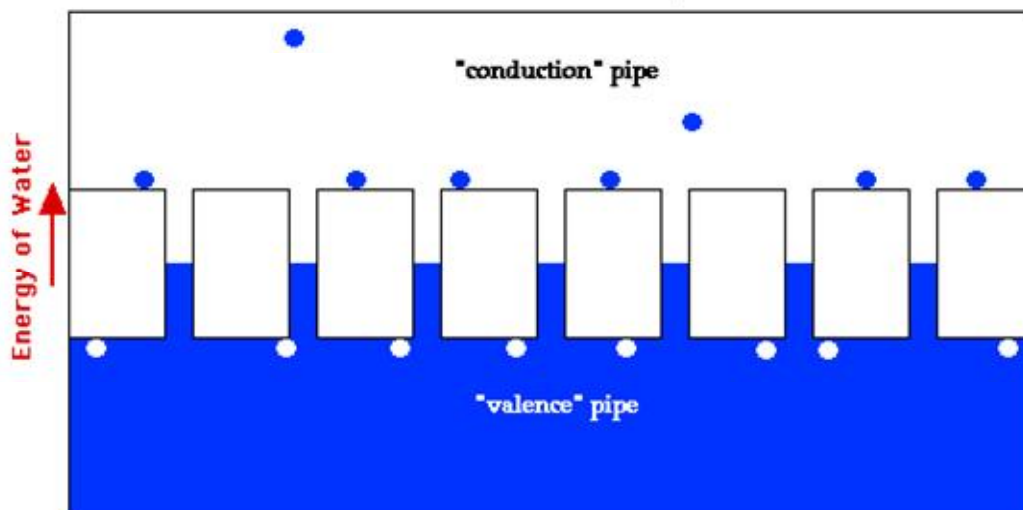
FROM:
Electronic Devices and Circuits Engineering Sciences 154
Lecture Notes, Insulation, Conduction and Semiconduction

Insulator with an applied external potential - no current flow possible



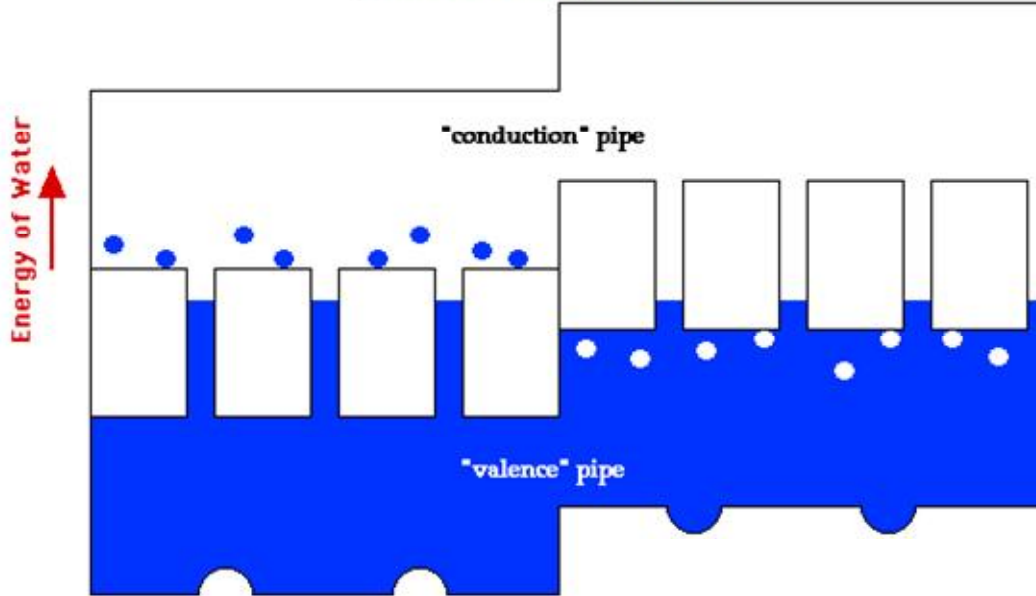
Below: Each little blue dot could be regarded as an electron, proton, or neutron. They are all 'Fermions', which means: each of them has a slightly different energy status. Consequently each of them has a different potential to deliver current to the semiconductor, which will then conduct for a time being.

Intrinsic semiconductor at equilibrium

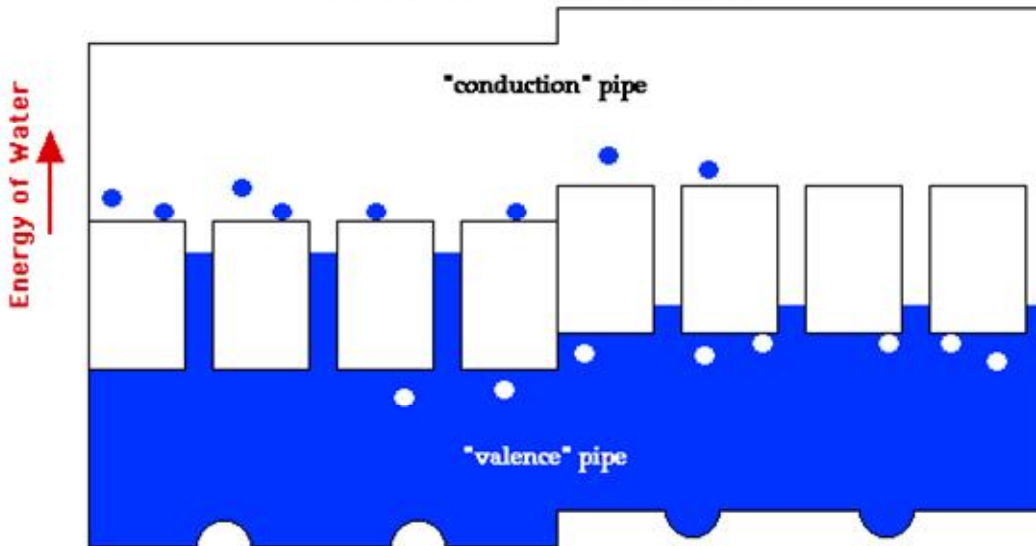


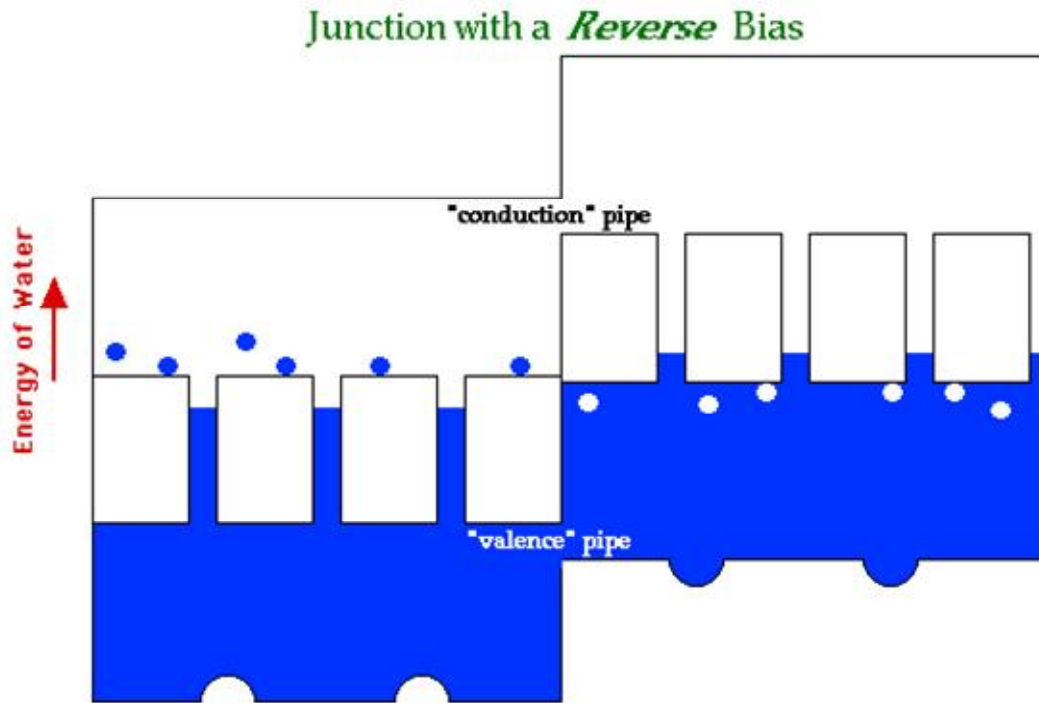
Thermal Excitation

Junction at Equilibrium



Junction with a *Forward* Bias





The bottom line is that the fluid level in these fluid flow systems plays the same role as the Fermi energy in understanding the mechanisms of semiconductor conductivity.

In quantum mechanics, a group of particles known as fermions (for example, electrons, protons and neutrons are fermions) obey the Pauli exclusion principle. This principle states that two identical fermions can not be in the same quantum state. The states are labeled by a set of quantum numbers. In a system containing many fermions (like electrons in a metal) each fermion will have a different set of quantum numbers.

12. ONDAMED® AND BONE HEALING

Using ONDAMED®'s program 58 has brought a blue sky to many of my patients suffering from osteoporosis. The improvement was remarkable. I did not lose one patient. Based on the principles of physics described above, I did research in literature about scientific proof of effectivity using electric and magnetic therapy in cases of bone repair.

In his book 'Energy Medicine', 1988, page 75, James L. Oschman, Ph.D., wrote:

Modern use of energy fields to stimulate bone repair began shortly after the discovery of 'animal electricity' at the end of the 18th century. By the mid-1800s, the preferred method for treating slow healing fractures was to pass electricity through needles surgically implanted in the fracture region. The technique was banished from medical practice, along with unproven electrotherapies, early in the 1900s.

In the 1950s and 1960s, there was a resurgence of medical interest in electric and magnetic therapy. After considerable effort by scientists at a number of research centers (Brighton et al 1981, Basset et al 1982), both electric and magnetic therapy for fracture 'non-unions' were granted the 'safe and effective' classification by the US Food and Drug Administration (FDA). To obtain this status, many studies were done to document success, lack of side effects and mechanisms of energy field methods.

Not surprisingly, the scientific evidence is that PEMF (Pulsated ElectroMagneticFrequency) therapy is effective because it conveys 'information' that triggers specific repair activities in the body. The currents induced in tissues by PEMF mimic the natural electrical activities created within bones during movements. Pulsating magnetic fields initiate a cascade of activities, from the cell membrane to the nucleus and on to the gene level, where specific changes take place (Basset 1955).

ONDAMED® AND CONCEPT

13. WHAT DOES ONDA-MED MEAN?

ONDAMED® means "medicinal wave". It is a two step resonance procedure (see below). It is an induction, rebuilding the electromagnetic life field of diseased tissue. It does this by the application of specific waves to non functional parts – **the current of the injury fields** - of the body. Once tissue is damaged by trauma or inflammation/infection, the 'tubes' around it (perineurium, perivascular cells, periosteum, perilymphatic cells etc) will set up the current of injury. The frequency of this current varies from organ to organ. Yes, you can identify an organ by it's specific current of injury. ONDAMED® not only finds that specific frequency to couple or resonate with spots to be treated, it can detect and localize those spots. Chronologically, ONDAMED® is detecting, coupling and treating that injured area by induction.

As said, step two would be the induction of same special frequency to the spot of injury. Based on the HALL principle, the energy field would be enlarged by semiconduction. Electronic conduction serves as both information exchange and repair mechanism.

Both the blocked tissue and the necessary induction-wave are found by a simple pulse test in cooperation with the ONDAMED® device. Its wave range is between 0.1 and 32,000 Hertz with an intensity range from .5 to 50 mT (Millitesla). By producing a specific single wave for each individual patient's momentary disorder, the system works very powerfully and effectively.

Another issue is the option to harmonize brain waves. Special brain programs eliminate pathological brain impulses stored in the CNS by entrainment (see further below under entrainment). 173 well-designed programs are effective for a wide spectrum of health disorders. Other frequencies of the system work to balance microorganisms. This biofeedback system, based on the patients V.A.S (vascular autonomic signal), is essential for both symptomatic and systemic application. However, you need to follow strict but simple rules to counteract chronic illness. You will discover that ONDAMED® is a must and a basic tool for any therapist in the 21st century.

It is all about influencing, rebuilding and retuning the 'Life Field' according to Harold Saxton Burr, Yale University School of Medicine, a pioneer in studies of the role of electricity in development of structure and disease.

14. THE PULSE BIOFEEDBACK COMBINED WITH ONDAMED®

In this chapter you will learn to understand the principles and basics for the Pulse Biofeedback.

The nervous system is completely encased by perineural cells. Around all our nerves, we therefore find a tube like system consisting of cells in close proximity. If there is any tissue injury such as by trauma or inflammation, the perineurium will generate a 'current of injury'.

Electricity respectively electrons will flow. A direct current is generated. This mechanism is meant to attract white blood cells, repair cells, fibroblasts, etc.

Robert O. Becker demonstrated that this direct current is not an ionic current, but a semiconductor current that is sensitive to magnetic fields (Hall Effect) (in JL Oschman, Energy Medicine, 1988, page 94-95).

Other tissues, too, are encased in connective tissue: the vascular system, the lymphatic system, the muscular system and the bones with the periosteum. In case of injury, inflammation and infection each of these encasing connective tissues will produce a 'current of injury'. However, as we have seen above (Sisken and others), each tissue is resonating to a specific frequency. Each tissue has - is acting in - its own special code. Further, each 'sheath tissue', perineurium, perivascular, periosteum, etc. is also sensitive to magnetic field exposure.

Consequently, inducing an electromagnetic field with the ONDAMED® applicator would jump start electron flow transversally to the already existing direct 'injury current' of the encasing connective tissue. This phenomenon can be explained by excited electrons which will be forced to flow transversally by the magnetic field, as described above. Simultaneously, the electrons will activate other protein molecules in terms of semiconduction. The overall area of electron activity will be largely increased.

In physics this is an increase of the amplitude of the waves of the direct current of injury! If you increase the amplitude of a wave, you will increase the energy.

Pain has been defined as 'the cry of the tissue for energy'. Increase of energy with program 122 (periosteum inflammation) has given remarkable results on patients with knee problems.

Further, if the amplitude of a wave is magnified, it would even more interfere with other waves such as the cardiovascular wave, or the overall controlling brain waves (delta, theta, alpha, and beta) which also use the cardiovascular system to propagate. Heavy interference will occur.

Sophisticated research using microelectrodes has confirmed that the probability of a nerve, firing in the brain, changes rhythmically in relation to the electroencephalogram (Verzano 1970, Fox 1979). The overall control of the nervous system by our brain waves seems to 'calibrate' the reaction of the peripheral tissues.

In intense activation of the nervous system or tension, beta waves would appear which have the highest frequencies (14-50 Hz).

Let's remember, a pulse reaction is created when the specific "code" wave of the ONDAMED® applicator hits other existing currents and begins coupling and resonating with them.

By imposing the EM field of the ONDAMED® applicator on an injury field, the current of injury is magnified by its HALL current. These waves 'collide' with other waves such as pulse wave and propagating brain waves. The pulse wave is a very strong wave and propagates through the vascular system. The vascular system is also used as an excellent body for other waves such as brain waves and waves of the currents of injury. When they 'collide' with a HALL field inside the cardiovascular system, heavy interference phenomena will take place.

The patient's pulse will definitely be disturbed. The pulse quality will be altered. The tester, respectively the therapist, would feel an increase or decrease of the pulse amplification of the patient.

According to the above described scientific documented research, ONDAMED® is 'picking up' the electrical injury currents at various spots when we scan the body of the patient by specific frequency fields.

Accordingly, we can treat those spots. There is fascination about the accuracy with which the method reveals the areas to be treated. This leaves all our patients stunned.

Pulse Biofeedback is easy to learn. When I did my first liver palpation, I did not feel anything. I personally think that the Pulse Biofeedback is as easy to learn as other palpations. An automated device is not necessary and neither available for liver palpation nor for Pulse Biofeedback.

Below:

Palpation of Pulse Biofeedback on Arteria Radialis.

Note: the thumb of the therapist is in vertical position to the lower arm of the patient. This allows easy detecting of any change of pulse quality. The tip of the thumb and the tip of the tongue are the most sensitive areas in the body. The therapist's own pulse does not interfere since the touch is too light to even feel one's own pulse.

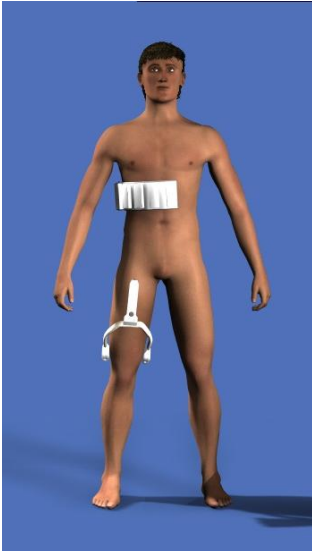


Below:

Treating an orthopaedic knee problem after a tennis injury.

Note: Matrix applicator is placed on the liver. ONDAMED® picked up two currents of injury: 1) the periosteum of the right knee 2) the liver.

Spontaneous recovery of the patient with program 122.



THE CONCEPT

Below:

The ONDAMED® device emitting an EMP* field



*EMP= ElectroMagneticPulse



Below:

Treatment with HA (hand applicator) focusing on the solar plexus



16. THE 4 MODULES

Module 1: Specific Frequency List I

As you will learn quickly, the specific frequencies are the true genius behind what the ONDAMED® will accomplish for you and your patients. The intricacies and specificity that results from using this aspect of the method will be the cornerstone in determining how you proceed with an individual.

The bottom line of it is that this Module runs 2 different patient-specific frequencies.

Each of these frequencies emitted from an applicator combined with the Pulse Biofeedback will be capable to detect a current of injury respectively to a specific area to be treated.

While each injured or inflamed organ and/or area produces a specific “code” of injury current, the Pulse Biofeedback guides the therapist to find the 2 most significant EMP fields that prove most therapeutic for the patient at the time of treatment.

MODULE 2

Pre-set programs

Here the ONDAMED® is offering you 173 pre-set therapeutic programs. You either scroll through them to select the best one or you select according to the example mentioned above. While scrolling through them you wait for the best and strongest pulse reaction in order to make your choice. If you let the pulse dictate what program is most needed, you will receive facts to understand the patient’s symptom or disease.

MODULE 3

Specific Frequency List II

This List is an expanded version of Specific Frequency List I. These frequencies generally range from 200 Hz – 950 Hz and correlate to micro-organism specific frequencies. The main difference between frequency List I and II is that this Module runs 1 patient-specific frequency where Module I runs 2 different frequencies.

It is a very strong therapeutic approach. Almost always we can normalize the found ‘area of injury’ using this Module after first treating with Module I.

Note: I had numerous cases of Salmonella induced sciatic and rheumatic diseases including cardiac disorders such as arrhythmias. The bile system is often involved in chronic toxicosis by Salmonella toxins. The enteritis may have been many years ago.

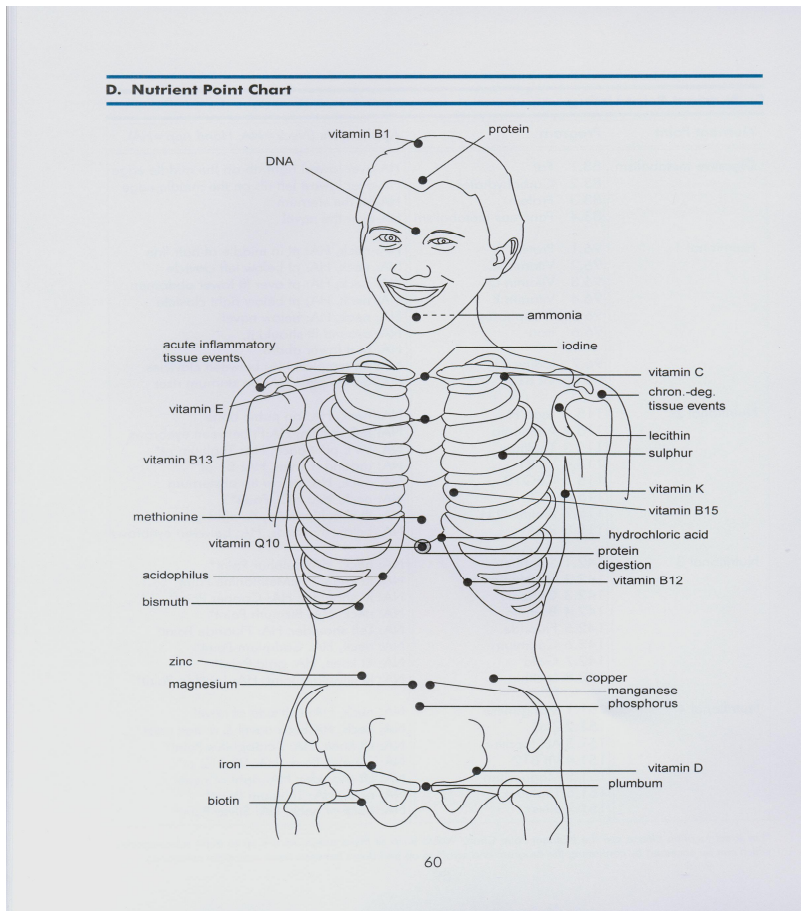
At this point I would like to thank my staff for their qualified and interested professional engagement. **Training of my staff has paid off a thousand fold.**

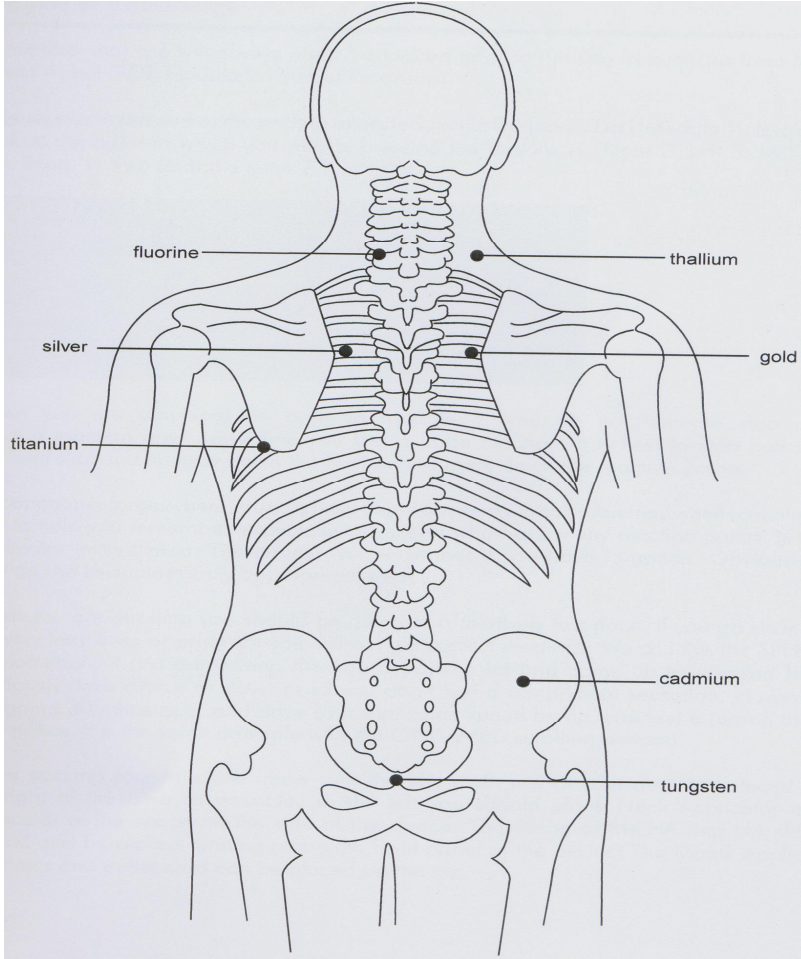
MODULE 4

Nutrient points

The goal of the Nutrient Points Module is to create an improved energetic environment in the body so that the patient may be able to better assimilate vitamins and nutrients and metabolize trace elements through frequency.

Note: In cases of neurodermitis (skin eczema in children and adults) we always found a vitamin C dysfunction. The vitamin C nutrition point is located at the frontal left shoulder area. Treatment of that nutrient point with the ONDAMED® is essential. People with that kind of eczema do neither tolerate vitamin C medication nor vitamin C rich fruit. They would react with severe skin reactions. An additional option to alleviate the blocked vitamin C metabolism of these patients would be the homeopathic vitamin C from Heel company, Germany. The vials could be medicated orally once a week.





Treatment example:

Your patient is connected to the ONDAMED® by the neck applicator. While you turn the wheel of the Regulator of the ONDAMED® and scroll through these frequencies, you simultaneously palpate the radial pulse.

Then you suddenly feel a pulse change (increase or decrease of amplitude) – in short – you feel “something” happen with the pulse and there will be the number 11.31 on the upper display.

You look up your frequency chart and realize that 11.31 belongs to the gall bladder. Instantaneously you know that the gall bladder has something to do

with the patient's health problem. Whatever the complaints of the patient may be: either atrial fib, or joint pain, or tinnitus, or migraine etc. You will keep in mind that aspect of a gall bladder involvement.

This can kick on a cascade of medical tests, procedures, interrogations, options for additional medication, and foremost, the treatment with frequency 11.31 Hz.

More: Now you can take advantage of a variety of pre-set programs relating to the gall bladder / bile system.

More: Feel free to scroll through the EMP fields of Module II. There you may find a “pulse change” at 205.1 shown on the display. You look up the microorganism related frequencies chart and find “Salmonella typhimurium”.

But foremost: Now you are and feel qualified for a strong and secure explanation about what is going on in that patient. Correlating your findings with her/his health records, you will be as fascinated as I have been for years.

You changed two lives; the patient’s and yours as a doctor.

17. GEOPATHY AND TRANSMITTER RADIATION INTOXICATION

The geopathic scientists were of the view that radiation distortions were a natural phenomenon which could make a site unsafe for building anything over it. These distortions would result in a distorted energy field in a structure if the structure was near or over the distorted point. Geopathists put forth the theory that this could result in unhappy homes and sickness.

Many of us have heard about advertisements on “right rotating lactic acid” which is supposed to be a healthy ingredient in certain foods such as yogurt, etc.

Left or right rotation of chemical substances is a physical quality which can be demonstrated in physics by sending polarized light through a prism and then through a particular chemical solution. Glucose solution would rotate the level of polarized light to the right. Accordingly it is called “dextrose” deriving from the latin word ‘dexter’, which means ‘right’.

Our blood should have the physical quality of a right rotating solution. Functions in biological systems (blood or urine) are dependent upon certain isomers (left or right rotating molecules). While blood is right rotating, urine rotates to the left. If blood turns to be left rotating, the person would feel tired all the time and would certainly go downhill. Recovery from disease would be slim. In fact, left rotating blood quality is a number one blocker for any therapy. The reason seems to be a distorted energy field of our body which, as you may know now, functions on electronic semiconduction.

Certain conditions such as chronic inflammation of our organs or exposition to transmitters, etc. have the potential to distort our energy field respectively of the blood.

Since our energy fields are based on harmonics to provide a healthy structure, distorted fields seem to interfere here. With ONDAMED®'s program 47 we have seen a breakthrough in patients who have been resistant to therapies due to transmitters or chronic infection. If program 47 shows up for the patient in testing and the program is applied, the patient will have a fast turn-around responding to further therapies. Program 47 is also needed for a very successful therapy to stop smoking. There are about 20 centers in Denmark which successfully treat nicotine abuse. One to three ONDAMED® sessions are usually needed.

Below:

Treatment of Interference using Program 47. This program is used for the desensitization of electromagnetic overloads in the body as well as geopathic dysfunction.

Treatment with both neck applicator around the neck and matrix applicator in vertical position.



RESEARCH AND BASICS IN PHYSICS

18. Energy Medicine and James L. Oschman, PhD



Above from right: James L. Oschman PhD, Wolf-Dieter Kessler MD.,

AMERICAN ACADEMY OF ANTI-AGING MEDICINE, LAS VEGAS, VENETIAN HOTEL, DECEMBER 12-15, 2007

It was the second time that I got Oschman's book on Energy Medicine as a gift, when Silvia Binder FedEx'd it to me in 2007. When I met James Oschman at the Brooklyn Marriott, New York, in October 2006, I already knew much about him and his fabulous medical research, since a copy of his book 'Energy Medicine' had been already given to me in 2004 by Dr. Ira Brind, the chairman of Thomas Jefferson University, Philadelphia.

Brind urged me to read it since it would exactly describe the world of medicine I had been working in for decades. It would scientifically touch and explain many of the principles in physics. I cannot express enough gratitude for obtaining Oschman's book, which helped me – a practicing physician - to find the scientific backbone for the medical field I was devoted to.

On the other hand, when I listened to one of Oschman's interviews, I understood how happy he was to realize that the ONDAMED® has put so much of his scientific stuff into successful daily therapy. In his words, "ONDAMED® is a fine therapy. It seems like Rolf Binder has looked over my shoulders through all these years." Fact is, both have been working independently from each other and had to bump into each other sooner or later inevitably.

19. JB SHARMA, Professor of Physics at Gainesville College, Georgia, USA

Who could have known, that my friendship to JB Sharma, Professor of Physics at Gainesville College in Georgia, USA, would be such an invigorating and fruitful gift in my life. Meeting Sharma in the Barnesville Rotary Club some 25 years ago, he became a vital force for spreading solid physical knowledge concerning energy fields, waves and the ONDAMED®. He opened my eyes to physics.

From right: Prof. J.B.Sharma, Antje Kessler, Karin van Huelsen, N.D. Meeting in Gainesville, Ga. September 2007



Through him we got the knowledge of scientific proof that each organ, while emitting a specific electromagnetic frequency, would consequently resonate to a specific frequency. Among other scientific proof (see above), this is invaluable for triggering healing impulses. He pulled that up on the internet from the MIT (Massachusetts Institute of Technology, Boston, 1996).

From right: Prof. J.B.Sharma, Antje Kessler, Karin van Huelsen, N.D. Meeting in Gainesville, Ga. September 2007



PAIN

20. THE IMPORTANT CURRENT OF INJURY

As you have learned already learned, ONDAMED® knows the individual 'code' to specifically resonate with each organ. When I find a pulse responding to 11.31 Hz, I can conclude that the patient's health problem is related to the gall bladder. 11.31 Hz is the special frequency relating to the gall bladder. We found it by pulse biofeedback. So, the therapist picked up a current of injury at 11.31 Hz emitted by the ONDAMED® System.

If we proceed now and scan the body with 11.31 Hz, we could, for instance, find reactions over the right tonsil, left kidney and prostate gland. Subsequent communication with the patient reveals quickly that he or she has complaints in those areas. Consequently, there must be currents of injury in those areas also.

However, all these other currents of injury (right tonsil, left kidney and prostate) are resonating with the 11.31 Hz gall bladder frequency.

That is most fascinating. The current of injury frequency of the gall bladder apparently is propagating through the whole body and is coupling with injury currents at various other spots/organs of the body as detected by the scanning procedure.

Therefore, these other injury currents must be highly coupled with the gall bladder frequency. Apparently, the main cause of the disorder (gall bladder) is projecting its frequency to other organs and modulates the currents of injury there. So we find a gall bladder frequency in the right tonsil, left kidney and prostate gland. This is indeed fascinating because it suggests:

Since the left kidney is affected, it is producing a specific frequency correlating with the kidneys. However, it is the frequency of the gall bladder which is resonating there. Consequently, the current of injury of the kidney must have been modulated by the gall bladder “injury”.

This is of utmost importance for the understanding of what is going on in a particular patient. Our patient may complain most about his left kidney and it is the gall bladder which is responsible for the stale-mate in healing there!

This is also very important for the perspective of pain management with ONDAMED® (See chapter 26)

Below:

Treatment of left kidney. In this case we were using 11.31 Hz (a gall bladder frequency). See case description above.



2I. PAIN MANAGEMENT and ONDAMED® perspective

Presented to Pain Management Clinic in Dresden, Germany on October 17, 2007:

In order to understand pain, we must understand the current of injury. The current of injury is the electrical field for repair. The perineurium and other matrix structures set up this current in case of injury or inflammation. As the salamander changes the electrical field around an amputated leg (F.P.Gallo about R.O.Becker), and is able to regrow the limb through and in the electrical field, we are changing the electrical field around damaged tissue. Question is: Will the current of injury set up an electrical field which is strong enough to excite other proteins, molecules and atoms of the surrounding matrix? Will the repair field have enough amplitude to be the blue print for repair?

Dr. Reinhold Voll, a German physician stated: “pain is the tissue’s cry for energy”. If there is pain, there is certainly not enough energy.

Here the true ONDAMED® pain management steps in.

As you already learned in chapter 18, the area of complaint may be modulated by a dominating injury frequency of another area or organ. I described a patient who complained most about his left kidney, but it was the gall bladder frequency which resonated over the left kidney. So we have at least two different currents of injury in the left kidney region: the dominating gall bladder current and the deeper layer, the current of the kidney. It is believed by, Kessler et al, that the gall bladder current is modulating the kidney current by interference. This means, the kidney current will be weakened by interference.

Electrical waves travel through the body. The EKG wave can be picked up at our extremities (Einthoven) as do the currents of injury. Since ONDAMED® resonated in the kidney region by using a gall bladder frequency, there must be a gall bladder frequency in the kidney region.

Consequently:

We may not succeed, if we do not treat the kidney with gall bladder frequencies. Second, we may have to continue with a kidney program. Above that there may be also a changing scenario.

Re-testing the next day, we may find a specific frequency of the liver, which would resonate in the left kidney region. So we will have to treat with a liver frequency first, before we adopt a kidney program.

We think that the left kidney – of course – is the weakest link in the chain in this particular case. By its weakness, it is a current that is easily modulated by all the other currents of injury ailments the patient is carrying. The other ailments project their current of injury frequencies into that weak spot and must be dismantled layer by layer according to their energy status. This reminds me of Liebig’s minimum rule:

A plant can only grow as long as the minimum element in the soil is available. We could pour an abundance of nitrogen on the soil and the plant would not grow further, because it is lacking cobalt. When cobalt is added, the plant would grow again until magnesium becomes the minimum element and so forth.

Also, please keep in mind that our brain waves are the overall controlling currents. They propagate through the body using foremost the vascular system. They couple or interfere with local and peripheral injury currents. Thence, they have a tremendous potential to modulate those peripheral injury currents. While they could weaken them, they could also magnify their amplitude.

Amplification would increase the energy field, would repair faster and pain would cease. It is well known that a select group of people can suppress pain at will. This may be one explanation for that phenomenon.

When the amplitude of the energy field is increased, more electricity will flow by semiconduction which will again enlarge the repair field. It is said that a tickling sensation in an area of pain would indicate healing. The tickling could be the increase of electricity and the increase of electronic conduction in the repair field.

Thorough pain management requires the understanding of the individual interconnectivity of the involved organs. By magnifying the amplitude of the electrical wave field in the area of complaint, energy increases which will result in healing. Energy increase in an area of pain will often be felt as a tickling sensation before it finally heals completely.

Apparently the current of injury (a repair current set up by the perineurium, etc) initially has been too weak to excite the surrounding matrix. The weakening could be triggered and caused by other modulating and stronger currents such as the gall bladder or the liver and “ill” brain waves.

Therefore pain management should combine several steps:

1. Treatment of the area of pain with ONDAMED®’s specific EMP fields found by pulse biofeedback
2. Specific program for that area found by pulse biofeedback
3. Brain programs for entraining brain waves to normality

A study on pain treatment with the ONDAMED® on 27 patients with different types of pain showed 90% recovery within 2-12 treatments (Schroeter C.A. MD, PhD, University Clinic Maastricht, The Netherlands, Presented at the International WORLD Symposium, October 7th-9th, 2005, in Gengenbach, Germany).

This could be a reason why simple analgesics without proper support by causal intervention often fail to work satisfactorily. ONDAMED® and its specific frequencies shed some light on the dark for many of our patients.

Note: Since the idea of using EMP fields is based on solid physical laws, I can comprehend ONDAMED®'s unique success.

Please take a short review of chapter 18 concerning the important current of injury.

22. PILOT STUDY ON PAIN TREATMENT

Below:

This pilot study on pain treatment by Dr. Schroeter is published with her permission.

Pilot study, Maastricht

Pain treatment with the ONDAMED®

C.A. Schroeter, MD, PhD University Clinic Maastricht, The Netherlands

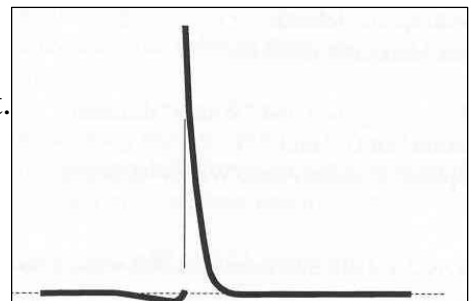
Presented at the International WORLD Symposium,
October 7th-9th 2005, in Gengenbach, Germany

Physical Basics

1. The ONDAMED® Biofeedback System applies electromagnetic impulses in rhythmic sequences.
2. The changing of the magnetic field structure of the impulse induces reactions in the body.
3. The impulses induce effects that stimulate the auto regulation of the body.

ONDAMED® Impulse

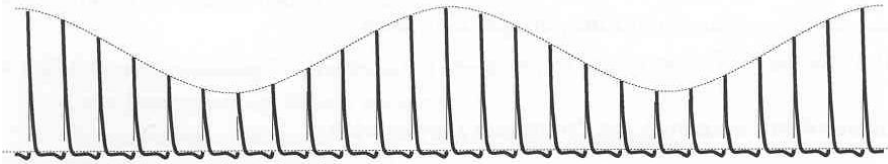
- **Form of the impulse:** Sudden rise of the magnetic field intensity with rapid fading effect.



- **Intensity:** Height of the impulse influences the deepness of penetration.
Magnetic intensity values: 0,5mT...50mT
- **Impulse Frequency:** Number of impulses per second, measured in Hertz: 0,1 Hz ...32KHz

Combination of Frequencies

Impulse frequency of the height of the impulse: Amplitude Modulation



Rhythmic variation of the impulse frequency: Frequency modulation



Therapeutic Basics

1. Organ specific frequencies
2. Therapy of blocked areas
(eg. scars, inflammation, stagnation)
3. 173 preset therapeutic programs
4. Micro-organism related frequencies

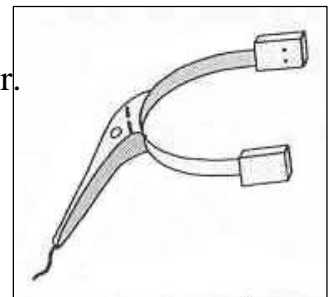
Therapy with the help of the pulse: The Vascular Autonomic Signal

An active signal produces a pulse reaction called a spike.

The practical procedure takes two steps:

1. Testing for organ specific frequencies

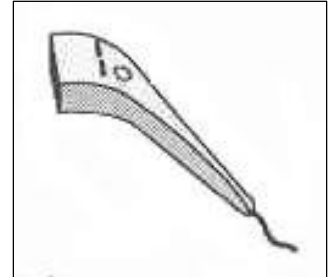
- A sequence of frequencies is applied through the neck applicator. The frequency values are applied and the pulse signal is felt simultaneously.



- The pulse reaction (VAS) shows the exact frequencies specific to the individual patient needs.

2. Testing for specific frequencies

- Having found the best fitting frequency values, one uses the area applicator to scan the body to determine where the blockages are occurring.
- The location of the blockage induces a spike of the pulse as well. There are usually multiple blockages – especially with chronically ill.



Clinical perspectives

1. All testing work via VAS
2. Double check with Prognos device
3. Tensor Clark & Rife, EAV
4. Kinesiology, Polymorphism
5. Laboratory parameters, miasmas

Pilot study, Maastricht

- 10 Patients Shoulder
- 15 Patients Spine
- 2 Patients Neurology

Types of Pain

1. **Skeletal**
 - Spine
 - Shoulder-Arm
 - Arthosis
2. **Nervous System Pain**
 - Trigeminal neuralgia
 - Intercostal neuralgia
3. **Abdominal pain**
 - Helicobacter pylori
 - Campylobacter pylori

Therapy 1

- Revital Program
- Psycho-autonomic Program
- Indication Programs

Basic diet

- No coffee
- No sugar
- No lactose
- Low glycemic index

Detoxification

1. Detoxification 1

- Liver
- Kidneys
- Brain

2. Detoxification 2

- Detox (Bioimmune)
- Zeolith
- Kryll-fish, kolloid silver
- Comparative studies
are running in Maastricht

Filling Up Therapy

- MSM 500mg-2Gr/die
- Phlogenzym 3x2 3x5 1/52
- Physiotherapy
- DHEA

Number of treatments

- Stomach Pain 2-3
- Neuralgia Pain 2-5
- Shoulder Arm Syndrome 5-10
- Arthrosis 5-10

Interval of treatments

- Stomach Pain 1-2/52
- Neuralgic Pain 1-2/52
- Shoulder Arm Syndrome
- Arthrosis

Patient A 60 years old

- Mamma carcinoma left July 2005
- Supraclav. lymph nodes positive
- Back pain Th 2 und Th 8
- Programs 18, 23,145
- Recovery after 2 weeks of treatments

Patient B Stomach Pain

- HSV 8 years ago
- Chronic stomach pain, heartburn
- Feeling of swelling
- Omeprazol
- Programs 18, 25, 107

Patient C 67 years old

- Rheumatism for 30 years
- HPV for 12 years
- Colitis ulcerosa for 15 years
- Pain- right shoulder and knee
- Programs 16, 22, 10

Conclusion

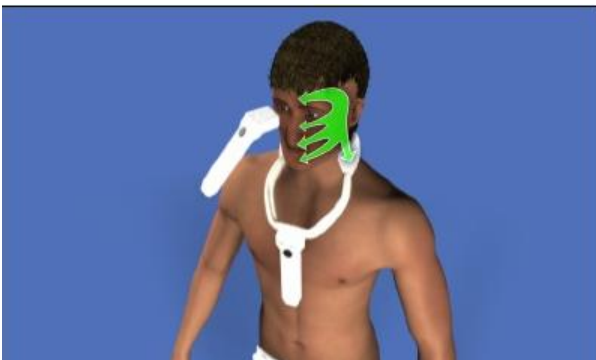
- ONDAMED®: an excellent assessment tool.
- ONDAMED® is a treatment modality that can be used by itself or in conjunction with other modalities for which it will potentiate efficacy.
- **90% (n=27) of patients with different types of pain recovered within 2 – 12 treatments.**

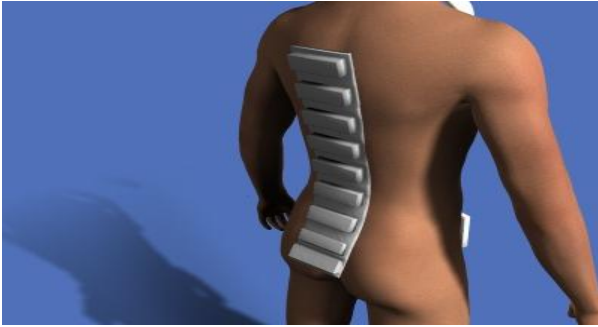
There are quite a few very effective programs for pain management:

Program 19: Pain related to inflammatory processes in the head area

Below:

Band A is suitable for the skin, mucous membrane, head area, acute sinusitis, otitis. This is a low frequency band (Operations Manual).





Program 21: Spinal/ disc/ back pain disorders

Program 52: Antalگو

This is used in care of acute and chronic wounds. It is also a good program for general pain relief and has a calming effect

Below:

Pain management with pre-set programs. Neck applicator around the neck. Matrix electrode on pain area. HA Hand applicator in affected area (Operations Manual)

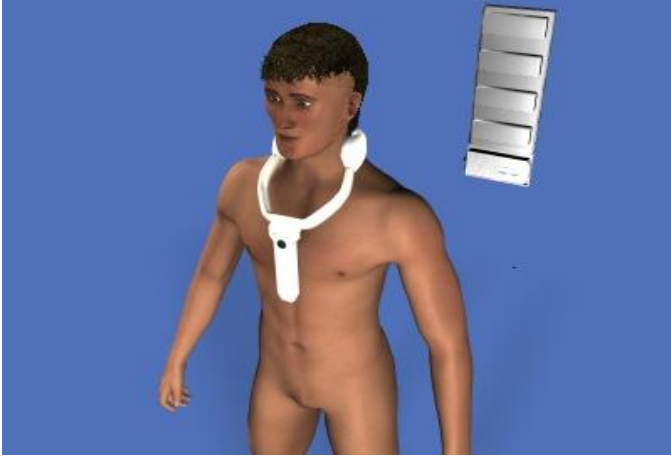


Program 82 : Spine / joints

Program 84 : Muscle and nerve pain

Below:

This program should be used in concert with other protocols. Neuralgia is often accompanied with neurological disorders ((Operations Manual)



Program 101: Arthritis

Program 122: Periosteum

Below:

Beneficial for inflammation / pain of the Periosteum. Good for pain before and after surgery and teeth issues (Operations Manual)



For example: Program 122 had already been mentioned in a case of knee pain after a tennis injury. It helped fabulously.

Program 123: Polyneuropathy

Below:

Helpful not only in Polyneuropathy, but also in different types of nerve problems. Helpful for the psyche (Operational Manual)

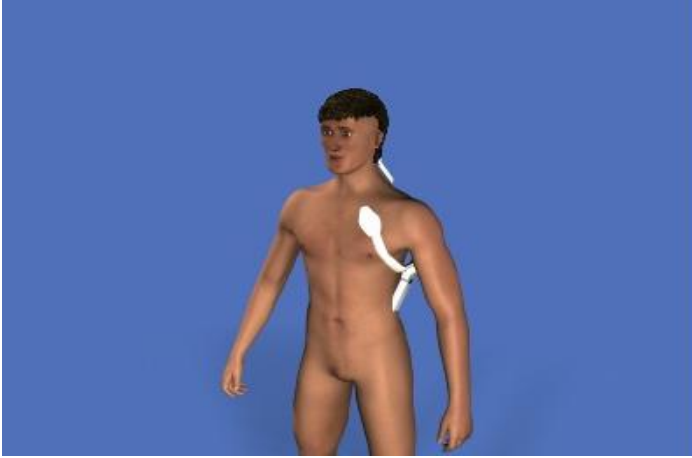


Program 145: Sciatica

Beneficial for those with problems / pain in any back area, might be also hip area and / or sciatica problems; thus pain leg / foot (course of the nerve and its area) (Rolf and Silvia Binder)



Program 149: Atlas/Occiput (Operations Manual)



Another case of MS in combination with Lyme Disease had been documented by ONDAMED®. Program 84 was crucial in her case. The patient from Westchester, New York had been in a wheel chair. She is completely in remission. She even started to become an active member of the ONDAMED® staff after her recovery.

In cases of back pain we often had marvelous improvement with program 21.

This goes on and on. However, patients are quite often resistant to therapy as we all know very well. In addition, they become both overloaded and drugged out with analgesics and remain as “intractable” and “lost” cases.

BRAIN FUNCTIONS

23. SHUMANN RESONANCE

This global electromagnetic resonance phenomenon is named after physicist Winfried Otto Schumann who predicted it mathematically in 1952. Schumann resonance occurs because the space between the surface of the Earth and the conductive ionosphere acts as a waveguide.

The limited dimensions of the Earth cause this waveguide to act as a resonant cavity for electromagnetic waves in the ELF band. The cavity is naturally excited by energy from lightning strikes. Schumann resonances are observed in the power spectra of the natural electromagnetic background noise, as separate peaks at extremely low frequencies (ELF) around 8, 14, 20, 26 and 32 Hz.

The fundamental mode of the Schumann resonance is a standing wave in the Earth-ionosphere cavity with a wavelength equal to the circumference of the Earth. This lowest-frequency (and highest-intensity) mode of the Schumann resonance is at a frequency of approximately 7.8 Hz. The ninth overtone lies at approximately 60 Hz and thus the cavity is also driven by the North American power grid. Detectable overtones extend upwards into the kilohertz range. A new field of interest using Schumann resonances is related to short-term earthquake prediction. Schumann resonances have gone beyond the boundaries of physics, invading medicine, raising interest in artists and musicians and gaining interest from fringe fields such as psychobiology.

Further below we will see the importance of entrainment and coupling of our brain waves with these standing fields. We will see how we are influenced by them and how entrainment could cause both and eliminate disease.

24. THE FUNCTIONS OF BRAIN WAVES

It is well known that the brain is an electrochemical organ; researchers have speculated that a fully functioning brain can generate as much as 10 watts of electrical power. Other more conservative investigators calculate that if all 10 billion interconnected nerve cells discharged at one time that a single electrode placed on the human scalp would record something like five millionths to 50 millionths of a volt. If you had enough scalps hooked up you might be able to light a flashlight bulb.

Even though this electrical power is very limited, it does occur in very specific ways that are characteristic of the human brain. Electrical activity emanating from the brain is displayed in the form of brainwaves. There are four categories of these brainwaves, ranging from the most activity to the least activity. When the brain is aroused and actively engaged in mental activities, it generates beta waves. These beta waves are of relatively low amplitude, and are the fastest of the four different brainwaves. The frequency of beta waves ranges from 15 to 40 cycles a second (Hz). Beta waves are characteristics of a strongly engaged mind. A person in active conversation would be in beta. A debater would be in high beta. A person making a speech, or a teacher, or a talk show host would all be in beta when they are engaged in their work.

The next brainwave category in order of frequency is alpha. Where beta represented arousal, alpha represents non-arousal. Alpha brainwaves are slower and higher in amplitude. Their frequency ranges from 9 to 14 cycles per second (Hz). A person who has completed a task and sits down to rest is often in an alpha state. A person who takes time out to reflect or meditate is usually in an alpha state. A person who takes a break from a conference and walks in the garden is often in an alpha state.

The next state, theta brainwaves, is typically of even greater amplitude and slower frequency. This frequency range is normally between 5 and 8 cycles a second (Hz). A person who has taken time off from a task and begins to daydream is often in a theta brainwave state. A person who is driving on a freeway and discovers that they can't recall the last five miles is often in a theta state - induced by the process of freeway driving. The repetitious nature of that form of driving compared to a country road would differentiate a theta state and a beta state in order to perform the driving task safely.

Individuals who do a lot of freeway driving often get good ideas during those periods when they are in theta. Individuals who run outdoors often are in the state of mental relaxation that is slower than alpha and when in theta, they are prone to a flow of ideas. This can also occur in the shower or tub or even while shaving or brushing your hair. It is a state where tasks become so automatic that you can mentally disengage from them.

The ideation that can take place during the theta state is often free flow and occurs without censorship or guilt. It is typically a very positive mental state.

The final brainwave state is delta. Here the brainwaves are of the greatest amplitude and slowest frequency. They typically center around a range of 1.5 to 4 cycles (Hz) per second. They never go down to zero because that would mean that you were brain dead. But, deep dreamless sleep would take you down to the lowest frequency. Typically, 2 to 3 cycles a second.

When we go to bed and read for a few minutes before attempting sleep, we are likely to be in low beta. When we put the book down, turn off the lights and close our eyes, our brainwaves will descend from beta, to alpha, to theta and finally, when we fall asleep, to delta.

It is a well known fact that humans dream in 90 minute cycles. When the delta brainwave frequencies increase into the frequency of theta brainwaves, active dreaming takes place and often becomes more experiential to the person. Typically, when this occurs there is rapid eye movement, which is characteristic of active dreaming. This is called REM and is a well known phenomenon.

When an individual awakes from a deep sleep in preparation for getting up, their brainwave frequencies will increase through the different specific stages of brainwave activity. That is, they will increase from delta to theta and then to alpha and finally, when the alarm goes off, into beta. If that individual hits the snooze alarm button they will drop in frequency to a non-aroused state, or even into theta, or sometimes fall back to sleep in delta. During this awakening cycle it is possible for individuals to stay in the theta state for an extended period of say, five to 15 minutes--which would allow them to have a free flow of ideas about yesterday's events or to contemplate the activities of the forthcoming day. This time can be an extremely productive and can be a period of very meaningful and creative mental activity.

In summary, there are four brainwave states that range from the high amplitude, low frequency delta to the low amplitude, high frequency beta. These brainwave states range from deep dreamless sleep to high arousal. The same four brainwave states are common to the human species. Men, women and children of all ages experience the same.

25. SCHUMANN WAVES AND BRAIN WAVES

The similarity of a Schumann signal and an alpha brainwave have been compared and documented by Konig HL, 1974a. Persinger MA (ed) ELF and VLF electromagnetic field effects. Plenum Press, New York, in JL Oschman, Energy medicine, 1988, page 100

Extensive research has been done to document the entrainment with external fields (Friedman et al, 1965, Venkatraman, 1976, Perry et al, 1981, Reiter, 1953, Hamer 1968, 1969, Beatty 1977, Wever 1968. Literature can be found in JL Oschman, Energy medicine, 1988, page 104 - 106 .

After all it seems to be a physical fact, that our brain waves or the direct current of injury of the peripheral structures respond to entrainment with other electrical fields either natural or environmental.

The bottom line is: Schumann waves and brain waves are so much alike that we are coupling and entraining with them all the time.

The same entrainment can be used by the ONDAMED® brain programs to entrain with “ill” brain waves and bring them back in line.

26. ALPHA WAVES OF THE BRAIN AND ENTRAINMENT. PROGRAM 43

Entrain means “to take with”. A simple example would be several clocks mounted on a wall. If they have about the same period, which is determined by their length, all of the pendulums will swing in precise synchrony after sometime. They will “entrain”. In physics the concept of entrainment is so important, as two rhythms of nearly the same frequency can become coupled to each other.

Remember: our brain waves originate from the perineurium of the nervous system and will propagate both through the brain and through the body. They also use the vascular system to spread and will reach the very terminals of the peripheral nervous system. There, these waves are influencing, “sensitizing”, “coupling” with other waves of the direct electric current of the peripheral connective sheaths.

Consequently, this is one mechanism to lower or raise the threshold of pain by interference resp. “sensitizing or desensitizing” existing peripheral currents. Simple coupling is called entrainment. The entrainment phenomenon is affecting all biological rhythms.

The direct currents of the central nervous system (brain waves) function as overall biological rhythms which we presume play a major role in health and disease. In case of dysfunction of these waves or disharmonics, our whole body and/or our total bio-electrical system could get out of tune.

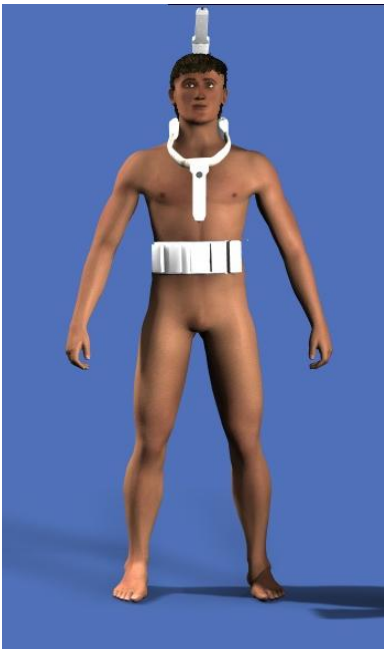
Rolf Binder stated for years that he strongly believes that the rhythm of these brain waves needs to be treated in case of any health disorder. ONDAMED® does that by coupling or entrainment. Programs available are (foremost No. 41- 46, 47- 56). The coupling phenomenon or entrainment seems to be a major issue to understand and influence the origin of disease.

Disease could be visualized as:

What do two rhythms do to each other that do not have the same frequency?

It is of interest that the alpha rhythm of our brain waves, the rhythm of recovery and resting state and the basic rhythm of life, overlaps with Schumann resonances. ONDAMED®'s program 43 is entraining the alpha rhythm.

Below:



Brain wave programs 41-46

These programs are used for stimulation (entrainment) of individual areas with the wave areas of the human brain such as: Beta, Alpha, Theta and Delta as well as general balancing.

Neck Applicator around neck, Hand Applicator move in broad strokes around the skull. Matrix Applicator on the edge of the lower rib cage.

27. THE THOUGHT AND PHOTONS

Another fascination about quantum mechanics is how a thought is converted into a material object, a neuro-peptide, which will then trigger a large number of brain cells to fire the message, “lift up the right arm.” Above all, how does the thought originate?

It is explained by physics that smallest light particles (quanta) are carrying the power of transforming nonmatter into matter, time into space and mass into energy.

For example, you are at a party and all of a sudden you feel sexually attracted to another person, your eyes (visually) or your ears (vocally) have been the receiver of some energy (quanta) which immediately triggers a dramatic cascade of neuronal activities. The thought was initiated by some transformation of nonmatter into matter, the neuro-peptide - neurotransmitter cascade.

This example is suggesting both an external signal as the source for a thought and that the signal is of nonmaterial quality.

It supports the theory of the photon as the unique power in nature for flexible and quick transformation of thought into action.

One of my concerns is the fact that some of our thoughts, primarily initiated by social interdependencies, may not be constructive but could be very destructive in the long run. This often relates to continuous conflicts. The fact is that certain initial nonmaterial stimuli which have produced both destructive thought and continuous conflict seem to be regenerated and regenerated without becoming erased by a system like the Renshaw cells (cells that would take care to erase an impulse to prevent it from becoming an endless tape).

Most of us know that a negative thought (photon activity triggering negativity) could result in disease and cancer. Louis Hay is a good example of how positive thinking builds up healing. Deepak Chopra mentions that he found out, that all patients with spontaneous healing of incurable cancer stated that they at one time had a feeling of expansion without existing boundaries. They suddenly lost the “being trapped” or “being cornered” feeling. Christian Steiner, an Austrian physician and inventor of the QUINT System (a mathematically designed computerized system of electroacupuncture), found out that rheumatism is always accompanied by the “no way out and being trapped feeling”.

The QUINT System (Holopathy, Dr.Christian Steiner):

This electroacupuncture method uses high-tech computerized software in order to rebalance the patient mathematically. It relates to the number “five” (QUINT) of the Chinese Five Elements. The Five Element System takes into consideration that a diseased organ is always interconnected with many other dysfunctions.

A simple example of a case with heart disease would be: The liver provides energy for the heart whereas the pancreas would take it away. Steiner also takes into consideration that disease always involves the psyche, the central nervous system, the connective tissue, reflexes, glands, muscles, etc. The treatment uses the most causal, individual and complex prescriptions which are applied both energetically (QUINT Box) and biochemically.

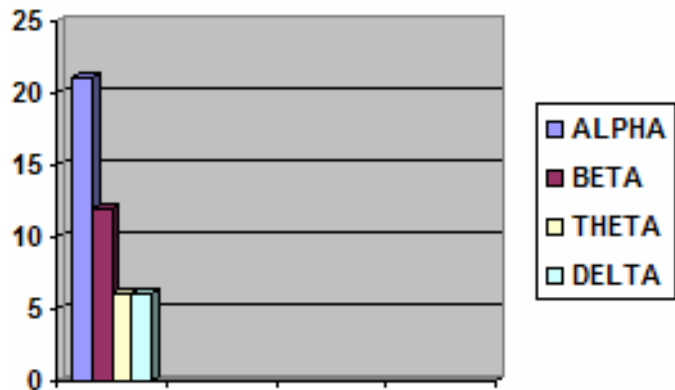
In short, how could we help the brain to reverse certain physical photon activities that cause a steady negative kink in the wave pattern?

I believe that Entrainment is one great option to re-tune our currents.

We could use the medicine of the 21st century, the ONDAMED®, as an external stimulus to synchronize our harmonious potential and eliminate asymmetric brain wave activities.

28. INCIDENCE OF BRAIN TREATMENTS WITH SPECIFIC FREQUENCIES

Below:



Treatment of 45 patients with ONDAMED® Brain Programs

21 patients needed Alpha

12 patients needed Beta

6 patients needed Theta

6 patients needed Delta

Note: Patients with carcinoma seem to need the Beta program. Duration of therapy was always doubled or tripled.

Note: Patients with impaired vigilance seem to need the Delta program (Kessler et al, 2007)

THERAPIST AND PATIENT

29. HOW DO I EXPLAIN THE ONDAMED® TO MY PATIENTS?

I think you are all familiar with the EKG or you may have had an EKG (a simple procedure). It picks up electricity from our heart. Our heart can not beat without the electrical parts that guarantee that it will beat. Sometimes we even have to use electricity for support to make the heart beat (pacemaker). The same is true with our brain. Again, I think you are familiar with the EEG. This is done by your neurologist and picks up the electricity produced by our brain, the brain waves! So both the EKG and the EEG pick up waves and we hope that these waves are normal. Sometimes they are not.

There are many more waves in our body which have not yet been used yet by doctors such as electrical waves of “ill” parts of our body.

ONDAMED® EMP (electromagnetic pulses) are able to stimulate the repair & regeneration of “ill” parts in the body.

30. HOW MANY THERAPIES DOES IT TAKE?

I recommend a series of 10 sessions. Although many patients have felt improvement after a few or even one therapy, the issue is to “retune” the body optimally. Side effects will be a better feeling but the issue is to win a war and not just a battle. I suggest that you use the ONDAMED® and see what it can do where other efforts have failed so far. Let your body tell us what it wants. A healing experiment well worthwhile!

31. WHERE DOES THE KNOWLEDGE ABOUT THE SPECIAL FREQUENCIES COME FROM?

This is solid empirical knowledge gained through 20 years of experiments and research by Rolf Binder that has been proven to be of astounding accuracy. I have been using this data since 1997 and consider it to be a gift from a true genius. This knowledge has been most reliable and beyond question to me. It has been a cornerstone for me and about 4000 patients in my daily practice throughout the years.

EFFECTIVITY

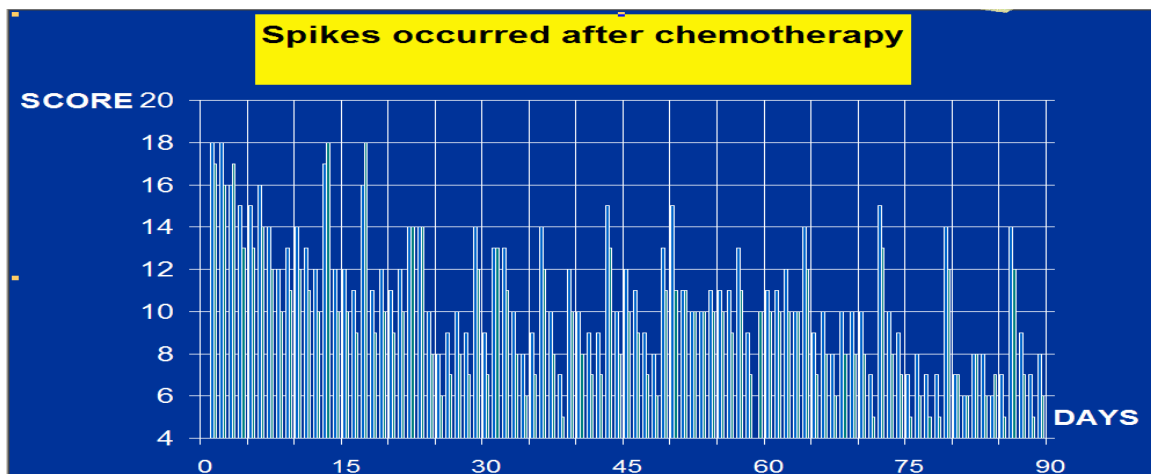
32. IMMUNE RESPONSE AND ONDAMED®

A pre-clinical study of the possible improvement of the immune system using ONDAMED® technology is underway.

In my clinic we monitored and documented improvement of the Biological Score according to Dr. Schimmel. This method is taking advantage of testing the potentiated mesenchyme by electroacupuncture. Both a high score (above 12) and more than a two-number-score (10 / 12 / 14) would indicate a compromised immune system. Both low score (below 12) and a two-number score (8 / 10) would suggest normality.

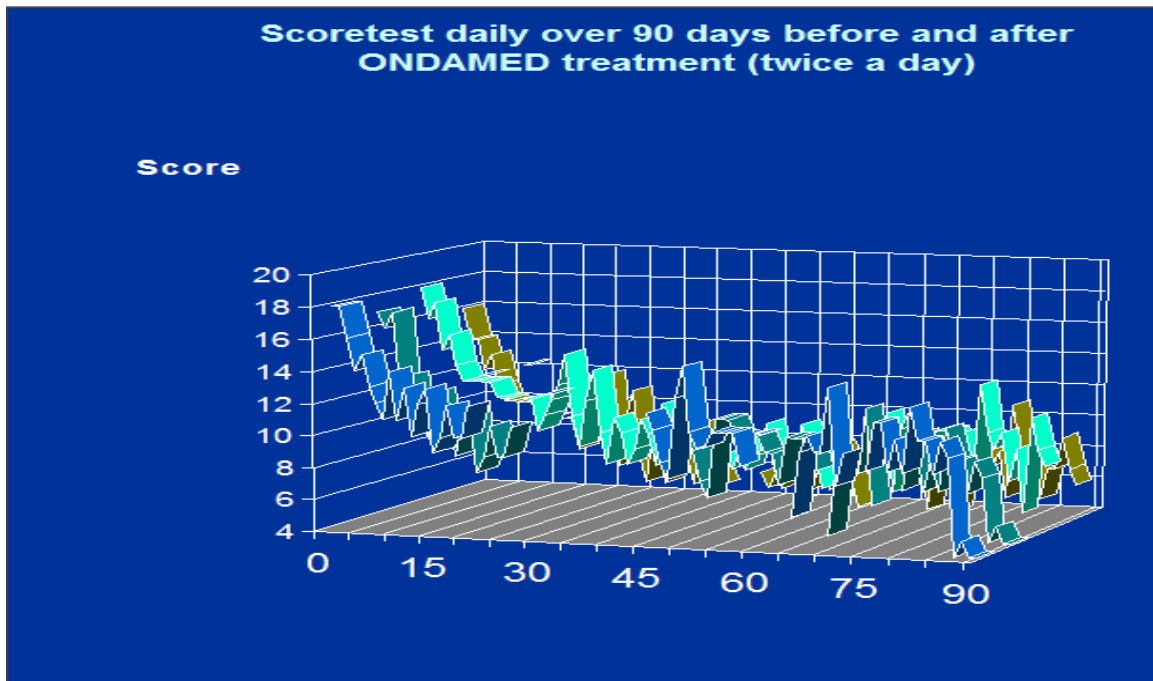
Below:

The immune score of a colon carcinoma was monitored over a period of 90 days. ONDAMED® treatments were administered with various programs twice a day. Note: At the beginning there was a high score around 18 which continuously improved to lower numbers. Spikes to higher numbers occurred on days chemotherapy had been applied. Kessler, et al, 2001.



Below:

Immune response in a case of colon carcinoma. Steady decline of the numbers from 18 to 11 suggests an improvement of immune response. Monitoring was done over a period of 90 days. The spikes in between were the days of chemotherapy. Kessler, et al, 2001



33. ANTI AGING

INTERNATIONAL AMERICAN ACADEMY OF ANTI AGING , LAS VEGAS, VENETIAN HOTEL, DECEMBER 12-15, 2007

Wolf-Dieter Kessler

Summary:

Antioxydants such as Vitamin A, C, and E may not be able to work effectively in a tissue trying to repair itself while lacking electrons. First they may not get to the tissue in need (inflammatory wall around it), second, their power to strengthen the electromagnetic repair field is too low as shown in osteoporosis. ONDAMED really improves osteoporosis in a heartbeat. As an electron donator, it is a true and imperative antioxidant at the right spot. ONDAMED truly works at the right spot at the right moment with the right tools (electrons). By finding the tissue to repair, the ONDAMED is unsurpassed by any other existing medical device. No inflammatory wall around diseased tissue can slow down any electron. They would freely penetrate through anything including the brain barrier. How does it work? James Oschman PhD, explained it marvellously: It jump starts the energy in the diseased tissue exactly like you do it with your electronic car key on a parking lot. You press the key button and your car key would open up the doors of your car even over a long distance because it sends the right frequencies with the right intensity and by resonance the locks are opened up. If you used the wrong car key holding the wrong frequency, you will never open up the doors. Hence ONDAMED is the ultimate tool both for tissue repair and wellness.

Denham Harman Ph.D., MD. (Stanford and Berkeley University) had the most consistent experimentally supported [theories of aging](#). He argued that oxygen free radicals produced during normal respiration would cause cumulative damage which would eventually lead to organismal loss of functionality, and ultimately, death.

Antioxidant Therapy:

Antioxydants such as [Vitamin A](#), [vitamin C](#), and [vitamin E](#)) — prevent free radicals (OH-) from [oxidizing](#) life supporting sensitive biological molecules. Since free radicals are always lacking electrons they would steal electrons from cellular structures and cause the cell to collapse. Reductants or “antioxydants” — will slow the aging process and prevent disease.

The antioxidant chemicals are found in many food-stuffs (such as vitamins A, C and E). I have seen benefits for the patient through high intake of [vegetables](#) and [fruits](#).

Orthomolecular medicine is based on antioxydants. However, when it comes to tissue

repair such as in osteoporosis for instance, I have not and cannot make any sufficient positive remarks concerning regular antioxidants. So apparently the antioxidants cannot do the job.

As science is relating aging to oxidation, the ONDAMED will do the opposite: reduction. Thence the lifespan of tissue can be expanded by minimizing oxidation through reduction with ONDAMED. The astounding and fast improvement of patients with osteoporosis after one or two sessions with the ONDAMED program 58 proves dramatically the concept of electron based aging processes which can be beautifully influenced and stopped by ONDAMED.

The device works as well for wellness and soft tissue repair and organ dysfunctions. Soft tissue repair is a little bit slower since it contains less metals as opposed to bone tissue. The electromagnetic field of organs and soft tissues versus bone tissues is much smaller. Therefore the electronic power of ONDAMED works so much faster for bone repair.

To understand this phenomenon you need to understand again that aging is the loss of electrons respectively oxidation.

Metals (mostly in bones) oxidize differently as opposed to non-metals (mostly in organs or soft tissue). When iron oxidizes it truly loses electrons which will move to the other atom to reduce that. Non metals in soft tissue structures do not really lose electrons. Here the electron moves just a little bit away from the non metal but is still attached to it. So the little 'moving away' would represent a relative loss of an electron resulting in a different oxidation state of the non metal. As the electron has narrowed towards another non metal a little bit, that atom or molecule would become the reductant. So non metals (organs) do not produce that much of a movement of electrons in oxidation – reduction processes and consequently do not produce such a large electromagnetic field as opposed to metals (bones). Since the electromagnetic field is the blueprint for tissue repair, the ONDAMED works faster on bone tissues (larger electromagnetic field) than on soft tissues. However, both the

anti aging and healing phenomenon exerted by the ONDAMED is based on the same principles in both bone and soft tissue repair.

33. PHYSICIAN ENDORSEMENTS

Physician Endorsements

Dr. Stephen T. Sinatra, M.D., C.N.S.

"The vibrational frequencies that are determined by sophisticated equipment like ONDAMED® is perhaps a search for real truth. This is the future of medicine"



Dr. Steven J Bock, M.D., ACCUP

"Patients with neuropathy who use ONDAMED® have up to 90% of their pain relieved."



Dr. Robert DeJonge, D.O.

"The ONDAMED® is the ultimate innovation in complementary medicine."



Dr. Rashid Buttar, DO, FACAM, FAAPM, FAAIM

"The ONDAMED® System often proves successful where no further biochemical means is able to prove effective."



Burton Goldberg, Ph.D. Hon.

"I am very impressed with ONDAMED®. In my opinion, the ONDAMED® is one of the most astounding devices I have ever seen. I have witnessed several sessions and I am amazed at the fast and lasting effects this system offers."



Dr. Wolf-Dieter Kessler, M.D.

"ONDAMED® is one of the finest German inventions. It allows easy and effective analysis and therapeutic application. For treating acute and chronic diseases. ONDAMED® has proven to be an indispensable tool."



Karlene ChinQuee, M.D., F.A.C.O.G.

"ONDAMED® for me is using old world concepts with advanced non-invasive technology and we are enthusiastic and thrilled to bring this technique to our patients at our Health and Wellness Center."



Dr. Svetlana Kogan, M.D.

"ONDAMED® teaches both the doctor and the patient to acknowledge the flexibility of our bodies, in the energetic sense."



**"It is a natural evolution to go from EAV to ONDAMED",
Dietrich Klinghardt, M.D., Ph.D.**

DOCUMENTED CASE STUDIES BY DR. SHARI LIEBERMAN

34. ASTHMA

DA is a 43-year old woman, who was first seen by the ONDAMED® practitioner in January, 2006. She suffered from severe asthma since puberty. DA needed to use the inhaler at least twice per day to manage her condition. She has also been on prednisone on and off over the course of 7 years when her condition became worse. The practitioner noted at the time of the visit that she didn't look well. Her complexion was sallow and pale with dark circles under her eyes. She also had the appearance of being "bloated". In addition to the asthma, DA complained of fatigue. She received one treatment per week for a total of seven treatments. During the ONDAMED® sessions she would feel on the verge of an asthma attack but it would dissipate. One week after the seventh visit, DA told the practitioner that she did not have an asthma attack the whole week. She also explained that the allergist was expecting to put her back on prednisone. However, she had a follow up visit with the allergist and he was surprised at how well she was doing and that she did not need a prescription for prednisone. DA's energy improved dramatically with each ONDAMED® treatment. DA saw the practitioner one month later in March, 2006 for an ONDAMED® treatment. DA looked terrific and in her own words, "felt like a different person." She hadn't used the inhaler for 5 weeks! Her energy was so much better that she was able to work as a nurse full time. Prior to the ONDAMED® treatment, DA had only been able to work per diem as a home aid nurse because her energy level was so poor. DA looked and felt healthy and well, something she hadn't experienced for a long time. DA did not receive an ONDAMED® treatment for another 3 months. She returned to the practitioner in June, 2007, for a "tune up" treatment. She had not used the inhaler for months. DA explained that her allergist couldn't believe how dramatically she improved or why. She had not received allergy shots for many years. DA has not had a recurrence of her asthma and occasionally sees the practitioner for a treatment.

35. AUTISM

TR is a 13-year old boy diagnosed with high level autism on February, 1994, when he was 2 yrs 10 months old. He also suffered from gastrointestinal problems including alternating diarrhea and constipation and occasional vomiting and stomach cramps. He was unable to tolerate hamburger, French fries and ice cream and was diagnosed with a gluten sensitivity by his physician. His parents found that he improved with a gluten and dairy restricted diet. However, it was becoming increasingly difficult for the boy to feel comfortable when he was with his friends since he was unable to have any of the things that they would consume. He started ONDAMED® treatment in April, 2005, and received two treatments per week for 4 months. By the end of the 4th month he was able to tolerate all foods without having any diarrhea, constipation, vomiting, stomach cramps or any other gastrointestinal symptoms. His parents continue to keep him on a restricted diet since it dramatically improved his functioning. However, he is able to cheat occasionally with the restricted foods without any serious symptoms. The parents moved and the child has not received any further ONDAMED® treatments. They keep in touch

with the ONDAMED® practitioner and TR is still able to eat the restricted foods (which he does occasionally) without any gastrointestinal upset.

36. ENDOMETRIOSIS

SS is a 42-year old woman diagnosed with severe endometriosis in 1993 when she had a golf ball size benign tumor in her left lower abdomen near the uterus. Prior to this diagnosis she had an appendectomy in 1991. By the end of 1994, the tumor had grown back again and in 1994 she had a total hysterectomy. The tumor continued to grow back and it was removed by laparoscopy in 1996, 1998 and 2000. Despite the hysterectomy and the laparoscopy, it continued to grow back. In 2004, surgeons at Columbia Presbyterian Medical Center said there was nothing more that they could do. She was experiencing severe pain since the tumor grew back to a golf ball size again. They prescribed Nubane that she could inject herself when the pain became unbearable. She needed to use it every 3 hours. She made an appointment for ONDAMED® treatment and was so weak from chronic pain that she was unable to travel for the appointment. The practitioner brought the machine to her home. She received 3 ONDAMED® treatments per week and within one week she felt stronger and had significantly less pain and was then able to travel to the practitioner's office for the treatments. She received 3 treatments per week for one month and then 2 treatments per week for the next month. Her pain was further reduced and she was able to go 50-60 hours at a time without the use of any pain medication. The golf size tumor had shrunk to the size of an olive as confirmed with a CT scan of the abdomen. Her surgeon was amazed. Unfortunately, SS moved and lost touch with the practitioner.

37. FIBROMYALGIA

MY is a 27-year old woman who was diagnosed with severe fibromyalgia when she was 18 years old. She had severe trigger point pain, muscle aches and frequent fevers for no reason. Oftentimes, she couldn't move or get out of the house. She felt absolutely terrible most of the time which resulted in depression. She became further depressed since she was always a straight A student and needed to drop out of college after 18 months because she just couldn't function. She was always considered intellectually gifted and this was a great blow. She didn't see her mother for 6 years while trying to cope with the disease. She mostly stayed at home and took odd jobs just to support herself. Her depression and severe symptoms prevented her from keeping any job for very long. She came back home in December, 2005, and got another job right away. However, once again she had to give up her job due to her symptoms. She was given medications for depression (Wellbutrin, Lamictal, Topamax and Cymbalta) to help manage her symptoms and she became anorexic from the drugs. She had always been a good eater and had a healthy diet. She was admitted to an eating disorder clinic for two days and continued treatment outpatient from Jan to Sept. MY recovered from the anorexia but her depression and fibromyalgia symptoms did not improve at all.

In February, 2007, she started ONDAMED® treatment. After the first 3-4 treatments, she emitted a very strong smell that may have been a detoxification or herxheimer reaction (no one knows for sure). The odor quickly went away and she immediately started feeling better after each treatment. She received treatment once per week. Her attitude changed, her depression improved, her fibromyalgia symptoms improved dramatically. She continues the treatment once per week and improves constantly. She is physically active and took 3 classes Spring, 07 and got straight A's with a 4.0 index. MY is able to travel and finally do the things she wants to do. She went from a completely non-functioning to a highly functioning human being. This summer she is traveling and doing all the things she wants to do. Because of her social schedule she has some weeks where she may miss an ONDAMED® treatment but she is still doing great. Once school starts she will be back to the once per week treatment. She still takes her medications and hopefully with time her doctor will wean her off them. In the words of her mother, "Everything clicked and came together once we started doing the ONDAMED® treatment. Until that time absolutely nothing worked."

38. FOOT PAIN

DP is a 49-year old woman who suffered from a painful left foot for two years. She broke her foot when she was 6 years old and over the years of wear and tear, she was diagnosed with a bone spur. She tried everything to alleviate her pain: physical therapy, reflexology, acupuncture, chiropractic and foot detoxification baths. She also used homeopathic anti-inflammatory pain medications – Arnica and Traumeel and experienced some temporary relief when she took them. However, the pain always returned. In October, 2006, she attended an ONDAMED® Advanced Training Seminar in New York City. While in NYC for the weekend her foot pain became so severe she could barely walk. When she returned to the hotel on Sunday, she immediately used the ONDAMED® that was available to those attending the seminar. After one treatment her pain completely disappeared. She could not believe it. She had a total of 3 treatments and since that time has not experienced any pain. DC tried to induce the pain in her foot with flexion and extension and was unable to do so. She remains completely pain free during walking, exercise or any other activity that prior to the ONAMED treatment would induce more pain. DP stated, "ONDAMED® is my medicine." She is actively using ONDAMED® on clients with dramatic results. These cases are in the process of being reported.

39. LYME DISEASE

AD, a 6-year old autistic child was brought to the office with evidence of a tick bite. The parent explained that the child has had a fever for several days and is much less active. AD wanted to sit on his mother's lap most of the time. AD also had a rash on the back of his neck and upper body. He received treatment with ONDAMED® during a visit in June, 2004. AD returned to the office the next day for another treatment. His parent stated

that the child's fever broke the previous night after the treatment. His rash was gone and his activity returned to normal. AD received a total of 5 treatments, one each day for the whole week (Monday-Friday). He did not receive any treatment over the weekend. He remains well with no evidence of Lyme disease. His laboratory analysis confirmed that he in fact had Lyme disease.

40. LYME DISEASE

MB is a 49 year old female diagnosed with Lyme Disease and co-infection with Babesia and Bartonella in October, 1991. Her symptoms rapidly progressed from fatigue to multiple sclerosis (MS) like symptoms such as numbness and tingling in the extremities. In January, 1992 she received intravenous (IV) Rocephin for 3 months after which time she was hospitalized for three and one half weeks for a severely low white blood cell, neutrophil and platelet count. This was a side effect due to the drug treatment.

She was given a challenge test to see if there was another antibiotic regimen she could tolerate. She was then given Primaxin via IV administration for approximately five and one half months. She developed antibiotic resistant bacteria (*C. difficile*) and was given Questran as treatment. She also developed dumping syndrome from the Primaxin. She developed nausea which was managed with Compazine administered both IV and as a suppository for one week. She was also given Minocin, Biaxin and Amoxycillin on and off until approximately June, 1994. She often had to stop treatment due to the side effects of a very low white blood count. Despite the massive antibiotic treatment, her symptoms did not improve. She would get a little better for a short time and then her symptoms would return. She also developed more symptoms during the years of antibiotic treatment including pain in both knees, left hip pain and debilitating neuropathy. Her doctor told her there was nothing else he could do for her.

She sought the advice of a well-know practitioner of Traditional Chinese Medicine (TCM). She was on a protocol of Chinese herbs and acupuncture for one year from 1997-1998. She continued to have symptoms on and off without any consistent relief. In 1999, she saw a Lyme disease specialist who added Biaxin and told her to go back on the TCM. She did the treatments concurrently for two and one half years without any results. Her symptoms still came and went. She took Medpron and Zithromax in 2003 for two months and for the first time she felt terrific. All of a sudden she developed dermatographism (a form of hives) as a side effect of treatment and had to stop treatment immediately. She became very depressed and hopeless since she appeared to exhaust all avenues of treatment.

MB is very resourceful and found information about Cat's Claw being helpful for her condition. She took it in 2004 without any result but stayed on it anyway. She bought a Rife Machine (ENEM 5) hoping it would alleviate her pain and disability. She used it for one and one half years without any relief of her symptoms. Each time she used the Rife, she experienced a Herxheimer reaction that was quite severe. She used the Rife machine from 2004-2006 without any result. She also added Artemesin to her protocol that is

supposed to have activity against her infections. However, this supplement also did not produce any lasting results but she continued to take it. MB had very severe symptoms and expressed that she “no longer felt human.” She had a poor quality of life and had developed more symptoms listed below despite further treatment.

MB found information about ONDAMED® and decided to try this as her last resort. She started treatment 4 months ago in February, 2007. After several sessions she felt well for the first time in years. The MS-like symptoms, numbness and tingling of the extremities, recurrent parasthesia, shortness of breath, chest compression sensation, dyspnea and joint pain completely disappeared. She continues her treatment at least two times each week. She became happy, healthy and felt like a human being again. In her own words, “You just can’t imagine how great I feel. I had completely given up hope. ONDAMED® gave me back my life.”

41. LYME DISEASE

MN is a 35-year old male diagnosed with Lyme disease in April, 2000. A tick probably bit him when he was living in Martha’s Vineyard from March to October, 1998. While he never developed a rash, he slowly began to develop symptoms. They included multiple sclerosis (MS) like symptoms including numbness to the extremities, fatigue, difficulty walking, neuropathy, memory loss, dyslexia (which he did not have previously), headaches, arthralgia, muscle atrophy and spinal pain. These symptoms became debilitating and he visited 10 different physicians. He had various diagnoses that included MS, Amyotrophic Lateral Sclerosis and clinical depression. He was not getting better. MN was getting worse.

In April, 2000, he visited a specialist in Lyme disease who found through laboratory analysis that he was positive for Lyme disease and Ehrlichia. Over the course of 3 years he received intravenous antibiotics that included Rocephin, Merrem, Zithromax, Plaquenil, Claforan, Amoxicillin, Doxycyclin and supportive nutritional supplements. MN also received 150 hyperbaric oxygen treatments. He experienced gradual improvement to about 60% of his functioning at best. But he still had many symptoms and whenever he went off the drugs, his symptoms became significantly worse. There was no lasting improvement. He knew that he could not stay on antibiotics forever, nor did he want to.

In May, 2003, he sought the advice of another integrative physician who gave him an ONDAMED® treatment. He received one ONDAMED® treatment each week and within 2 weeks his health improved to 90%. The improvement was so significant that MN bought his own machine July, 2003, and continued ONDAMED® treatments 2-3 times each week. He also stopped the antibiotics shortly after starting ONDAMED® treatment. MN used simple patient preset modules for one year. After one year, he decreased his treatment to 1-2 times per week. The MS symptoms including numbness and neuropathy are completely gone. He is able to walk and exercise normally. His memory has significantly improved and his headaches and dyslexia are gone. He does not have arthralgia, muscle atrophy or spinal pain. He was unable to work from 2000-

2003 and was on disability. He now works full time and travels extensively. MN became a master ONDAMED® trainer. If he overworks and pushes himself too hard or if he has days of sleep deprivation, he may feel some slight symptoms return such as mental fog and fatigue. MN will increase his usage of ONDAMED® to 2-3 times per week or until symptoms disappear – usually within one week. He continues to live a full and active life.

42. MENISCUS

ZA is a 49-year old physician specializing in adolescent medicine who heard about the ONDAMED® machine from MM (a chiropractor). ZA simply did not believe MM's results. He visited the ONDAMED® practitioners and refused to give them any information. Instead he said, "I do not believe in this energy medicine stuff. I need to see it with my own eyes. There is only one thing wrong with me – find it!" ZA was scanned with the ONDAMED® machine. It revealed problems with the right and left upper jaw and the left knee. ZA could not believe that these issues were picked up by the machine. He had a wisdom tooth removed from the left and right upper jaw (which he forgot about) two weeks prior to the scan. The "one thing" he had wrong with him was picked up by the machine – his left knee. He had a left torn medial meniscus for 10 years and was experiencing terrible pain. He had tried everything available to avoid surgery. The pain had become unmanageable. ZA reluctantly scheduled surgery. He received ONDAMED® treatment to his left knee and was scheduled for one ONDAMED® treatment each week. By the second treatment he experienced noticeably less pain. After the fourth treatment the pain was completely gone and he cancelled his surgery. ZA was convinced that the ONDAMED® therapy regenerated cartilage. He remains pain free.

43. MULTIPLE SKLEROSIS

LC is a 53-year old woman who was diagnosed with multiple sclerosis (MS) in 1997. Her brain scan revealed 16 lesions in her brain. She had a previous brain scan in 1991 when her symptoms became severe and was told it was normal. It was re-read by another specialist who performed the brain scan in 1997 and he could not believe that it was misread as normal when there was evidence of brain lesions. Her physician prescribed weekly injections of Avonex. Her symptoms included extreme dizziness affecting her balance and bouts of paresthesia and an inability to urinate (loss of bladder control). She went to the emergency room and was hospitalized many times over the years when her symptoms were severe. During one hospitalization she needed to be catheterized in order to urinate for 5 weeks in 1993. In 2000 she had a severe relapse. She experienced extreme exhaustion and was having difficulty stepping up onto a curb. It progressed to the point that she could barely walk. She was hospitalized for one month. She was paralyzed during the hospitalization for 3 weeks. LC was given Mitrozantrone (chemotherapy) during her hospitalization and slowly got better. She was told she had borderline relapsing-remitting MS and she would experience deterioration of her condition. She was sent home from the hospital after she made her home handicapped accessible since during her hospitalization she was in a wheelchair. LC was able to leave

the hospital with a walker rather than a wheelchair since she had some improvement. However, it took her a long time to recover at home. She could no longer continue working as the Executive Director for the Mental Health Association. LC experienced cognitive dysfunction after this relapse and had some difficulty swallowing. In addition to the Avonex she was given intravenous immunoglobulin therapy 2 days each month from 2001-2003. In 2003 she was prescribed 3200 mg of Neurontin each day (the maximum dose) for severe neuropathy. She was still being hospitalized each year and nothing seemed to be helping. She was progressing and getting worse. She wasn't able to work; her marriage became extremely stressful due to her illness and her level of stress made her condition even worse. She needed to walk with a cane even after she had some recovery after her hospitalizations. The MS continued to progress.

In March, 2005, LC started treatment with ONDAMED®. She had one treatment and did not feel anything immediately after. However, that evening she felt an “enormous psychological shift.” In her own words she felt like the jigsaw puzzle piece that was missing was finally put into place. She continued her treatment once per week and progressively improved. In January, 2006, she purchased her own machine and immediately started using it 3 times per week. Her energy, cognitive function and sense of well being improved significantly. She could actually run up stairs. Her neuropathy improved over time and she was able to slowly cut her dose of Neurontin to 100 mg per day. She is no longer experiencing any neuropathy and is working with her neurologist to completely go off the Neurontin. She continuously gets better rather than deteriorating over time. She sleeps better, has increased energy and her mobility is excellent. She no longer needs to walk with a cane and can exercise. LC is also being weaned of Labatolol for hypertension that she developed in 2000 and is now on a half dose. LC was prescribed Provigil for extreme fatigue that she took since 1998. When she started ONDAMED® she was slowly weaned off the medication and stopped taking it completely in 2006. She no longer experiences esophageal spasms. She was prescribed Verapamil in 2000 for the spasms and due to the use of ONDAMED®, she was weaned off this medication in 2006. LC continues to take Avonex and will be off the Neurontin shortly. Since 2000, she was prescribed Tizanadine for spasticity and will start cutting down her dose shortly. Her physicians are amazed at her progress and continuous improvement. Her MS was severe and deterioration was imminent and occurred up until the time she started ONDAMED®. She has since become an ONDAMED® practitioner and helps other seriously ill patients get well.

44. MUCOCELE

JM is a 16-year old male diagnosed with a mucocele on 7/19/06. It would grow, burst and then re-grow every 2-3 weeks. A mucocele represents a condition in which damage to one of the small salivary (spit) glands leads to the formation of a soft bump or a blister-like lesion in the mouth. This can occur on lips, under the tongue, or less commonly on the roof of the mouth. It is a common and harmless phenomenon, although it can be annoying for the patient. A history of enlargement, breaking and shrinkage is fairly common, and these lesions can be remarkably persistent. If untreated, these will often swell, break (like a water balloon), and heal over, only to swell again and repeat the

cycle. This condition rarely goes away on its' own. An oral surgeon usually has to remove the spilled saliva and affected gland in order to completely stop the process. Surgery was the only option presented to JM.

He was also told that excised tissue should then be examined under the microscope to exclude the very small chance of some form of growth or tumor. Neither JM nor his parents wanted to consider surgery as a first option. The day after the visit with the oral surgeon JM received an ONDAMED® treatment. The practitioner informed JM and his parents that she had absolutely no idea if ONDAMED® would be able to effect any change in the mucocele. He received ONDAMED® treatment on 7/20, 7/24 and 7/28. Between the first and second treatment, the mucocele decreased in size by 60%. It continued to shrink after the second treatment. By the third treatment the mucocele was almost completely gone with some very small residual left. Prior to the treatment, JM could feel the surface mucocele as well as the rest of the mucocele deeper into the tissue that was not visible. The deeper part of the mucocele had completely disappeared. The mucocele has not grown back since 7/28/07.

45. MUSCLE PAIN

MM is a 36 year old white female who was experiencing severe muscle and calf pain. Patient ran the night before receiving the ONDAMED® treatment. Patient explained that the injury was most probably due to the fact that she did not warm up enough before running and pulled muscles in both legs to the point of hardly being able to walk. After receiving one treatment the day after the injury in May, 2006, MM was able to walk 50% better by the end of ONDAMED® treatment. Within one hour she was completely pain free. The issue has not returned since that time.

46. OSTEOARTHRITIS

EP is a 74-year old white female, who received her first ONDAMED® treatment in July, 2005. Patient stated she was having a great deal of problems walking up and down steps due to osteoarthritis of the hips and knees. She used OTC pain medications when needed. EP had moved her bedroom to the downstairs of her home due to this issue. Patient was treated with preset programs 47, 98 and 101. Patient noticed great improvement in ability to walk after the first treatment. EP was able to climb steps easily after third treatment. She will receive ONDAMED® treatments as needed if pain returns. She has not required any treatment for the pain thus far for two years. She stopped the use of pain medications after receiving ONDAMED® treatment.

47. POST TRAUMATIC STRESS DISORDER (PTSD)

GW is a (54) year old fireman that was relocated to New York City immediately when 911 happened. He worked very long shifts during the first two weeks since there was so much devastation. Shortly after beginning his tour at ground zero he began to feel very angry, short tempered and intolerant. He also started taking everything personally and had tremendous difficulty sleeping. This was contrary to his normally easy going personality and his ability to fall asleep and stay asleep easily. He expressed that working at ground zero was a nightmare. GW worked at ground zero for one year until September 2002. Since his personality change was not dissipating, he sought professional help and saw a psychologist in September, 2002, who worked with people who had difficulty adjusting after 911. After a few visits, he was diagnosed with post traumatic stress disorder (PTSD). The psychologist wanted him to take a prescription medication but GW refused. One year later in September, 2003, he agreed to take the prescription drug Cymbalta. The drug made him feel great but he could not tolerate the side effects. It decreased his libido and he was unable to have an orgasm. GW did not want to be dependent on the drug and also felt that it was just masking his problem and he wanted to deal with it. The prescription was changed to Wellbutrin which helped to some degree. His short temper and difficulty sleeping was not improving and he was still experiencing nightmares. He started ONDAMED® on March 16, 2006, since he had heard about the company's depression study and that biofeedback may be able to help with his stress. The psychiatrist from Westchester Medical Center, heading up the double blind placebo controlled depression study with ONDAMED®, approved him for the study and GW began a course of treatment. He stopped his medication after the first treatment because he felt better and more relaxed. He was very surprised it had made a difference with just one treatment. He received three treatments over 2 weeks. GW improved with each treatment. By the sixth treatment he was no longer angry and suffering from the other PTSD symptoms. He was able to sleep better, but would still wake up after 3-4 hours. Upon completion of the 6 treatment sessions, GW was seen by the psychiatrist for his follow-up interview on April 7, 2006. After the interview the psychiatrist confirmed that he had received active treatment and suggested he continue with ONDAMED® due to his excellent response to treatment. He continues to see the psychologist once every two weeks.

GW's sleep disturbance did not improve. He was still waking up 3-4 hours after falling asleep. Once awake, he had difficulty falling back to sleep. Since he experienced excellent results with ONDAMED®, he decided to seek treatment to improve his sleep pattern. GW had his first appointment with the practitioner on September 7, 2007. He received 8 treatments in total from September 7, 2007, to September 24, 2007. After the third treatment the practitioner informed him that he would feel drowsy. Instead of experiencing drowsiness, he became hyper and felt a spike of energy. That night his sleep disturbance became worse. He had difficulty falling asleep, a symptom that he did not experience previously. After waking up 3-4 hours later, he was completely unable to fall back to sleep. These symptoms continued despite further ONDAMED® treatment. He decided to complete the 8 treatments in the hope that it would still improve his ability to sleep. A few days after his eighth treatment, he slept 7 hours straight without waking

up. This was the first time since he was diagnosed with PTSD in 2001. The improvement in his sleep pattern remains significantly improved. He now gets an average 6-8 hours of uninterrupted sleep each night.

48. VERTIGO

SS is a 76-year old man diagnosed with benign paroxysmal positional vertigo (BPPV) who had been experiencing symptoms for 5 years. In Benign Paroxysmal Positional Vertigo (BPPV) dizziness is thought to be due to debris that has collected within a part of the inner ear. This debris can be thought of as "ear rocks", although the formal name is "otoconia". Otoconia are small crystals of calcium carbonate derived from a structure in the ear called the "utricle". The otoconia, they are able to migrate into the canal system. The utricle may have been damaged by head injury, infection, or other disorder of the inner ear, or may have degenerated because of advanced age (which was the case for SS). Normally otoconia appear to have a slow turnover. They are probably dissolved naturally as well as actively reabsorbed.

BPPV is a common cause of dizziness. About 20% of all dizziness is due to BPPV. The older you are, the more likely it is that your dizziness is due to BPPV, as about 50% of all dizziness in older people is due to BPPV.

The symptoms of BPPV include dizziness or vertigo, lightheadedness, imbalance, and nausea. Activities that bring on symptoms will vary among persons, but symptoms are almost always precipitated by a change of position of the head with respect to gravity. Getting out of bed or rolling over in bed are common motions that precipitate the problem because people with BPPV often feel dizzy and unsteady when they tip their heads back to look up.

SS was diagnosed after extensive evaluation by numerous neurologists. Fortunately, he did not have anything serious. His MRI and CT scans were completely normal as was most of his neurological evaluation except for the BPPV. SS had BPPV 1-3 times each day and it would last from 30-60 seconds. He was referred to a physical therapist who was to train him to tolerate the positional changes that would cause the BPPV. Despite several sessions with the physical therapist, the improvement would only last 1-2 days. He started ONDAMED® treatment on 7/2/07 and received his second treatment on 8/8/07. After the first treatment he felt more energy but no improvement in the BPPV. After the second treatment he did not experience BPPV for some time. He went on a golf vacation the week after the treatment and he was still not experiencing BPPV. Since the last treatment he has experienced at most 5 bouts of BPPV. He will be receiving more sessions over the next month since he will be leaving for Florida in the winter and he wants to make sure that the BPPV does not return. While he is away he won't have access to the ONDAMED® practitioner since he'll be quite a distance away in another state. ONDAMED® caused rapid and lasting improvement in BPPV.

49. WRIST PAIN

MM is a 49-year old male chiropractor who experienced acute pain in his left wrist in 2004. MM had overworked the left wrist from doing adjustments in a very busy practice. The pain was so severe he had to stop practicing for three months in the hope that rest would help it get better. He tried various treatments including ice, heat and rest. However, the pain did not subside. MM was preparing to sell his practice since he was in pain and unable to do any adjustments. In July, 2004, he received one ONDAMED® treatment. After the treatment he experienced some pain relief. The protocol was going to be one treatment per week until the pain subsided. The next morning the pain was completely gone. He immediately went back to work and has not experienced any pain since 2004.

50. BRAIN TRAUMA

CASE STUDY OF S.R. Provided by Dr. E.J. Miami, FL

- Severe Traumatic Brain Injury
- Brain Contusion
- Evolving Bifrontal Contusions
- Subdural Hematomas - Left Frontal and Left FrontoParietal regions
- Post traumatic headaches
- Post traumatic seizure
- Post traumatic anxiety disorder
- Cognitive Deficits
- Ansomia

SR a 60-year old female, fell hitting her head against the floor on January 2007. There was positive loss of consciousness of about 30 minutes. She was transferred to Trauma Center at JMH. Her Glaswco Coma Scale upon arrival was 15. She was alert and disoriented 3x. Her admitting diagnosis was Basilar Skull Fracture, Altered State of Consciousness, Convulsions. She was discharged home the same day. SR should not have been released given her severe brain injury.

She was readmitted again on 2/19/07 with convulsions and was again discharged home the same day which was once again, inappropriate. She was evaluated by a psychiatrist. Neurological work indicated non displaced fracture on the right occipital bone, extending to the skull base, epidural hematoma, subdural hematoma extending along the left frontal, temporal, and parietal convexities, adjacent to the subarachnoid hemorrhage, multiple hemorrhagic contusions of bilateral frontal lobe and in the left anterior temporal lobe, fracture of the medial aspect of the right orbital roof and cribriform plate.

Her diagnoses were:

- Severe Traumatic Brain Injury
- Brain Contusion
- Evolving Bifrontal Contusions
- Subdural Hematomas - Left Frontal and Left FrontoParietal regions
- Post traumatic headaches

- Post traumatic seizure
- Post traumatic anxiety disorder
- Cognitive Deficits
- Ansomia

She was prescribed Topomax 50 mg twice daily. Other medications included Boniva, Lipitor 20 mg, Metomorfin 500 mg 2x daily, Aleve as needed.

SR was admitted to a Intensive Outpatient Brain Injury Program at Baptist Hospital in Miami, in April 2007. She had not received any type of rehabilitation prior to this. She presented with decreased cognitive communication skills, characterized by mildly impaired memory for details and information, moderately impaired word retrieval, moderately impaired executive functions, working memory deficits, psychomotor retardation, decreased problem solving abilities, decreased organizational skills, decreased visual perceptual functions, dizziness, inability to ambulate independently and she required verbal cues for safety.

I did a neuropsychological evaluation on 5/15/07. She demonstrated a few minutes of retrograde amnesia and 12 days of anterograde amnesia. The results of the testing indicated the main areas of deficits were in complex attention, working memory, executive functions and mental and written calculations. All of these functions are related to frontal lobe dysfunction. In addition, she had moderate impairment in her immediate and delayed memory for both visual and verbal information.

She was left with a change in personality, post traumatic anxiety and depressed mood.

I referred the patient for Neurofeedback. She started on May 22, 2007. She was getting Neurofeedback sessions 2 x per week. Initially, there was not much improvement. **Once the ONDAMED treatments started on 5/29/07, there was a significant improvement in her performance on the Neurofeedback.** She received 2 ONDAMED sessions per week, generally before the Neurofeedback session. SR has continued to receive cognitive retraining, Neurofeedback, ONDAMED and individual psychotherapy. She reached a plateau in the Neurofeedback. However she has made incredible functional progress in spite of having evidence of blood in her bifrontal lobes as per recent CT scan of the brain with continuing ONDAMED treatment. **She is driving, totally independent, seizure free and less anxious.** I am planning to discharge her from cognitive remediation in the middle of October. I will repeat the Neuropsychological Testing for comparison purposes before she goes back to work as an administrator, in December.

10/17/07 Topomax was completely discontinued 5 weeks ago.

51. IT Band Syndrome

SW is a 55-year old woman who was diagnosed with IT (iliotibial) band syndrome 7 years ago in May 2000. As an avid triathlon athlete she was unable to compete in the Spring of 2000 due to the pain she was experiencing. She was prescribed Vioxx by an orthopedic surgeon and she took it on and off for several years to manage the pain. SW would experience the return of the pain as soon as she increased her mileage in

preparation for a competition. The surgeon suggested that she undergo surgery to correct the problem. She refused to have surgery. Two years later in addition to the IT band syndrome, SW was diagnosed with plantar fasciitis in June 2002. Once again the orthopedic surgeon recommended that she take Vioxx to manage the pain. She also iced her foot, used foot wraps as well as stretching exercises. However, the pain and inflammation always returned when she stopped the medication especially when she increased her mileage for competition.

In September 2005, SW experienced mild to moderate depression for the first time in her life. She had heard about ONDAMED as a biofeedback device and decided to try the treatment to see if it would help her mood. After receiving one treatment in September she immediately felt more relaxed. By the time she left the practitioner's office and got into her car to drive home she felt in her own words as though, "a huge weight has been lifted off my shoulders." SW also felt "happier and more energy." She received a total of 6 sessions over the next 3 months due to the scheduling difficulties (holidays, travel). SW received one treatment each week for the first 3 weeks and then skipped several weeks between the next 3 sessions. After the 6th treatment SW was completely free of depression. Consequently, after the second ONDAMED treatment SW went for a long run and experienced absolutely no pain in her IT band or plantar. She had not experienced any IT band syndrome or plantar fasciitis since receiving the 6 treatments in 2005. She has trained for and competed in numerous athletic competitions. SW also noticed that her times improved in competitions such as triathalons.

SW trained extremely hard recently and competed in a half iron man triathlon on July 7, 2007. The IT band syndrome came back during the competition yet she was able to finish. The pain was not as intense as it had been before. The next day she received an ONDAMED treatment and the pain completely disappeared. She received one more treatment the following week. On August 19, 2007, SW competed in another triathlon. There was an odd depression in the road and she twisted her foot while running. The plantar fasciitis returned, although not as intense and she was able to finish. She received an ONDAMED treatment the next morning and once again the pain completely disappeared. SW was able to complete a tough 7-mile run that evening and has not experienced any return of pain. She has not taken any Vioxx or other pain/anti-inflammatory medication for pain or inflammation since receiving ONDAMED treatment.

52. Breast Cancer

VP is a 37-year old woman diagnosed with stage 2, estrogen + and progesterone + breast cancer on June 19, 2007. Shortly after the diagnosis she received a left breast mastectomy and breast reconstruction. Twenty lymph nodes were removed and 2 were positive for cancer. She was prescribed percocet to manage the pain from the surgery. VP had pain in her breast and also pain in the 19 inch incision that was in her abdomen where fat was removed for the breast reconstruction. In July 2007, VP started her chemotherapy treatment. It was recommended that she receive adriamycin plus cytoxan every other week (4 treatments) followed by taxol every other week for 4 treatments.

VP received Ondamed treatment after her first round of chemotherapy. She was completely fatigued from the chemotherapy and could barely make it to the office. VP was still experiencing a lot of pain from the breast surgery and abdominal incision and still needed to take percocet. By the time she left the practitioners office she had no more pain in her breast. Two hours later the pain in her incision completely subsided. She never thought it would help the pain and that the pain would come back. To date she still remains pain free. The Ondamed treatment also made her tolerate the chemotherapy. It helped her energy level so that she did not have to be bed ridden and could do her chores. She continues Ondamed treatment twice per week and makes sure she does it immediately after receiving chemotherapy. VP also noticed that she no longer experienced depression after the 2-3rd treatment and that she felt happier. She did not have a history of depression. She became depressed after being diagnosed with cancer. VP also reported that if she felt a sinus problem or cold coming on, by the end of the Ondamed treatment it would disappear.

Kim Fischer

53. Plantar Fasciitis

SH is a 57-year old woman diagnosed with plantar fasciitis (PF) in January 2007. She had traveled to Europe for 5 weeks between October and November 2006 and walked extensively during the trip. She is 5'2" and 175 pounds and the weight on her feet may have been the cause of the PF. She had no history of PF before this time. She experienced severe pain and went to numerous physicians including a podiatrist. She tried an anti-inflammatory drug and experienced severe constipation and insomnia. It made her feel terrible so she stopped taking it and refused to take any further medication. The drug did not help her PF. Ultrasound and ice would help the pain to some degree temporarily, but then the pain would come back. SH also saw a physical therapist which decreased the pain to some degree right after the session, but then the pain would return within a short time. Her PT was still causing great pain. SH removed nightshades from her diet (potato, tomato, eggplant, peppers) which and followed the dietary advice from the book "Stop Inflammation Now" by Richard Fleming that helped reduce the pain and inflammation to some degree. However, the pain was still there. She became depressed from the pain and the fact that nothing significantly helped her PF.

SH had her first ONDAMED treatment in February 2007. She received one treatment per week and after the first 3 treatments her attitude improved, she felt less depressed, she had more energy and her pain was noticeably less. In March she stepped up the ONDAMED treatment and received 4 treatments in 10 days. For the first of the 4 treatments she hobbled up the stairs to the practitioners office. By the 4th treatment she could walk normally for the first time since being diagnosed with PF and she had significantly less pain. The pain continued to significantly decrease and subside with each ONDAMED treatment. She had so much success with ONDAMED that she bought her own machine and diligently uses it 2 times each week. She has virtually no pain, she can walk and live normally and she is able to increase her exercise without pain. If she

feels any discomfort in her feet, she uses ONDAMED to relieve the discomfort. She no longer experiences debilitating pain from the PF and is able to lead a full and active life.

54. Plantar Fasciitis

SP is a 55-year old male diagnosed with plantar fasciitis of the left foot in January 2007. The onset was sudden and the patient was limping and unable to put his full weight on the foot. The patient is obese and weighs 350 pounds. He was given diclofenac for 3 weeks and there was no alleviation of the pain. Prior to receiving a steroid injection to the foot, the patient was given one ONDAMED treatment. Shortly after the treatment the patient was able to walk normally since the pain was completely gone. Two weeks later some of the pain returned (not as severe as before). He received two treatments in one week. After the second treatment the pain from the plantar fasciitis was completely gone. SP has remained pain free for more than 7 months. He has not received any steroid injection to the foot and is not taking any pain medications.

James Fugedy

55. Animal case study #2 Paralyzed dog

a dog went lame and became paralyzed it lost the use of her hind quarters. Had lots of bone spurs probably due to the use of prednisone for 7 years for a blood ailment. I visited 5 times. At first no pulse was taken ran anti stress and pain, then took pulse and numerous neurological programs showed up so I ran them. 2nd visit took pulse but pretty much same things came up. third visit, swollen limbs were looking much better and the dog was dragging herself along the floor to the door. With the aid of a harness to help her to her feet, she took her first baby steps into the back yard. 4th visit, just helped pick up her hind quarters and she walked the entire yard by herself. The 5th visit no assistance needed she would get up (a little weak of course) and would go to the door stay outside 1/2 hour, smelling around and upon return jumped back on the couch as usual as if nothing were ever wrong.

If you would like exact information as to what programs were run I'd be happy to send copies of my notes. My next case I will try Main Focus. In the meanwhile working on a dog with arthritis. Ill keep in touch. Till then, Believing in God's best for you. best regards

Margaret Bowlander

56. Fly Strike (Animal Case Study, Sheep)

Hello Dr. Kessler,

Please tell Karin how much I enjoyed working and getting to know her at the advanced training class. Case study I have had with animals.

1st case a sheep with fly-strike. This is a condition caused by flies depositing their eggs

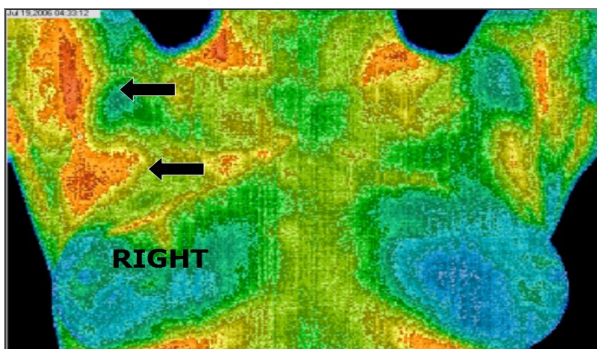
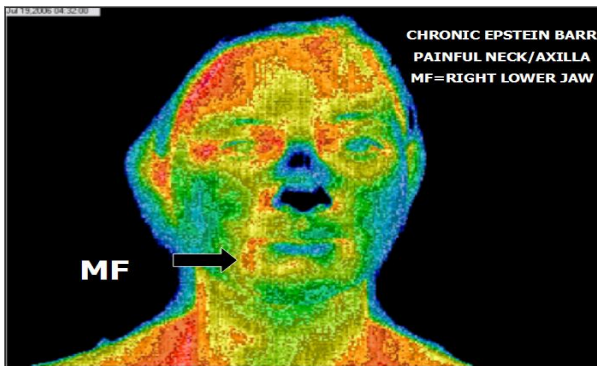
under the skin of a weakened animal and the maggots eat the animal alive. The animal went down, stopped eating and drinking. The owner and breeder picked out maggots for three full hours causing much pain and leaving open sores. She was treating for pain banderol and a zinc paste to cover gapping wounds. The animal couldnt stand up and hung her head. Animal too sick to run a pulse so I ran pre-set program for antistress, then pain program twice. Once completed ran the joy of life. This was late morning. By 6 pm animal was standing and pushing her hay around with her nose but she was drinking. By 9pm the sheep was eating. The next morning I returned and took animals pulse ran the anti stress program then tissue regeneration. Skin with wool was black and fell off but in 1 1/2 weeks she looked great. Healed very well. There was no need for my return.

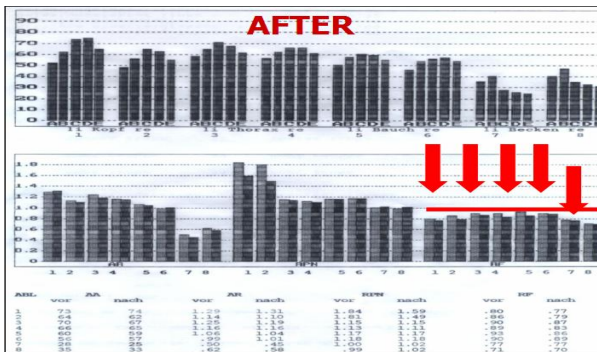
Margaret Bowlander

CASE DOCUMENTATIONS

Below:

23 year old female with long existing pain in both her right axilla and right upper lateral breast. Thermgraphy verified ONDAMED®'s reveal of a focus in her right lower jaw area. She had a history of Epstein Barr infection, which was also detected by ONDAMED®. Treatment was necessary at her right lower jaw in order to jump start healing in her lymph system (right axilla and right breast).





SEG before and after treatment - The red line over the third group of bars depicts the normality range of the graphics. It should be at 1.0 in that group. Elevation beyond 1.0 in the third group indicates a major regulatory deficit of a more acute phase. Bar 7 and 8 are missing completely. There is “no” regulation in the intestinal part. ONDAMED® treatment normalized that by treating the right jaw area with both: specific frequencies and Epstein Barr frequencies (Kessler clinic, 2005)

Below:

67 year old patient with excruciating lower back pain since 1998. He was resistant to any therapy and hardly able to walk. After being treated on areas L4/L5 with ONDAMED® (2nd session), he developed a carbuncle on his left inner thigh. The carbuncle healed in a very short time. Immediately after the development of that ‘drainage’ spot (ulcer), he was pain free in his back and had a very happy face! Whether a patient has to drain toxins internally or externally, ONDAMED® always triggers healing by electronic transfer and jump starting regulation.



1. REFERENCE LIST OF MICROORGANISMS

101.1-754 Hz: Salmonella, Salmonella typhimurium, Streptococcus, Anaplasma marginale

101.2-811 Hz: Anaplasma marginale

101.3-776 Hz: Actinobacillus, Bronchitis, Cladosporium fulvum, Cystic fibrosis, Diphtheria, E coli, Enterovirus, Epicondylitis, Epstein Barr virus, Erysipelas, Herpes-type 2, Human T lymphocyte Virus3, InfluenzaLyme, Parasites roundworms, Parasites strongyloides secondary, Periodontal disease, Pertussis, Pneumonia_bronchial, Pneumoniae klebsiella, Polio, Prostatitis, Pyelitis proteus, Pyorrhea, Streptococcus pyogenes, T-lymph virus TR, Ancylostoma braziliense.

101.4-748 Hz: Brucella melitensis, Herpes TR, Influenza, Mycogone, Pneumonia, Trichophyton nagel, Ancylostoma caninium

101.5-790 Hz: Lyme (cystic form), Ascaris

102.1-788 Hz: Diphtheria, Echo Virus, Enterovirus Hepatitis Herpes simplex RTI, Influenza, Rocky Mountain spotted fever, Stomatitis aphthous, Candida, Ascaris megalcephala.

102.2-896 Hz: Measles rubella, Parasites ascaris, Balantidium-coli-zysten

102.3-689 Hz: Influenza, SARS, Besnoitia

102.4-828 Hz: Candida, Lyme, Capillaria hepatica

102.5-759 Hz: Mumps, Pyrogenium mayo, Chilomastix-Zysten

103.1-830 Hz: Mycoplasma, Feline Leukemia, Parasites flukes, Botulinum, Microsporium audouini, Stomatitis aphthous, Chilomastix-Zysten (2)

103.2-769 Hz: Amoeba, Coxsackie, Herpes simplex , Shigella, Chilomonas

103.3-831 Hz: Botulinum, Microsporium audouini, Clonorchis –sinesis

103.4-800 Hz: Bacillus infections, Diphtheria, Dyspepsia, E coli Endometriosis Fibromyalgia Herpes zoster, Lumbago, Lyme disease, Morgellons disease, Psoriasis, Retrovirus variants, Ringworm, Streptococcus infection general, Vaginosis, Cryptocotyle lingua

103.5-783 Hz: Leukoencephalitis econdary, Measles, Pneumoniae klebsiella Corynebacterium xerosis HC, Mycoplasma, Dientamoeba fragilis.

104.1-797 Hz: Lyme and Rocky Mtn Spotted Fever, Parasites-ascaris, Warts verruca, Dirofilaria immitis

104.2-817 Hz: Salmonella enteritidis, Trichophyton nagel secondary, Pneumoniae klebsiella, Sinusitis, Echinoporphium recurvatum

104.3-831 Hz: Botulinum, Microsporium audouini, Echinostoma revolutum

104.4-847 Hz.: Endamoeba gingivalis

104.5-770 Hz: Bacillus_Coli, Branhamella Moraxella catarrhalis, Eczema, Furunkulosis, Pyrogenium mayo, Shigella, Tuberculosis aviare, Endolimax nana

105.1-840 Hz: Bartonella henslae, Chlamydia general, Chlamydia trachomatis, E_coli, Lyme, Pneumoniae klebsiella, Endolimax nana (2)

105.2-775 Hz: Candida, Botulinum, Branhamella Moraxella catarrhalis, Rhizopus nigricans, Entamoeba histolytica

105.3-744 Hz: Cervical polyp, Epstein Bar virus, Influenza virus B, Parkinsons, Entamoeba histolytica (2)

105.4-822 Hz: Actinobacillus, Bacillus subtilis, Conjunctivitis, Enterovirus, Herpes simplex 1, Parasites-roundworm, Parasites-trichinosis, Perniciosia, Perniosis, Enterobius vermicularis

105.5-820 Hz: Rheumaticus, Rhino pneumonitis, Sinusitis, Bordertella pertussis, Eurytrema pancreaticum

106.1-822 Hz: Actinobacillus, Bacillus subtilis, Conjunctivitis, Enterovirus, Herpes simplex 1, Parasites-roundworm, Parasites-trichinosis, Perniciosia, Perniosis, Fasciola hepatica

106.2-827 Hz: Amoeba, Candida, Parasites-enterobiasis, Parasites-roundworms, Fasciola hepatica Zerkarien

106.3-824 Hz: Influenzinum vesic_SW, Typhoid fever, Staphylococcus aureus, Fasciola hepatica Eier

106.4-823 Hz: Influenza, Tularemia, Fasciola hepatica Mirazidien

106.5-821 Hz: Bordertella pertussis, Fasciola hepatica Redien

107.1-835 Hz: Dental_Infections, Morgellons disease, Parasites-enterobiasis, Parasites-roundworms. Rhodococcus, Fasciolopsis buski

107.2-834 Hz: Coxsackie-B1, Parasites-liver flukes, Proteus, Fasciolopsis buski Eier

107.3-838 Hz: Pneumonia, Tuberculosis, Fasciolopsis-Zerkarien

107.4-834 Hz: Coxsackie-B1, Parasites-liver flukes, Proteus, Fasciolopsis-Miraz

107.5-834 Hz: Coxsackie-B1, Parasites-liver flukes, Proteus, Fasciolopsis-Redien

108.1-863 Hz: Influenza, Lyme, Candida, Fiscoedrius elongates

108.2-882 Hz: Staphylococcus, Streptococcus, E-coli, Gastrothylax elongates

108.3-823 Hz: Influenza, Tularemia, Giardia-lambia, Giardia-lambia

108.4-739 Hz: Influenza, Pullularia pullulans, Gyrodactylus

108.5-755 Hz: Parvovirus, Sporotrichum pruticosum, Heamonchus contortus

109.1-875 Hz: Dental Infections, Influenza, Mucor racemosus, Pseudomonas mallei, , Staphylococcus, Streptococcus, Hasstile

109.2-829 Hz: Mycoplasma, Parasites-giardia, Hypodereum conoideum

109.3-855 Hz: Gliocladium, E-coli, Herpes simplex 1, Iodamoeba butschlii

109.4-777 Hz: Actinobacillus, Hepatitis, Mycoplasma-pneumonia, Streptococcus viridans, Trichophyton nagel, Iodamoeba butschlii (2)

109.5-781 Hz: Hepatitis, Influenza, Parasites-leishmania donovani, Leishmania brasiliensis

110.1-777 Hz: Actinobacillus, Hepatitis, Mycoplasma-pneumonia, Streptococcus viridans, Trichophyton nagel, Leishmania donovani

110.2-781 Hz: Hepatitis, Influenza, Parasites-leishmania donovani, Leishmania mexicana

110.3-785 Hz: Bacillinum, Cryptococcus neoformans, Herpes simplex 1, Influenza, Lyme Mucor_plumbeus, Pseudomonas aeruginosa, Leishmania tropica

110.4-776 Hz: Acidosis, Actinobacillus, ALS_2, Bells_Palsy_1, Bronchitis, Cladosporium fulvum, Cystic fibrosis, Diphtheria, E coli, Enterovirus, Epicondylitis, Epstein Barr virus, Erysipelas, Herpes-type 2, Human T lymphocyte Virus3, Influenza Leukoencephalitis, Lyme, Parasites roundworms comp, Parasites strongyloides secondary, Pelvic_inflammatory_disease, Periodontal disease, Pertussis, Pneumonia_bronchial, Pneumoniae klebsiella, Polio, Prostatitis, Pyelitis proteus, Pyorrhea, Streptococcus pyogenes, T-lymph virus TR, Leucocytozoon

110.5- 704 Hz: Loa Loa

111.1-857 Hz: Bartonella henslae, Influenza, Cholera, Macracanthorhynchus

111.2-854 Hz: Bacillinum, Endometriosis, Tapeworm, Liver Flukes, Metagonimus Yogoawai

111.3-.80 Hz: Macracanthorhynchus, Myxosoma

111.4-697 Hz: Aspergillus general, Aspergillus niger, Influenza_1994, Pertussis, Tuberculosis aviare, West Nile 2, Naegleria fowieri

111.5-852 Hz.: Mycogone fungoides, Mycosis fungoides, Solfeggio scale, Toxoplasmosis, Onchocerca volvulus

112.1-855 Hz: Gliocladium, Paragonimus Westermani

112.2-837 Hz: Gulf War Syndrome, T-lymph virus TR, Passalurus ambiguus,

112.3-815 Hz: Salmonella enteriditis, Plasmodium cynomogi

112.4-727 Hz: Actinomyces israelii, Autointoxication, Bacillus infections, Candida 2, Conjunctivitis, Dengue fever TR, Fungus general, Herpes simplex, Influenza, Lichen planus, Mumps tertiary, Staph infection, Plasmodium falciparum

112.5-855 Hz: Gliocladium, Plasmodiumvivax

113.1-792 Hz: Cryptococcus neoformans, Lyme, Pneumocystis carinii

113.2-775 Hz: Botulinum, Branhamella Moraxella_catarrhalis, Rheuma, Rhizopus nigricans, Prosthogonimus macrorchis

113.3 879 Hz: Carvularia spiratera, Staphylococcus general, Streptococcus infection general
Campylobacter pyloridid HC, Herpes simplex II, Sarcocystis

113.4-923 Hz: Coxsackie General, Trichophyton rubrum, Erwinia carotovora HC, Streptococcus pyogenes
HC, Schistsoma haematobium

113.5-689 Hz: Influenza, Parasites general, Lyme, Schistsoma mansoni

114.1-893 Hz: Cryptosporidium, Pemphigus, Stephanurus dentalus

114.2-789 Hz: Spriochetal Bacteria, Stigeoclonium

114.3-778 Hz: Actinobacillus, Branhamella Moraxella_catarrhalis, Bronchiectasis, Entamoeba histolytica,
Epicoccum, Epstein_Barr_virus_secondary, Herpes Simplex 1, Lymphangitis, Pneumonia general, Rhodo
torula, Streptococcus viridans, Candida, Strongyloides

114.4-712 Hz: Gonorrhoea, Herpes simplex, Influenza grippe, Streptococcus hemolytic, Typhoid fever,
Toxoplasmosis,

114.5-788 Hz: Diphtheria, Echo Virus, Enterovirus General, Hepatitis general, Herpes simplex, Influenza,
Monotospora, Rocky_Mountain spotted fever, candida, Trichinella spiralis

115.1-738 Hz: Dematium nigrum, Epstein Barr virus, Parasites-strongyloides secondary, Staphylococcus
aureus, Trichomonas vaginalis

115.2-758 Hz: Aspergillus, Lyme, Rocky Mtn. Spotted Fever, Trichuris

115.3-826 Hz: Enterobiasis, Roundworms, Trypanosoma braucei

115.4-898 Hz: Legionella, Clostridium botulinum, Naegleria fowleri, Trypanosoma cruzi

115.5-848 Hz: Bartonella henslae, Blastocystis hominis, Herpes type 2, Streptococcus, Trypanosoma
equiperdum

116.1-769 Hz: Amoeba, Shigella, Trypanosoma gambiense

116.2-829 Hz: Adenovirus HC, Giardia, Mycoplasma, Trypanosoma lewisi

116.3-827 Hz: Amoeba enterobiasis, Adenovirus, Trypanosoma rhodesiense

116.4-863 Hz: Influenza, Yeast, Urocleidus

116.5-790 Hz: Mycoplasma fermentans, Lyme, Plantarwarts

117.1-785 Hz: Bacillinum, Cryptococcus neoformans, Herpes simplex I, Herpes TR, Mucor plumbeus,

117.2-832 Hz: Dysentery, Dyspepsia, E coli, Entamoeba_Mycoplasma_salivarium_1, Shigella,

117.3-897 Hz: Legionella, Clostridium botulinum, Naegleria fowleri,

117.4-849 Hz:

117.5-857 Hz: Bartonella henslae, Pseudomonas mallei

118.1-786 Hz: Adenovirus, Bartonella henslae, Campylobacter, Entamoeba, Herpes zoster, Staphylococcus, Streptococcus,

118.2-817 Hz: Trichophyton nagel

118.3-789 Hz: Shigella sonnei Streptococcus mitis, Spirochetal bacteria

118.4-853 Hz: Alternaria tenuis, Bacillium, Cysticercus fasciolaris

118.5-912 Hz: Bacillus anthracis, Campylobacter, Salmonella, Streptococcus pneumoniae, Diphyllbothrium erinacei mans. Scolex

119.1-884 Hz: Fungus, Lyme and Rocky Mtn Spotted Fever, Diphyllbothrium latum

119.2-858 Hz: Bartonella henslae, Mycoplasma HC, Dipylidium caninum

119.3-882 Hz: Herpes I, Echinococcus granulosus

119.4-882 Hz: Herpes I, Echinococcus granulosus

119.5-861 Hz: Influenza, Candida, Echinococcus granulosus, Zysten

120.1-890 Hz: Echinococcus multilocularis

120.2-933 Hz: Hepatitis C, Mold, Hymenolepis cysticercoids

120.3-869 Hz: Hepatitis B, Influenza, Typhoid fever, Hymenolepis diminuta

120.4-840 Hz: Bartonella_henslae, Chlamydia trachomatis, E coli, Moniezia

120.5-840 Hz: Bartonella_henslae, Chlamydia trachomatis, E coli, Moniezia expansa

121.1-885 Hz: Actinobacillus, Influenza haemophilus, Staphylococcus, Streptococcus, Multiceserialis

121.2-928 Hz: Candida, Taenia pisiformis

121.3-908 Hz: Candida, Taenia pisiformis eggs

121.4-930 Hz: Malaria, Taenia saginata

121.5-927 Hz: Enterobacter enterogenes, Gonorrhoea neisseria, Taenia solium

122.1-867 Hz: Erwinia amylovora_HC, Gaffkya tetragena, Taenia solium
Influenza

122.2-666 Hz: Coeliacia, Hepatitis C, Morgellons disease, Demodex folliculorum

122.3-690 Hz: Actinomyces israelii, Adenovirus comp, Entamoeba histolytica secondary, Tuberculosis, Typhoid fever, Dermatophagoides

122.4-701 Hz: Follicular mange, Herpes type C, Parasites

122.5-856 Hz: E coli, Herpes Simplex 1, Ornithonyssus

123.1-717 Hz: Salmonella paratyphi B, Hepatitis A, Sarcoptes scabiei, Blue Green Algae

123.2- 0.5 Hz: Bryozoa Crystalla

123.3-773 Hz: Actinobacillus, Enterobiasis, Roundworm, Salmonella typhi

123.4-562 Hz: Canine Parvovirus, Hepatitis, Mucor mucedo

123.5-644 Hz: Epidermophyton floccinum, Lyme secondary, Mycoplasma fermentans, Staphylococcus, Rhizobium meliloti

124.1-562 Hz: Canine Parvovirus, Hepatitis, Rhizobium meliloti

124.2-773 Hz: Actinobacillus, Enterobiasis, Roundworm, Salmonella typhi, Erkaltungsvirus

124.3-707 Hz: Salmonella paratyphi, Fungus

124.4-775 Hz: Candida, Botulinum, Branhamella Moraxella catarrhalis, Rhizopus nigricans, Entamoeba histolytica, Caries

124.5-750 Hz: Influenza virus B, Pullularia pullulans, Trichophyton nagel, Caries

125.1-718 Hz: Caries

125.2-638 Hz: Bacteroides fragilis

125.3-572 Hz: Herpes zoster

125.4-739 Hz: Parasites-roundworm, Parasites-strongyloides

125.5-575 Hz: Cryptosporidium

126.1-910 Hz: Candida

126.2-751 Hz: Basidiomycetes, Candida tertiary, Cyclospora

126.3-544 Hz: Cephalosporium, Geotrichum candidum

126.4-828 Hz: Candida, Lyme, Capillaria hepatica

126.5-664 Hz: Salmonella typhi, Tuberculinum, Herpes 1

127.1-596 Hz: Enterovirus, Trichophyton nagel

201.1-734 Hz: Epicoccum, Herpes simplex I, Influenza haemophilus, Measles rubella, Stomatitis aphthous , Yellow fever, Aflatoxin

201.2-710-Hz: Crocus sotillus, Streptococcus hemolytic, Cytochalasin B

201.3-562 Hz: Canine Parvovirus, Hepatitis, Mucor mucedo, Griseofulvin

201.4-576 Hz: Struma parenchyma

201.5-541 Hz: Influenza grippe, roundworm, trichinosis, Tuberculosis

202.1-687 Hz: Branhamella Moraxella catarrhalis, Geotrichum candidum, Sporotrichum pruticosum, Sterigmatocystin

202.2-781 Hz: Leishmania donovani, Zearalenon

202.3-632 Hz: E coli, Rickettsia, Bacteroides fragilis

202.4-984 Hz: Cerumen, Influenza, Candida,

202.5-824 Hz: Influenzinum vesic SW, Typhoid_fever, Staphylococcus aureus, Staphylococcus

203.1-767 Hz: Hepatitis B, Papilloma, Adenovirus

203.2-725 Hz: T-lymph virus, Trichophyton, Adenovirus

203.3-720 Hz: Influenzinum Berlin, Meningococcus Virus, Rhodococcus, Rickettsia, Streptococcus pyogenes, Tuberculosis aviare, Alpha- streptococci

203.4-768 Hz: Actinobacillus, Adenovirus, Campylobacter, Canine parvovirus type B, Entamoeba histolytica, Fusarium, Icterus haemolytic, Bacillus anthracis

203.5-708 Hz: Coxsackie Bacillus anthracis

204.1-701 Hz: Follicular mange, Herpes, Bacillus cereus

204.2-764 Hz: Influenza-Bach Poly, Mycogone_fungoides, Nigrospora, Penicillium chrysogenum, Rhodococcus, Bacillus subtilis

204.3-729 Hz: Mucor racemosis, Mycogone fungoides, Tuberculosis klebsiella

204.4-726 Hz: Rickettsia, Trichophyton

204.5-814 Hz: Coxsackie B6, Influenza

205.1-707 Hz: Salmonella paratyphi

205.2-633 Hz: Bacteroides fragilis, Gliocladium, Gulf War Syndrome Hepatitis C, Pseudomonas aeruginosa, Bacteroides fragilis

205.3-636 Hz: Bacteroides fragilis, Herpes

205.4-743 Hz: Aspergillus, Malaria, Beta streptococcus

205.5-792 Hz: Cryptococcus neoformans, Blepharisma

206.1-644 Hz: E coli, Herpes Simplex 1, Ornithonyssus, Bordetella pertussis

206.2-740 Hz: Guillain Barre Syndrome, Influenza virus B, Lichen planus, Lichen sclerosus, Morgellons disease, Borellia burgdorferi

206.3-771 Hz: Influenza Bach Poly, Parasitesn nematode, Trichophyton, Candida, Branhamella catarrhalis

206.4-713 Hz: Mucor racemosis, Campylobacter

206.5-687 Hz: Branhamella Moraxella catarrhalis, Geotrichum candidum, Sporotrichum pruticosum, Streptococcus Candida-tertiary, Mycoplasma pneumonia, Pyrogenium mayo, Streptococcus pneumoniae, Campylobacter

207.1-750 Hz: Cerumen, Herpes simplex, Trichophyton nagel, Candida Albicans

207.2-727 Hz: Actinomyces israelii, Autointoxication, Bacillus infections, Candida 2, Conjunctivitis, Dengue fever TR, Fungus general, Herpes simplex, Influenza, Lichen planus, Mumps tertiary, Staph infection, Plasmodium falciparum, Bazillenausstrich

207.3-741 Hz: Sinusitis maxillaries, Chlamydia trachomatis

207.4-747 Hz: Nocardia, Streptothrix, Clostridium acetobutylicum

207.5-705 Hz: Coxsackie B2, Fusarium oxysporum, Helicobacter pylori, Neurospora sitophila
Campylobacter, Clostridium botulinum

208.1-769 Hz: Amoeba, Coxsackie, Herpes, Shigella, Clostridium perfringens

208.2-707 Hz: Salmonella paratyphi, Clostridium septicum

208.3-664 Hz: Lyme, Mycoplasma, Salmonella, Corynebacterium diphtheriae

208.4-616 Hz: Erysipelas, Histoplasma, Malassezia furfur, Streptococcus pyogenes, Corynebacterium xerosis

208.5-704 Hz: Mycoplasma_fermentans, Campylobacter, Coxsackie virus B-1

209.1-705 Hz: Coxsackie B2, Fusarium oxysporum, Helicobacter pylori, Neurospora sitophila
Campylobacter,

209.2-710 Hz: Crocus sotillus, Streptococcus hemolytic, Coxsackie virus B-4

209.3-797 Hz: Lyme and Rocky Mtn Spotted, Parasites-ascaris, Ringworm, Cytomegalovirus antigen

209.4-836 Hz: Influenza grippe, Cytophaga rubra

209.5-699 Hz: Cryptosporidium, Lyme, Diplcoccus diphtheria

210.1-686 Hz: Mucor racemosis, Diplcoccus pneumonia

210.2-741 Hz: Sinusitis maxillaries

210.3-730 Hz: Influenza, West Nile, Eikenella corrodens

210.4-727 Hz: Actinomyces israelii, Autointoxication, Bacillus infections, Candida 2, Conjunctivitis, Dengue fever TR, Fungus general, Herpes simplex, Influenza, Lichen planus, Mumps tertiary, Staph infection, Plasmodium falciparum, Bazillenausstrich, Enterobacter aerogenes, Epstein-Barr virus

210.5-678 Hz: Actinobacillus, Hormodendrum, Mycosis fungoides, Staphylococci infection, Streptothrix, Erwinia amylovora

211.1-718 Hz: Herpes type 2A, Erwinia carotovora

211.2-695 Hz: Brucella melitensis, Helicobacter, Hormodendrum, Escherichia coli

211.3-765 Hz: Echo Virus, Influenza, Lyme, Pneumonia klebsiella, Trichophyton nagel secondary, Trichophyton tonsuraus, Escherichia coli

211.4-673 Hz: Clostridium difficile, Lyme, Pyrogenium suis, Mycoplasma general, Gaffky tetragen

211.5-660 Hz: Entamoeba histolytica, Epstein_Barr, Furunkulosis, Gonorrhoea, Herpes progenetalis, Influenza, Mycoplasma pneumonia, Treponema_pallidum, Gardnerella vaginalis

212.1-657 Hz: Coxsackie B6,

212.2-809 Hz: Erythema infectiosum

212.3-568 Hz: Aflatoxin, Herpes simplex Type 1

212.4-775 Hz: Botulinum, Branhamella Moraxella catarrhalis, Herpes simplex Type 1

212.5-691 Hz: Botulinum, Streptococcus hemolytic, Herpes simplex Type 2

213.1-831 Hz: Botulinum, Microsporium audouini, Stomatitis aphthous, Herpes Zoster

213.2-735 Hz: Amoeba, Campylobacter, Herpes type 2, roundworm, Ringworm, Histomonas meleagridis

213.3-582 Hz: Candida, Histoplasma capsulatum

213.4-712 Hz: Lichen planus, Lichen sclerosus, Morgellons disease,

213.5-612 Hz: Echo Virus, Enterovirus, Influenzinum vesica, Leptospirosis, Influenza A and B

214.1-778 Hz: Actinobacillus, Branhamella Moraxella catarrhalis, Bronchiectasis, Epicoccum, Epstein Barr_virus, Mucor racemosis secondary, Rhodo torula, Streptococcus viridans, Klebsiella pneumoniae

214.2-814 Hz: Coxsackie B6, Klebsiella pneumoniae

214.3-675 Hz: Candida tropicalis, Leptospira interrogans

214.4-775 Hz: Candida, Botulinum, Branhamella Moraxella catarrhalis, Rhizopus nigricans, Entamoeba histolytica, Leptospira interrogans

214.5-721 Hz: Enterovirus, giardia, roundworms, strongyloides,

215.1-737 Hz: Geotrichum candidum, Pseudomonas mallei,

215.2-800 Hz: Bacillus infections, Diphtheria, Dyspepsia, E coli Endometriosis Fibromyalgia Herpes zoster, Lumbago, Lyme disease, Morgellons disease, Psoriasis, Retrovirus variants, Ringworm, Streptococcus infection general, Vaginosis, Cryptocotyle lingua, Mycobacterium phlei

215.3-840 Hz: Bartonella henslae, Chlamydia trachomatis, E coli, Mycobacterium tuberculosis

215.4-630 Hz: Lyme, Mycoplasma

215.5-669 Hz: Epstein Barr, Mycoplasma

216.1-652 Hz: Influenza haemophilus, Neisseria gonorrhoea

216.2-693 Hz: Herpes simplex, Legionella, Nocardia asteroides

216.3-710 Hz: Crocus sotillus, Streptococcus hemolytic, Cytochalasin B, Nocardia asteroides

216.4-749 Hz: Histoplasma, Lyme, strongyloides, Nocardia asteroides

216.5-626 Hz: Proteus mirabilis

217.1-675 Hz: Candida tropicalis, Proteus mirabilis

217.2-798 Hz: Lyme, Proteus vulgaris

217.3-651 Hz: Liver flukes, Proteus vulgaris

217.4- 639 Hz: Gulf War Syndrome, Proteus vulgaris

217.5-646 Hz: Crinis humansis

218.1-740 Hz: Lichen planus, Lichen sclerosus , Morgellons disease, Respiratory Syncytial Virus

218.2-642 Hz: Salmonella enteritidis

218.3-712 Hz: Lichen planus, Lichen sclerosus, Morgellons disease

218.4-746 Hz: Fusarium, Influenza haemophilus, Mycogone fungoides, strongyloides, Salmonella typhimurium

218.5-682 Hz: Cytomegalovirus, Herpes, Influenzinum vesica, Rhodococcus, Serratia marcescens

219.1-761 Hz: Mycogone fungoides, Mycoplasma salivarium, Myocarditis narbe, Shigella dysenteriae

219.2-769 Hz: Amoeba, Coxsackie, Herpes, Shigella, Clostridium perfringens, Shigella flexneri

219.3-621 Hz: Phoma_Destructiva, Shigella

219.4-758 Hz: Aspergillus glaucus, Influenza virus, Spaerotilus natans

219.5-738 Hz: Atherosclerosis, Dematium nigrum, Epstein Barr virus, Herpes_zoster_v, Roundworms, Parasites strongyloides, Staphylococcus, Spirillum serpens

220.1-734 Hz: Epicoccum, Staphylococcus aureus

220.2-744 Hz: Epstein Barr, Staphylococcus aureus

220.3-746 Hz: Mycogone fungoides, Streptococcus lactis

220.4-612 Hz: Echo Virus, Enterovirus, Influenzinum vesica, Leptospirosis, Influenza A and B, Streptococcus mitis

220.5-716 Hz: Bartonella henslae, Herpes type 2A, Herpes zoster, Streptococcus pneumonia

221.1-704 Hz: Streptococcus pneumonia

221.2-719 Hz: Nocardia asteroides, Salmonella paratyphi,

221.3-752 Hz: Hepatitis B, Influenza grippe, roundworms, strongyloides, Trichophyton rubrum

221.4-834 Hz: Coxsackie B1

221.5-677 Hz: Treponema pallidum

222.1-737 Hz: Dematium nigrum, Epstein Barr virus, Troglodytella abraxari

222.2-814 Hz: Coxsackie B6, Klebsiella pneumoniae, Troglodytella abraxari

222.3-784 Hz: Epidermophyton floccinum, Staphylococcus aureus, Veillonella dispar

PRACTICAL ISSUES

1. THE ~MC MF~ Method

By Wolf-Dieter Kessler, M.D., Antje Kessler, Karin van Huelsen, ND

The MC (Main Complaint) MF (Main Focus) method is simple. It is most effective. I introduced this method first during the International ONDAMED® Symposium, Marriott Hotel, Brooklyn, New York, October 13, 2006.

Patients, who seek medical help, are usually clearly indicating their main complaint (area).

The therapist is challenged to determine where therapy needs to be applied.

ONDAMED®, and its ~Main Complaint/Main Focus~ method is one key tool that the therapist can use in order to get to the goal of improving tissue function in a patient.

Improved tissue function, as we know, leads to healing.

To understand the link between MC and MF let us look at one typical case:

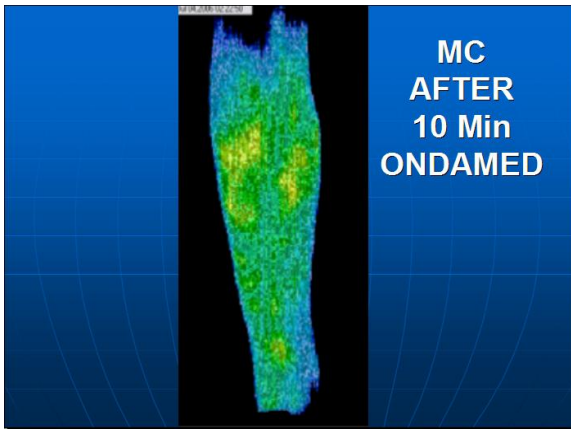
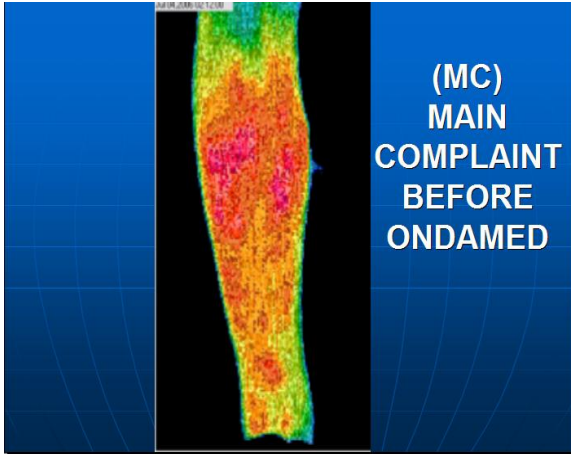
65 year old male with Erysipelas right lower leg (a massive infection-related lymph-edema) - right inguinal lymph nodes palpable.

Proof of dramatic improvement during and after the ONDAMED® therapy documented with 1. Infrared images and 2. SEG:

1. Infrared images (Thermography)

Below

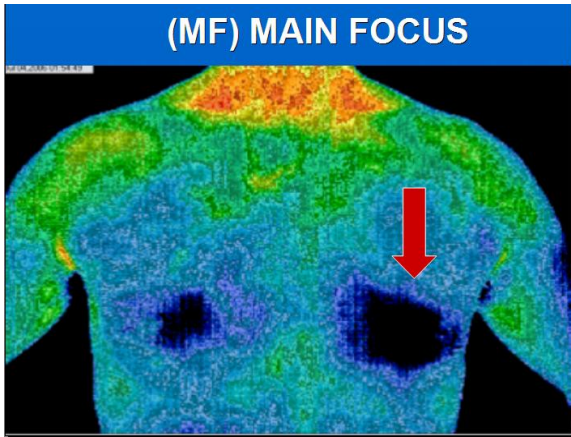
65 year old patient with massive erysipelas right lower leg with edema before and after ONDAMED® treatment



Left lower leg improved. MC=Main Complaint

Below:

In order to stimulate and trigger healing in the right lower leg, the heart area had to be treated. Note: The left thorax (heart area) is much colder than the right side. Regulation there is impaired as demonstrated by the SEG further below. MHS imaging Thermography (Kessler clinic, 2006)



The MHS device
(Micro Health System below)



2. Computerized Segment Electrogram (SEG) before and after therapy.

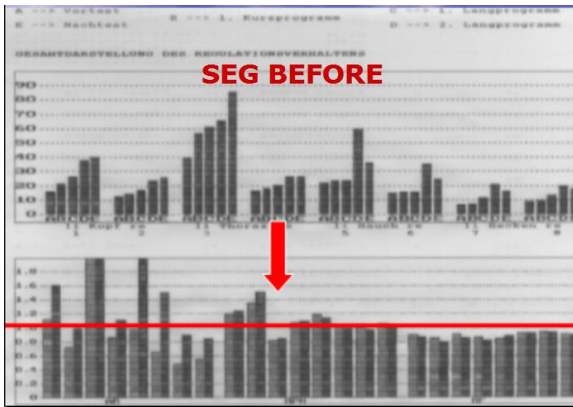
Below:

Computerized Segment Electrogram according to Heim and Schimmel, Institut für Arbeitsmedizin, University of Heidelberg, Germany

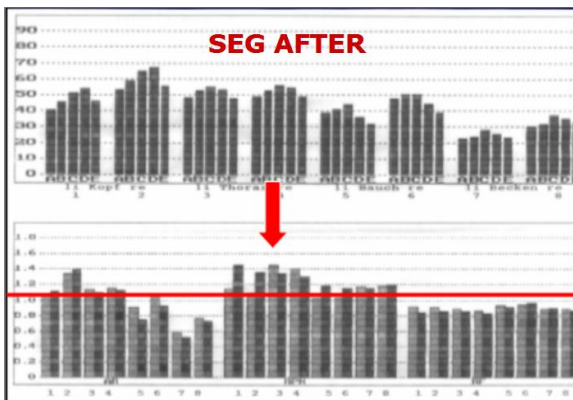
The red line depicts the height of normality of the graphics, which is 1.05 and above. There are three groups of 8 bars each at the bottom of the image. The

red arrow points to the third bar which represents the regulation in the left thorax.

Bar 1 and 2, to the left of the arrow, stand for the left and right hemisphere of the head. Bar 3 and 4 represent the left and right thorax. Bar 5 and 6 stand for the left and right abdomen. Bar 7 and 8 represent the left and right pelvis. Note: the red arrow points to a low in the left thorax. Regulation in the heart sector is impaired. Successful treatment respectively improvement of matrix/cellular regulation should result in an elevation of bar number 3 above the red line. (Kessler, et al, 2006)



Below: Improved regulation in left thorax after ONDAMED®. The third bar is beyond the red line of 1.05



Left thorax improved. MF

Below:

SEG (Computerized Segment Electrograph) Professor Heim, University of Heidelberg, Germany. This method is using the alteration/change of electrical resistance of skin areas in relation to organ dysfunctions. Stimulating quadrants and sections of the body with 13 Hz impulses will produce graphics based on logarithmical mathematical calculation. The quality of electrical response after stimulating the skin area with a low frequency direct current signal is monitored over 30 minutes. Since

skin areas (HEAD zones) correlate with certain organs, the SEG is an invaluable objective control unit to monitor therapeutic results and improvement on a patient.

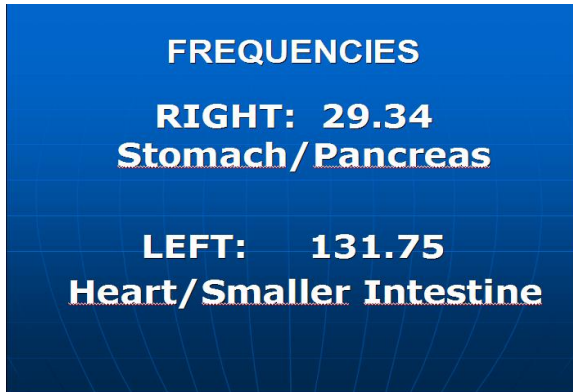


The patient will be connected to six electrodes: forehead, neck, dorsal chest, lumbal area and both thighs. The lower unit operates as a 13 Hz direct current generator which is programmed by the software.



Below:

The patient had to be treated with both frequencies of the stomach/pancreas and heart/smaller intestine. These results suggested a metabolic disorder to be responsible for his blocked healing in his lower right leg. Therapeutic measures had been taken accordingly. (Kessler clinic, 2006)



Subjectively the patient felt astonishingly better the next day.

So what did we do?

- 1. The ~ Main Complaint~ area (the right lower leg) was known.*
- 2. We found the two optimal frequencies – right and left radial pulse – using ONDAMED® and the patient’s pulse reaction.*
- 3. Scanning of the patient’s body with these two frequencies detected several abnormal areas: frontal sinuses, neck, heart, lumbal area, and left kidney including the right lower leg - the Main Complaint area.*
- 4. Then we applied the same two frequencies to the found foci. Beginning ONDAMED® EMP application from head to toe, we also checked, whether the pulse reaction over the main Complaint Area – the right lower leg – would go away. It only went away while we were applying frequencies to the heart area. Consequently, we called the heart area ~ Main Focus~ .*

The Main Focus is the area that would normalize the pulse over the Main Complaint area. Simultaneously, the pulse reaction would cease over the other foci.

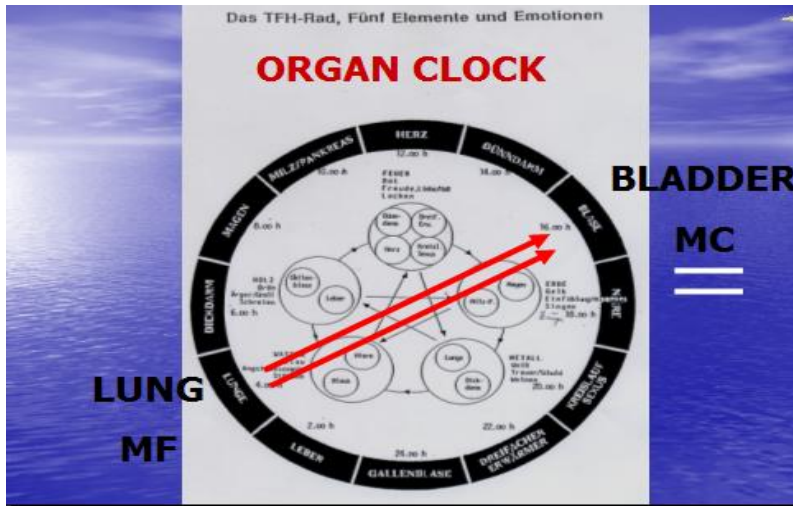
This finding also relates to the Chinese Acupuncture System. It seems to be *crucial to choose a specific point* in order to initiate healing. ONDAMED® and the simple pulse test provide fast and accurate access to the energetic link between the ~Main Complaint/Main Focus~ areas. As documented in a study on 52 cases, instant improvement is felt by the patient using this method.

It is believed that the Main Focus is draining energy from the Main Complaint Area. Often the Main Complaint Area is presenting pain. Pain has been classified as “the cry of the tissue for energy” (R. Voll).

I think, the ~MC MF~ method is one great step toward standardizing complementary medicine in support of healing.

Below:

Treatment of bladder cancer. The MC (Main Complaint) is the bladder area. The practitioner found the MF (Main Focus) over the lungs. This finding is so interesting because it correlates with the Chinese Organ Clock. While the bladder has its maximum energy at 4 p.m. in the afternoon, the lungs have it at 4 a.m. in the morning. The two organs are antipodes or YIN/ YANG partners. The 56 year old male patient had a long history of bronchial disorders.



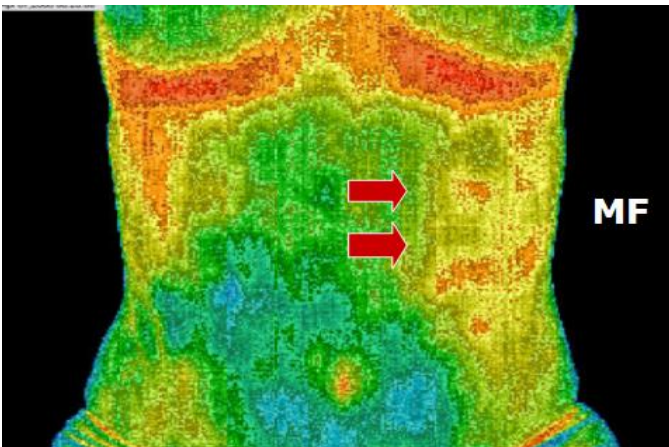
Below:

Treatment of the bladder region with lung frequencies



Below:

34 year old female with idiopathic increase of white blood cells. Leukozytes in the range of 16.000 with 80% lymphocytes. ONDAMED® found the MF (Main Focus) to be treated over the left abdomen. Note: This seems to be the area of the spleen as shown in thermography (Kessler clinic, 2003)

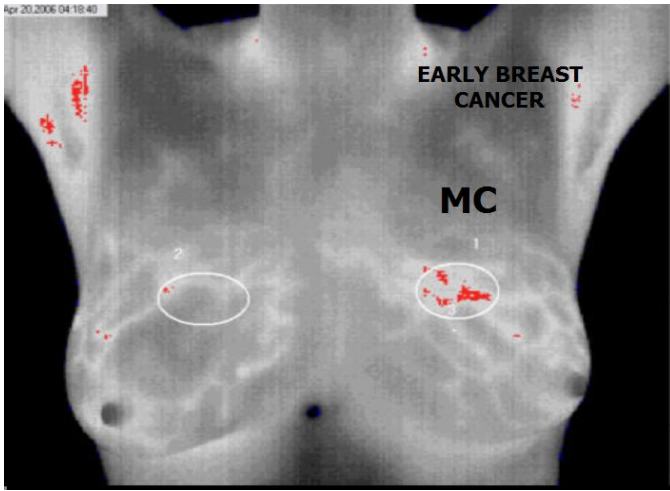


Below:

Early breast cancer left breast of a 37 year old female. Thermography shows suspicious alteration in upper middle area of the left breast. A positive family history of breast cancer exists. The patient complained of pain in that region for about 6 months.

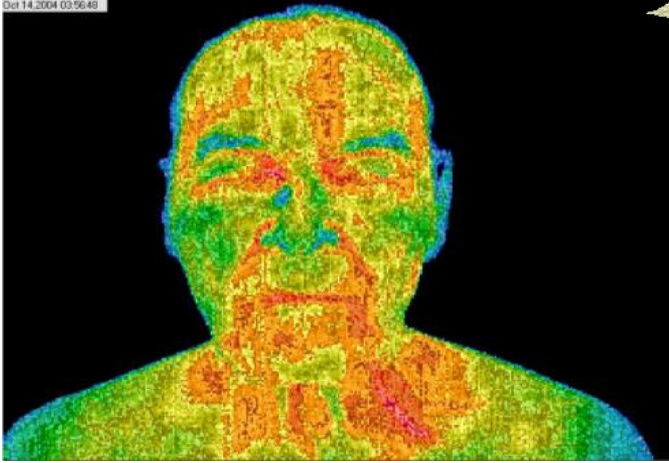
Note further below:

ONDAMED® found the Main Focus in the spleen / pancreas area. Thermography verified an alteration in same area - middle and left abdomen shows excessive heat compared to the right side. The red zone relates with heat excess (Kessler clinic, 2006)



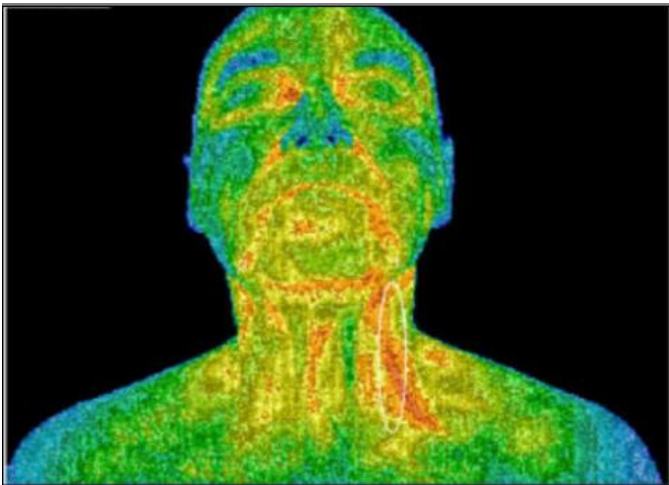
Below:

73 year old male patient with beginning lung cancer. Left sternoclavicular area shows area of increased heat compared to the right side. Image taken before ONDAMED® therapy.



Below:

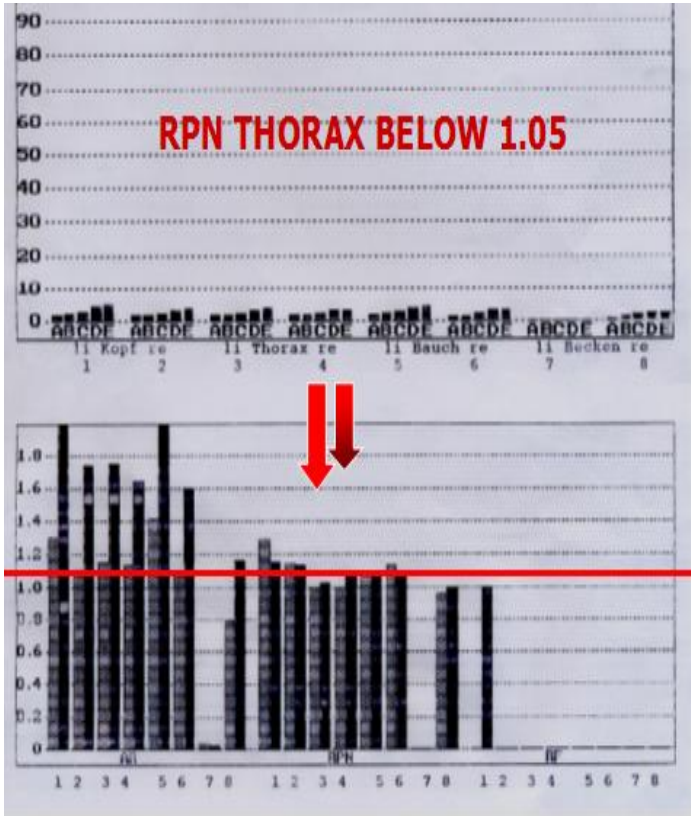
Image taken after therapy. Note: Left sternoclavicular area shows remarkably less heat. ONDAMED® found out, that the left lateral lymph zone of the neck had to be treated (Kessler clinic, 2004)



Below:

SEG before and after ONDAMED® therapy. Note: Graphical bars in left and right thorax below the 1.05 (red line)

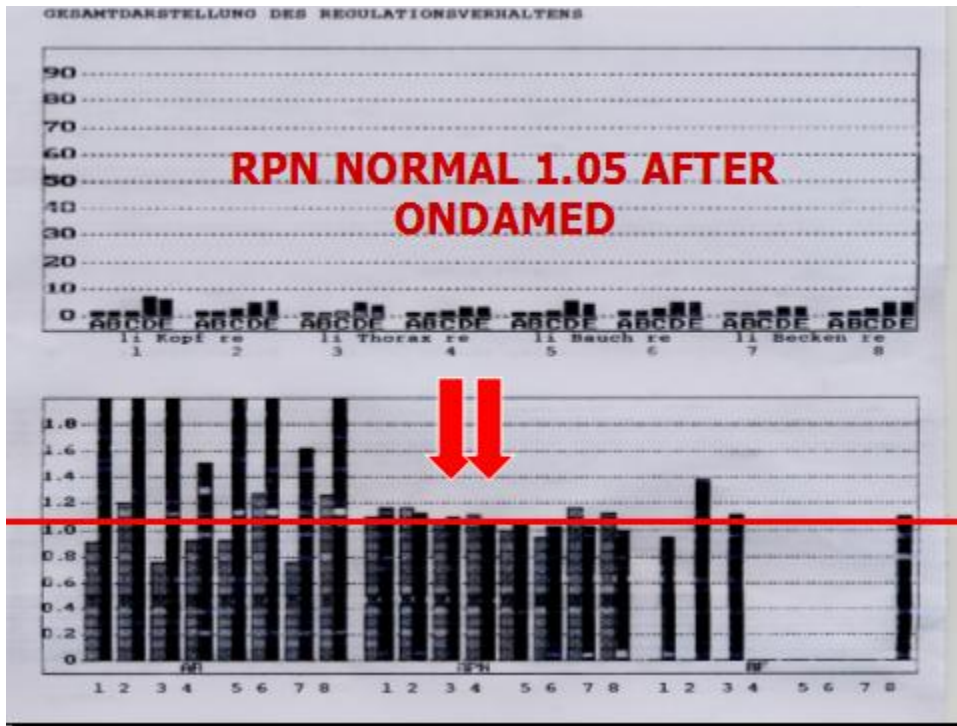
(Kessler et al, 2004)



Below:

After therapy the bars are within normal range at 1.05 (note: red arrows). This clearly documents improved regulation.

(Kessler et al, 2004)



ONDAMED® is more than a dream come true. It is better than anything I have imagined in my most optimistic fantasies.

James Oschman, Ph.D.

[ONDAMED](#)

[2. MC/MF METHOD](#) Step by Step:

Karin van Huelsen, ND



1. To begin with, you follow the procedure of module 1 (specific frequencies) in the Ondamed Operations Manual like below:

- a. Place Neck Applicator (NA) around the patient's neck.
- b. Press Power button.
- c. Press Program button.
- d. P 10 appears in the upper display. If it doesn't press CL button for 3 seconds and scroll Regulator to Program 11.

Press Enter/save button for about 3 seconds on regulator, until you see the two **■** in the upper display.

- e. Gently place thumb tip on right pulse of person's wrist.



Make sure, you and your patient have a comfortable position!

- f. Press the right button.
- g. Turn the regulator clockwise to scroll between 1 Hz and 31,835 Hz.
While you scroll through the frequencies look for changes in the pulse.
When you identify a change, press the Enter/save button on the regulator to store the frequency into memory. The lower display indicates the number of stored frequencies.
- h. Press the right button again to access the stored frequencies. Scroll through the number of selections with the regulator or using the plus (+) and minus (-) button until you identify the frequency with the greatest pulse change. Press the Enter/Save button to select the most specific frequency.
- i. The upper display is blinking, confirming the into memory stored frequency.
Note this main frequency for documentation.
Look on your frequency chart, which organ is related to this frequency.
This indicates a diagnostic hint.
- j. Now you proceed to testing the Left side.
Gently place thumb tip on left pulse of person's wrist.

Press the Left button.

Put your thumb tip gently on the left pulse and repeat steps g – i.

k. Press the INT button. Press the CL button to start testing with the lowest intensity.

Scroll up until you have the first change in the pulse.

Press the Enter/save button to store into memory.

Note intensity for further treatments.

l. You do not have to test the time by using the m/s button, since the pulse will indicate the time needed for treatment.

2. Scanning process:

a. Ask the patient for his main complaint area (MC).

b. The Neck Applicator (NA) remains.

c. Press the star (*) and start button.

d. Use the hand applicator to scan the body from top to toe.

e. Look for changes in the pulse, indicating a tissue dysfunction.

f. Document the found areas.

g. If you found a pulse change in the main complaint area (MC), continue with step 3.

This will take place in about 80 %.

h. If you did not find a pulse change in the main complaint area (MC), continue with

step 4. This will take place in about 20 %.

3. To find the Main Focus (MF) according to 2-g:

a. Press the Star (*) and Start button.

b. Start from top treating the first tissue dysfunction area for about 10 seconds.

c. Check the main complaint area (MC) for pulse normalisation.

d. If the pulse at the main complaint area (MC) does not normalize, go to the next tissue dysfunction area and treat here for about 10 seconds.

e. Check the main complaint area (MC) for pulse normalisation.

f. Continue steps c-d until you find a normalisation in the main complaint area (MC).

Once you find a normalisation, continue treating the main focus (MF) that evokes the pulse normalisation for about one more minute.

g. Now check all the other tissue dysfunction areas for a pulse normalisation as well.

If you have treated the right main focus (MF), they also have to start to normalize.

Continue treating the main focus (MF), until all tissue dysfunction areas are almost normalized.

Continue with step 5.

If not, you do not have the right main focus (MF) yet. In that case, you have to continue with the steps f-g.

h. Note MC/MF for further treatments.

i. **Troubleshooting:** If you have tried to treat each area and none of them would change the

Main Complaint pulse, try to treat the Main Complaint area (MC) itself.

This happens rarely in about 2 %.

4. To find the Main Focus (MF) according to 2-h:

- a. Press the Star (*) and Start button.
- b. Start from top treating the first tissue dysfunction area for about 10 seconds.
- c. Check the main complaint area (MC) for a pulse change/reaction.
- d. If the pulse at the main complaint area (MC) does not change/react, go to the next tissue dysfunction area and treat here for about 10 seconds.
- e. Check the main complaint area (MC) for a pulse change/reaction.
- f. Continue steps c-d until you find a pulse change/reaction in the main complaint area (MC).

Once you find a pulse change, continue treating the main focus (MF) that evokes the pulse change for about one more minute.

- g. Now check all the other tissue dysfunction areas for a pulse normalisation.

If you have treated the the right main focus (MF), they have to start to normalize.

The main complaint area (MC) has to start to normalize now as well.

Continue treating the the main focus (MF), until all tissue dysfunction areas are almost normalized.

By changing the distance of the Hand applicator to the body, you can evoke a pulse reaction

again. This applications allows lower intensity and wider application to the main focus (MF).

Continue with step 5.

If not, you do not have the right main focus (MF) yet. In that case, you have to continue with the steps f-g.

- h. Note MC/MF for further treatments.

i. Troubleshooting: If you have tried to treat each area and none of them would change

the Main Complaint pulse, try to treat the Main Complaint area (MC) itself.

This happens rarely in about 2 %. However, it is so rare, you may want to try again first to treat from top to toe and make sure that neither focus would normalize the pulse over the Main Complaint area.

5. Continue with treating the Main Focus (MF) with module 3 (Mikroorganism):

- a. Press the Program button.
- b. Press the CL (Clear) button until you see P- 10 on the upper display and 0 on the lower display.

- c. Press Enter/save button for about 3 seconds on regulator, until you see the two **■** in the upper display.
- d. Press the star (*) and RS button. You should see 101.1 in the lower display and 754 Hz on the upper display.
- e. The patient still wears the Neck applicator. Take the patients pulse and scroll through the frequencies until you reach 222.3 on the lower display.
While you scroll through the frequencies look for changes in the pulse.
When you identify a change, press the Enter/save button on the regulator to store the frequency into memory.
- f. Press the star (*) and RS button. The lower display indicates the number of stored frequencies.
- g. Scroll through these frequencies with the regulator or using the plus (+) and minus (-) button finding the most significant pulse change.
Press the Enter/Save button on the regulator.
- i. The upper display is blinking, confirming the into memory stored frequency.
Note the number of the stored microorganism found in the lower display for documentation.
Look in your microorganism list, which microorganism is related to this number/frequency.
This indicates another diagnostic hint.
- j. Press the INT button. Press the CL button to start testing with the lowest intensity 1.0.
Scroll up until you have the first change in the pulse.
Press the Enter/save button to store intensity into memory.
Note intensity for further treatments.
- k. Press the M/S button. Press CL button to start testing with the lowest minutes 0.30.
Scroll up until you have the first change in the pulse (usually below 5 minutes!).
Press the Enter/save button to store minutes into memory.
Note time for further treatments.
- l. Press star (*) and start to begin treatment.
- m. Treat the main focus (MF) for about 10 seconds.
Check the pulse reaction at the main complaint area. Treating the main focus (MF) with the microorganism frequency evokes a pulse reaction in the main complaint area (MC) and all the other tissue dysfunction areas found before.
- n. Continue treating the main focus (MF) until pulse reaction in all areas normalizes.
This should be successful within the tested time.
By changing the distance of the Hand applicator to the body, you can evoke a pulse reaction again. This applications allows lower intensity and wider application to the main focus (MF).

6. Complete diagnostic with Module 2 (Preset Programs):

- a. Press Program button.
- b. P-10 appears in the upper display. If it does not, press CL button for 3 seconds until you see P-10 in the upper display and 0 in the lower display.
- c. The patient still wears the Neck applicator. Take the patients pulse and scroll through the programs from 12 to 173 or 174 (depending on your ONDAMED Version).
- d. While you scroll through the programs look for changes in the pulse.
When you identify a change, press the Enter/save button on the regulator to store the program into memory. The lower display indicates the number of stored programs.
- e. When all programs have been tested, access all stored programs by pressing the Program button again.
- f. Scroll through the stored programs with the regulator or using the plus (+) and minus (-) button until you identify the program with the most significant pulse change.
Note the program number from the upper display for further treatments and documentation.
Press the Enter/Save button to select the most specific program.
- g. Look into your program list to find the indication.
- h. Do not treat with this program in the first session. This program will be needed for later sessions.

7. Diagnostic Information:

Once you have completed the first session step 1 to 6, you have received a number of diagnostic information.

- a. Right frequency related to a certain organ.
- b. Left frequency related to a certain organ.
- c. Main Complaint (MC) relation to the Main Focus (MF).
- d. Mikroorganism.
- e. Program Indication.
- f. Opportunity to integrate according your achievement above other methods or medications.

8. Further Treatments:

First Treatment: Steps 1 to 6.

Second till fifth Treatment: with same specific frequencies found in the first session.

with same mikroorganism found in the first session.

eventually same specific program found in the first session.

6. Treatment: Redo steps 1 to 6 to check diagnostic for changes.

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3. TREATMENT WITH POTENTIATED FREQUENCIES - FOR THE ADVANCED THERAPIST.

Below from left: Sean Sebastian Kessler (my grandson), Karin van Huelsen, N.D.



Why does my patient not respond to the treatment?

Does this happen to you too? You did everything that you are supposed to do, but the patient does not feel better.

If you relate, you should read on because you will receive an answer.

This problem has been an issue for well-known therapists for decades whether they were classic homeopaths or inventors of EAV (aka Electro Dermal Screening) method or Bioresonance. Although we use all our knowledge in the field of both homeopathy and electro dermal screening for diagnosis and treatment, the diseased tissue often does not respond satisfactorily.

You start questioning the method itself.

Did I find the right homeopathic substance?

Is it the right potency?

Did I test correctly?

Whoever has studied homeopathy or EAV/Electro Dermal Screening will sooner or later proceed to the study of Homotoxicology according to Heinrich Reckeweg, MD (1877-1944).

Based on Hahnemann's principal of the similarity, Dr. Reckeweg developed the first homeopathic complex agents.

He also had the idea to produce a potentiated homeopathic accord which means, the use of a combination of different potencies of the same substance.

The aim is to get a better response of the diseased tissue based on the medication and proper frequency.

The idea to use a potentiated homeopathic accord, or in our case a frequency accord, could also be adopted by the ONDAMED® System.

Therefore, we only have to broaden the tested frequency to its octaves. For example, when I have tested a right frequency of 209.14 Hz, I will use the frequencies according to the octaves.

In our example this would be the frequencies of 0.81 Hz; 3.36 Hz; 13.07 Hz; 52.28 Hz; 209.14 (tested Main Frequency), 836.56 Hz; 3346.2 Hz; 13,385 Hz.

The reason to begin with C-4 or C-5 is simply technical because there are only 8 lines available for programming. So we cannot use all the octaves. Seemingly, this is also not necessary. It is more important to reach both the lower and higher frequencies for treatment. This also explains why we have to skip one octave in-between. Therefore the beginning starts within approximately 1 Hz.

This will give us a wider frequency spectrum without losing specificity.

Don't worry – you can do it too!

Just follow the technical pathway below.

To begin with, you follow basically the procedure of module 1 (specific frequencies) in the ONDAMED® Operations Manual as listed below.

- a. Place Neck Applicator (NA) around the patient's neck.
- b. Press Power button.
- c. Press Program button.
- d. P 10 appears in the upper display. If it doesn't appear, press CL button and scroll regulator to: Program 11.
Press Enter/save button for about 3 seconds on regulator.
- e. Gently place thumb tip on right pulse of person's wrist.
- f. Press the right button.
- g. Turn the regulator clockwise to scroll between 1 Hz and 31,835 Hz.
While you scroll through the frequencies look for changes in the pulse.
When you identify a change, press the Enter/save button on the regulator to store the frequency into memory. The lower display indicates the number of stored frequencies.
- h. Press the right button again to access the stored frequencies. Scroll through the number of selections until you identify the frequency with the greatest pulse change. Press the Enter/Save button to select the most specific frequency.
- i. The upper display is blinking, confirming the into memory stored frequency.
Note this main frequency for later frequency accord programming.
- j. Now you proceed to testing the Left side. Press the Left button.
Put your thumb tip gently on the left pulse and repeat steps g – i.
- k. Decide between the main right and main left frequency by shifting using the Right or Left button.
Note this main frequency for later frequency accord programming.
- l. Press the INT button. Press the CL button to start testing with the lowest intensity.
Scroll up until you have the first change in the pulse.
Press the Enter/save button to store into memory.
Note this intensity for later frequency accord programming.

m. Press the M/S button. Press the CL button to start testing with the minimum time.
Scroll up until you have the first change in the pulse.
Press the Enter/save button to store into memory.
It is not recommended to use a time above 4 minutes.
Note this time for later frequency accord programming.
Now we can start programming the frequency accord by using the following example:
Found right frequency: 209.14 Hz (main frequency)
Found left frequency: 1,149.4 Hz
Tested intensity: 2.3
Tested time: 3 minutes

- a. Press the Program button and load Program 11. Press Enter/save for 3 seconds.
- b. Press the RS button. The light will go out.
- c. Look into your frequency chart to find the right frequency of 209.14 Hz.
Move with your finger on the chart deeper within the octaves until you reach C-4 or C-5. In our example we will reach the frequency of 0.81 Hz(C-5).
This will be our first frequency for the frequency accord.
- d. Press the Right button and scroll down to 0.81 Hz. Press Enter/save.
- e. Press the Right button and the Plus (+) button. In the lower display you will see the number 2.
- f. Press the Right button, then the Star (*) button and Plus (+) Plus (+).
This is how you could bypass one octave.
Make sure, the next frequency will be displayed according to the octave on your frequency chart.
In our case 3, 26 Hz.
Press the Enter/save button.
If you haven't reached the right frequency, press the Star (*) button and scroll to the correct frequency and press the Enter/save button.
- g. Press the Right button followed by the Plus (+) button. In the lower display you will see the number 3.
- h. Repeat the steps f and e until you programmed all eight frequencies.
The programmed frequencies are:
0.81 Hz; 3.26 Hz; 13.07 Hz; 52.28 Hz; 209.14 Hz (Main Frequency); 836.56 Hz;
3,346.2 Hz; 13,285 Hz.
- i. Look into your frequency chart to locate the left frequency 1,149.4 Hz.
Move with your finger on the chart deeper within the octaves until you reach C-4 or C-5. In our example, we will reach the frequency of 1, 12 Hz (C-4).
- j. Press the Left button twice. Press the Minus (-) button as often until you see the number 1 in the lower display.
- k. Press the Left button and scroll to 1.12 Hz. Press the Enter/save button.
- l. Repeat the steps e – h.
The programmed frequencies are:
1.12 Hz; 4.48 Hz; 17.95 Hz; 71.83 Hz; 287.35 Hz; 1,149.4 Hz (Main Frequency);
4,597.6 Hz; 18,390 Hz.
- m. Press the INT button twice. Press the Minus (-) button as often until you see the number 1 in the lower display.
- n. Press the INT button and scroll to the tested intensity of 2.3. Press the Enter/save button.
- o. Press the M/S button and scroll to the tested time of 3 minutes. Press the Enter/save button.
- p. Press the Plus (+) button to get into the next line. In the lower display you will see the

number 2.

q. Repeat the steps n – p until you have programmed all 8 lines.

Beginning therapy:

In our example the main frequency of 209.14 Hz relates to the organs lung and colon.

According to our patient's record, we find a long history of lung infections.

Therefore we place the matrix applicator on the upper dorsal thorax.

This means, the main frequency will show you where to put the matrix applicator.

In our patient's record we also find heart disease. To treat the lung with consideration of the heart, always place the applicator on the upper thorax in the back.

Start the program by pressing the Start button only.

According to our program the time should be 24 minutes.

Take the hand applicator and place your thumb on the patient's pulse and scan the body from top to toe.

The main pulse change will show you the spot where to treat with the hand applicator.

For the rest of the time the patient or the assistant can use the hand applicator as shown.

It is not necessary to take the pulse within the rest of the treatment, because the issue is to apply the different octaves step by step for treatment.

At this time, I want to add to our example, that the hand applicator was placed on the left frontal thorax. The patient's record showed a history of tachycardia and high blood pressure.

Therapy result:

In our case, the patient reacted during treatment in the right knee area.

In his history we found an ACL rupture and tibia fracture on the right side. He still has numerous swellings and limited movements.

After one (1) ONDAMED® therapy, the knee could be bent much easier. The patient's pain disappeared.

Resume:

Follow the technical information above step by step and it will be also easy for you to get a wider therapy spectrum which is still specific. Your patient will benefit from it.

4. ONDAMED

Stop Smoking Program

Step by Step

Karin van Huelsen, N.D.

This protocol may be applied daily until the individual's urge to smoke will fade.

Make sure, that the patient does not smoke that day!

Otherwise you have to start all over again.

Step 1:

Press the Program Button.

Press CL Button for about 3 seconds until you see 0 in the lower display.

Scroll with the regulator to Program # 16.

Press the Enter/Save Button on your regulator for about 3 seconds.

Place Neckapplicator on neck

Place Matrixapplicator on Solar Plexus

Place the Handapplicator in front of a liter bottle of water.

Press the Start button.

Step2:

Press the Program Button.

Press CL Button for about 3 seconds until you see 0 in the lower display.

Scroll with the regulator to Program # 47.

Press the Enter/Save Button on your regulator for about 3 seconds.

Place Neckapplicator on left foot so that forceps grips top/bottom of foot

Place Matrixapplicator on tip of breastbone

Place the Handapplicator in front of the same liter bottle of water

Press the Start button

Step3:

Press the Program Button.

Press CL Button for about 3 seconds until you see 0 in the lower display.

Scroll with the regulator to Program # 94.

Press the Enter/Save Button on your regulator for about 3 seconds.

Place and hold Neckapplicator on right and left temples

Place Matrixapplicator on spleen

Place the Handapplicator in front of the same liter bottle of water

Press the Start button

Step 4:

Press the Program Button.

Press CL Button for about 3 seconds until you see 0 in the lower display.

Scroll with the regulator to Program # 47.

Press the Enter/Save Button on your regulator for about 3 seconds.

Place Neckapplicator facing forward on throat

Use the Handapplicator to move slowly up and down the spine in the shape of horizontal figure 8

Place Matrixapplicator underneath the same liter bottle of water

Press the Start button

Step 5:

Press the Program Button.

Press CL Button for about 3 seconds until you see 0 in the lower display.

Scroll with the regulator to Program # 72.

Press the Enter/Save Button on your regulator for about 3 seconds.

Place Neckapplicator on neck

Place Matrixapplicator over the arches of both feet

Place the Handapplicator in front of the same liter bottle of water

Press the Start button

Step 6:

Press the Program Button.

Press CL Button for about 3 seconds until you see 0 in the lower display.

Scroll with the regulator to Program # 117.

Press the Enter/Save Button on your regulator for about 3 seconds.

Place Neckapplicator facing toward the throat

Use the Handapplicator to move right and left side of lungs

Place Matrixapplicator underneath the same liter bottle of water

Press the Start button

Step 7:

Press the Program Button.

Press CL Button for about 3 seconds until you see 0 in the lower display.

Scroll with the regulator to Program # 11.

Press the Enter/Save Button on your regulator for about 3 seconds until you see two -- in the upper display.

Press the Right Button. You will see 1.00 in the upper display.

Scroll with the regulator to **2.37**

Press the Enter/Save Button on the regulator. You will see 1 on the lower display.

Press the Left Button. You will see 1.00 in the upper display.

Scroll with the regulator to **128**

Press the Enter/save Button on the regulator. You will see 1 on the lower display.

Press the INT Button. You will see 3.5 in the lower display.

Scroll with the regulator to **5.3**

Press the Enter/Save Button on the regulator. You will see 1 on the lower display.

Press the M/S Button. You will see 5.00 on the lower display.

Scroll against the clock with the regulator to **4.20**.

Press the Enter/Save Button on the regulator. You will see 1 on the lower display.

Press the Start Button.

Place the Handapplicator in front of the same liter bottle of water.

The patient is not connected to the ONDAMED SYSTEM.

5. NUTRIENT POINT THERAPY STEP BY STEP

Karin van Huelsen, ND

- a. Place Neck Applicator around patient's neck
- b. Press Program button.
- c. Make sure, that there is a 0 in the lower display. If not, press the CL button until you will see 0 in the lower display.
- d. Scroll to Program 83.
- e. Press Enter/Save button. The number 1 will appear in the lower display.
- f. Scroll to Program 96.
- g. Press Enter/Save button. The number 2 will appear in the lower display.
- h. Scroll to Program 115.
- i. Press Enter/Save button. The number 3 will appear in the lower display.
- j. Scroll to Program 142.
- k. Press Enter/Save button. The number 4 will appear in the lower display.
- l. Scroll to Program 151.
- m. Press Enter/Save button. The number 5 will appear in the lower display.
- n. Gently place thumb tip on patient's wrist.
- o. Press Program button again. You will see LP 151 in the upper display and the number 5 in the lower display.
- p. Dial with the regulator or by using the minus (-) and plus (+) button between the stored programs and look for the most significant pulse reaction.
In our following example LP 96 in the upper display and 2 in the lower display.
- q. Press the Enter/Save button on the regulator to load the program.
In our example you will see 76.10 in the upper display and 8 in the lower display.
- r. Dial with the regulator or by using the minus (-) and plus (+) button between the subcategories 1-8 and determine the most significant pulse reaction.
- s. Press the Enter/Save button on the regulator to select the subcategory.
In our example subcategory 2.
- t. Refer to your ONDAMED Operations Manual, Page 59-61 for information on the nutrient point and application for treatment.
In our example 96.2 = Vitamin C NA: neck, HA: point below left clavicle.
- u. Press Star (*) and Start button.
In our example the program now runs for 5.20 minutes.

PRESENTATIONS

ONDAMED®
FIRST INTERNATIONAL SYMPOSIUM
MARIOTT HOTEL, BROOKLYN, NEW YORK
OCTOBER 12-14, 2006

Part 1

Wolf-Dieter Kessler, M.D.

What we are accustomed to calling "alternative" medicine is not simply something different or less than traditional allopathic medicine. Instead, the various methodologies and techniques that are termed "alternative" represent a "globalization" of medicine, representing our awareness of medical ideas from other cultures and traditions. Thus, alternative medicine is actually globalized medicine.

~Dr. Mehmet Oz

When I examine myself and my methods of thought, I come to the conclusion that the gift of fantasy has meant more to me than my talent for absorbing positive knowledge.

~ Albert Einstein

Conventional medicine is mainly aiming at objective data. Objective data mostly comprises morphological alterations of cells, tissues and organs.

Using these morphologically oriented diagnostic tools, we identify chronic diseases in their final stage. Hence, many of our chronic diseases have advanced so far in the organism that clinical medicine is only capable to offer palliative relief. Healing, however, will be a rare success (G. Heim).

It is apparent that although we use state of the art clinical diagnostics, there is a poor outcome in detecting early stages of chronic diseases. It has been a lifetime work of Professor Günter Heim from the University of Heidelberg, to present an innovative early detection diagnostic procedure for preventative medicine.

Evidently, such procedures must originate from functional diagnostic methods. In other words, modern preventative diagnostics must check the capabilities of the organism to regulate.

Any function of our cells is called regulation since it comprises the control of incoming and outgoing foods, toxins, oxygen, carbon dioxide and maintenance of cell structures.

Today, we know that all living organisms are open systems that respond by regulation to external interference. This is the only way to maintain a stable dynamic equilibrium. Healthy cells are flexible. They regulate fast and appropriate according to the stimulus. Diseased systems are rigid and non-flexible. They react either slowly (anergic) or exaggerated (hyperergic).

Chronic diseases do not pop up overnight. They take a long incubation period to unfold. During that phase you seldom see the manifestations of the later clinical symptoms. On the contrary, there would be both unclear and unspecific complaints. Alas, in most cases the beginning disease is only manifesting itself in stress situations. Therefore, we need the stress test to detect regulation-deficiencies of the organism.

The Segment Electrogram (SEG) discovers chronic regulative deficiencies of the main skin zones of the body. Skin zones are correlating with inner organs by nerve reflexes.

Over 34 years of focusing on chronic diseases has taught me clearly that disease is an impairment of the body to regulate. Consequently, it can be documented by modern testing devices for example, the SEG. Above all we can prove the quality of our therapeutic success right after the therapy.

It is interesting that the focus responsible for the disease could be far away from the complaint area. We have demonstrated in 52 cases that the finding and treatment of the main focus is essentially necessary to improve regulation.

In the past there was no documented method to identify a focus as the main responsible focus. Further, we did not know how to treat it adequately.

Using the ONDAMED® and the method presented today, you can identify the main focus fast and accurately. The subsequent therapy produces excellent results to improve regulation. Simultaneously, the patient will articulate spontaneous relief. Positive results can be objectively documented during and after the therapy both by Thermography and Segment-Electrogram.

Monitoring of 52 patients has shown that successful ONDAMED® therapy can be achieved, if the MAIN FOCUS (MF) is treated. Just that, fast and accurate identification of the MAIN FOCUS in each patient has been formerly impossible for me without the ONDAMED®.

Additionally the MAIN FOCUS must be treated by the hand applicator and not by the Matrix Applicator. Initially I was astonished by this fact. However, the ONDAMED® had been designed as an induction therapy. Considering that fact, it becomes clear that we need to focus, 'pin point', on a certain area to treat successfully. The following power point presentation helps to understand these facts.

(PowerPoint slides to be included shortly in this e-Book)

RESUME

ONDAMED® is a bio-feedback device currently at the fore-front of medical research world-wide. In practically ALL of this research work, ONDAMED® has produced absolutely stunning and consistent results most especially in conditions where conventional medicine has plainly met its limit.

It is based on the concept of Energy Medicine which recognises that living organisms are actually energy systems, the state of health of which is determined by the condition and flow of the contained energy.

Acupuncture and even such simple diagnostic events as are recorded in EEG (brain) and ECG (heart) tracings are based on this concept. ONDAMED® however, for the first time in the history of medical practice, now applies this concept in an exact and objective manner in order to obtain explainable and reproducible results.

Every organ in the body in its healthy state emits certain waves of a definite frequency 'known' to the ONDAMED® device. A treatment session, which typically lasts about 30 minutes, involves scanning the entire body over with a hand-held applicator while feeling the pulse.

A definite reaction (a spike) in the pulse (which constitutes the bio-feedback response) is easily felt when the scanner sweeps over any unhealthy areas of abnormal wave frequencies.

Such areas can then be subsequently focused upon and 'bathed' so to speak, with the right and therefore therapeutic frequencies in order to restore the unhealthy organs in these regions to normalcy.

Having been thus restored, the organs spontaneously recover their powers of self repair with the process of healing now able to progress normally. It has been found to work even in animals!

In this way, ONDAMED® works by making it possible for the body itself to indicate at the time, what it needs in order to be restored to its natural state of radiant good health. What this means, in effect, is that you really need not know what the issue is with you! And, indeed, who cares about all the medical terms? Simply get scanned by ONDAMED® and have it deliver to your body the required therapeutic frequencies.....and you can just start feeling better again. No more, no less! It is a truly amazing time that we live in!!!

The dynamism and uniqueness of every human being and animal is what is in question here. No longer need anyone be categorized, boxed up and branded with a diagnostic label then treated strictly as such everytime he walks through the door. ONDAMED® compels the practitioner to meet each individual for who they are right now, right here.

ONDAMED® will yield for you results, in your field of work that you never thought possible.

The ONDAMED® practitioner does not send the patient home with pharmaceuticals, remedies and recipes, he helps them back to health right there and then with unprecedented immediacy.

Anything from 1 to 20 sessions of treatment may be required depending on the state of the body concerned, but the process of self repair is jump-started right from the beginning in every case.

The process is a completely non-invasive one from start to finish. Even the removal of clothing is not required. Waves of known frequencies are the healing elements employed by the device, hence the 'ONDA' (meaning wave in latin) forming its part name.

The general experience has been that with the commencement of ONDAMED® treatment sessions, users get rapidly weaned off on-going drug treatments with the latter being finally jettisoned completely. With the rapid onset of recovery and a feeling of well-being users are often heard to say 'I forgot to take my drugs'!

Alongside the healing that always unfailingly results from the use of ONDAMED®, a psychological shift that permits a change in attitude of the user simultaneously occurs, letting in restoration to health.

In brief therefore, ONDAMED® does not cure. Rather it restores the body's ability to heal itself, based on the incontrovertible truth that radiant good health is the natural state and birthright of every human being.

ONDAMED® has a short learning curve for anyone who wishes to use it. It comes with a Training CD which clearly and very simply demonstrates and instructs on how it is to be used. You may therefore commence its usage immediately if you so wish.

ONDAMED® is the medical response of the 21st century that our life functions are primarily controlled by physics.

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