

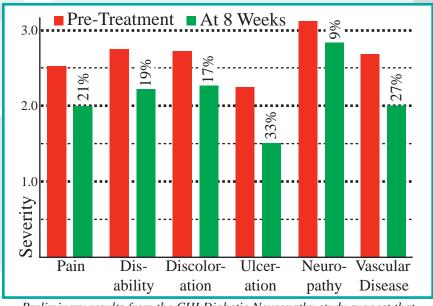
DIABETIC NEUROPATHY

6.2% of Americans have diabetes and half of them, or 8.5 million
Americans, suffer from some form of neuropathy, according to the American
Diabetes Association. Not only is this the fifth deadliest disease, contributing to the 210,000 American deaths annually, but also the cost of health care and lost productivity due to diabetes is 98 billion dollars annually.

The peripheral complications associated with diabetic neuropathy like pain, disability, vascular disease, and nerve degeneration are considered progressive and irreversible. The prognosis is generally progression of the disease, ongoing pain, amputation of digits or limbs, and increased disability. Improvement is considered unlikely.

Thus, it is astounding that our group of 20 study participants, each with advanced diabetic neuropathy symptoms are showing improvement in every measure of this study. While these findings are far from conclusive, they are promising, and we are looking forward to the 6 month and 12 month follow up reports.

- Richard



Preliminary results from the CHI Diabetic Neuropathy study suggest that Infratonic Therapy may not only arrest, but even reverse some complications of diabetes. The next report will be available six months into the study.

CHI Neuropathy Study

The CHI diabetic neuropathy study was based on several anecdotal reports of people who

ty reported improvement attributed to regular are

"Diabetic neuropathy involves nerve degeneration such that patients can experience pain or, more commonly, lose sensation in their legs and feet, making it very difficult to walk. Neuropathy is closely associated with vascular disease - inhibited peripheral blood circulation - which frequently causes ulceration - skin sores that don't heal."

Infratonic therapy. We solicited 20 Diabetic patients from doctors on our mailing list, and entered them into the study based on both the existence of substantial symptoms and the completion of an examination and report from their doctor.

Results: With 17 out of 20 doctors responding, 76% of patients showed significant improvement after 8 weeks. And just 1 patient (6%) got worse. In this case the doctor reported that the patient was unchanged in "pain", "disability" and "ulceration", improved in "discoloration" but got worse in "neuropathy" and "vascular disease." Interestingly, this one patient whose doctor reported a worsening of condition provided a very enthusiastic report:

Ulceration: "My ulcer is on the mend after about a month."

Pain: "Pain in feet is lessened. My feet were super sensitive before therapy. Now I can rub them and it feels good."

Continued on page 2

Disability: "I can walk (as best I can) better, with no pain in feet."

The assessment from patients was much more enthusiastic than that of the doctors. Of particular note from the written patient feedback is that it helped many participants with mood.

Here are some of their comments:

"More optimism"

"Less Depression"

"Better mood"

"Gave me hope"

"Improved relaxation"

"No more mood swings"

"Mood improved dramatically"

Mental attitude not only has an effect on the rate of healing, but it also strongly colors the quality of one's life. An optimistic mood, to a large extent, is what makes life worth living.

Only one patient reported a negative response to the therapy. He reported "Discoloration has worsened. No other changes." The examining doctor however, reported a dramatic improvement after the two months:

Pain decreased from a 1 to a zero. Discoloration is unchanged.

The severity of vascular disease decreased from a 2 to a zero. Despite the patient's negative assessment, this is a very positive response.

Non-Reporting Cases

Doctors did not submit two month follow-up questionnaires on three participants. For a complete picture of the study, we must look at those who did not respond, to see if they will reveal some unknown factors.

The first of these three participants moved away and unfortunately, we are unable to contact him.

The second is a patient whose doctor sent a letter stating that all improvement was due to a compression boot which he prescribed for porary prosthetic was fitted at about 4 weeks. It is not normal for this to be done so soon. I had **NO** pain in my stump. I still to this day have no pain. Just a nice firm stump. Healing was far ahead of normal progress. People, friends, therapist, and prosthetist were amazed on how rapidly I was able to walk unassisted. Within one month I walked on my own and completed

all of the therapy.
'Awesome',
'Amazing', and
'Excellent', are
some of the
comments from
professional staff."

The Smallest and the Greatest Improvements

The smallest reported improvement was in neuropathy. While two months is still early in the study it is valuable to speculate at the

possible reasons for the lower improvement. CHI has received many reports of restored neural functioning over the years, but most of these have come from stroke and head injury patients. A typical protocol for these people is to first treat the brainstem or area of injury, then to treat the extremities like palms of hands and soles of feet. Since the treatment protocol in this study does not include treating the brainstem, we will be adding a ten minute treatment of the brainstem at the beginning of each treatment session (please see page 4).

The other factor in the low response of neuropathy to therapy is

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Call today for your complementary

copy of this fascinating 80 page book with Chapters on Orthopedics, Hospital Recovery, Cognitive Processing, and Anti-aging (reg. \$4.95 - but mention this newsletter and get one copy free).



"Just ten minutes per day reduces stress, improves sleep, elevates mood, and reduces pain. Keep your body vibrant, joyful, and eager for life."

CHI Institute

her. He refuses to provide us with any further data. The patient reports that her ulcer healed and she experiences less pain.

The third is a patient who entered

The third is a patient who entered the study with a very serious ulceration on the heel of one foot, which, after not showing adequate improvement after three weeks, was amputated. It is clear in this case that the surgery, and not the Infratonic therapy, eliminated the ulceration. The patient continued using the Infratonic and reported an extraordinary recovery as follows:

"The stump healed beyond the doctor's expectation. All stitches were out in three weeks. A tem-

that, when blood sugar goes out of control, nerve and other cells are damaged. Nerves are among the slowest structures in the body to heal. It currently appears that Infratonic therapy may have arrested the progression of nerve degeneration and brought about a slight reversal. Time will tell if we see additional improvement at the 6 month and 12 month milestones. Perhaps a most important question here is whether Infratonic Therapy stops the "inevitable" progression of neuropathy in the longer term.

The high reported rate of healing of ulcers (33%) may come because the skin is among the fastest of body tissues to heal. Since ulcers are a huge problem both in diabetic patients and hospitalized patients, it appears that Infratonic therapy may be most effectively applied for bed sores and other ulcers, particularly in the early stages of formation. It would be valuable to determine whether improved circulation or some other phenomenon is the mechanism behind this accelerated recovery of ulcers.

This report comes at the Two Month Milestone of a 12 month study, and our tentative conclusion

Infrasound 8TM

For doctors using the Infrasound 8 in diabetic and orthopedic applications, we have prepared a new perspective on how the different signals are best utilized to accelerate recovery and relieve pain.

- 1. Structural: Cell Damage to accelerate the recovery of bone, tendon, and muscle cells which get damaged from fractures, tears, and overwork, this is the most effective signal.
- 2. Biochemical: Abnormal Cellular Response when cells are shocked by external stimuli and become conditioned to function abnormally, usually with inappropriate inflammation or effusion, or with excess or deficient production of biochemicals, the cell has become operatively conditioned by the trauma. The second signal reduces this abnormal conditioning and restores normal cellular functioning.



3. Psychosomatic: Healing inhibited by stress - where nervous stress or worry cause abnormal activity of the cells, and either impede healing or create chronic health problems in the physical body, the third signal is most effective at creating mental/emotional sense of well being, which frees the cells to pursue normal healing.

is that, from the perspective of the reporting doctors, about three quarters of the participants have improved in what is generally viewed by the medical profession as a gradually progressing degenerative disease. The doctors of these study participants will be reporting again at the six month milestone when we will update you again.

The medical costs related to diabetes for the individual and the

insurance company are huge. The overall cost of health care and lost productivity due to diabetes each year, is estimated at 98 billion dollars per year. If current trends of this study continue, it appears that Infratonic therapy may halt the progression of complications of diabetes in the legs and feet, and in some cases reverse some of the damage. This would mean huge economic savings to individuals and insurance companies. More importantly, it can give HOPE to those afflicted, and enhance their quality of life.

Insurance Reimbursement Tips:

Infratonic Therapy often offers substantial savings to Insurance Carriers. As an example, avoiding just one toe amputation surgery will pay for an Infratonic many times over. In many cases, a doctor's letter of medical necessity is sufficient to allow the Insurance company to see the benefit.

Where an insurance company remains unconvinced of the value of a medical device, a eight or twelve-week follow-up report from the doctor showing the actual benefits realized by the patient often provides the needed evidence because actual improvement is far more significant than predicted benefit.

For more information on insurance reimbursement, please call us at 1-800-743-5608.



Or email this address to them: www.chi.us/f2.html

Revised Protocol

The early results of the CHI Neuropathy Study suggest that symptoms of diabetic neuropathy may not be irreversible. This 12 month study is only two months old and already we are seeing promising results.

Signal 2

mind

body

Signal 2

mind

4

This revised protocol adds two treatment points. First it includes 10 minutes on the brainstem to induce alpha activity throughout the nervous system which promotes deep relaxation in all parts of the body, for improved circulation and nerve conductance. Second, it includes a Cognitive Processing point, the sacrum, to help resolve deeply seated fears which can inhibit resolution of lower extremity problems.

For more information on Cognitive Processing™, call today for your complementary copy of the new book Infratonic Therapy.

Basics of the Neuropathy Treatment Protocol

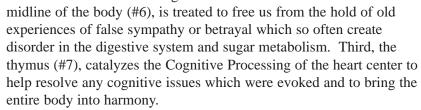
The expanded neuropathy protocol is presented here for clarity in two 30 minute parts each involving treatment of three points for 10 minutes each, followed by sweeping.

Part 1 facilitates the nervous system and promotes circulation. The brainstem is treated by placing the transducer at the occiput (#1) as shown, to facilitate alpha activity throughout the nervous system and to promote deep relaxation throughout the body. Then the bottoms of the feet (#2-3) are treated to increase blood circulation and facilitate renewed alpha activity in the nerves affected by neuropathy.

Part 1 is completed with one minute of sweeping (#4), passing the transducer about an inch from the front of the body, to promote alpha activity along the nerve and blood pathways to the feet.

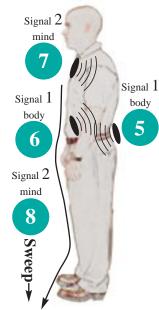
Part 2 is a Cognitive Processing™ protocol

designed to dredge old traumatic experiences and cognitive sludge from key areas in the body to promote optimism and accelerated healing. First, the sacrum, just below the lumbar vertebra (#5), is treated to improve blood flow and nerve transmission through the trunk and to evoke hidden fears and unconscious familial patterning which frequently "keep us from walking forward" in life. Second, the pancreas, at the base of the ribcage 3 to 4 inches to the left of the front



Part 2 is completed with one minute of sweeping (#8) as above, except that, this time, the purpose, and the visualized intent, is to sweep old cognitive sludge out the legs and feet. As this cognitive sludge is swept away, more normal tissue functioning and accelerated healing often result.

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OUR MISSION:

We are dedicated to educating healthcare providers about the importance of human vital energy in health and patient recovery.

We believe an understanding of the energetic nature of healing will reduce side effects and medical costs.

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