

An Introduction to MEDICAL RADIESTHESIA AND RADIONICS

By

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With a Foreword by

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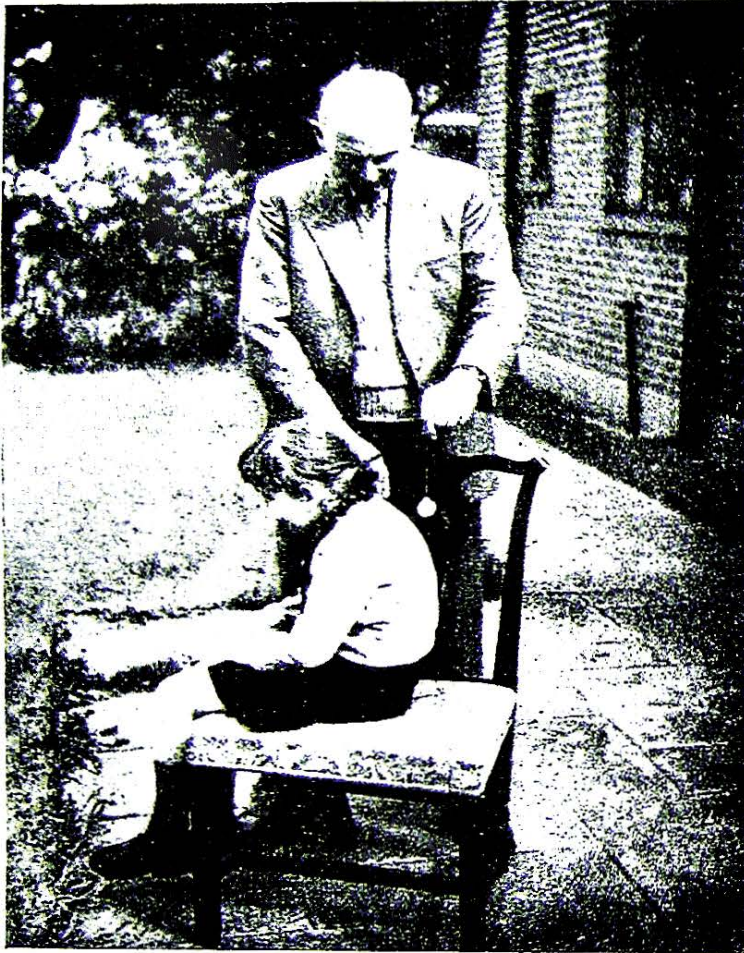


Fig. 1 Locating faulty spinal areas with the pendulum



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To
COLONEL A. H. BELL, D.S.O., O.B.E.
who has given so freely of his time and labour to
the advancement of radiesthesia in all its branches

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There is a principle which is a bar against all information, which is proof against all arguments, and which cannot fail to keep a man in everlasting ignorance—that principle is contempt prior to investigation.

HERBERT SPENCER

CONTENTS

	<i>page</i>
Foreword	9
Prefaces	10
Chapter 1 The Meaning of Radiesthesia	13
2 Simple Pendulum Tests	17
3 Reichenbach and Baines	26
4 Polarity	34
5 Homoeopathy	45
6 Energy Content of Homoeopathic Remedies	56
7 The Preliminaries of Case-Taking	63
8 Radionic Instruments	74
9 Broadcast Treatment	82
10 Treatment	90
11 Testing for 'Deficiencies'	110
12 Further Notes on Treatment	115
13 Psychism in Radiesthesia	127
14 Harmful Earth Radiations	138
15 New Aspects of Physiology	141
16 Radiesthesia and Orthodox Medicine	149
17 Practitioner and Patient	155
18 Psychology and Radiesthesia	162
19 The True Meaning of Health	166
20 A Summing-Up	173
Index	183

ILLUSTRATIONS

<i>Fig.</i>	<i>Page</i>
1. FRONTISPIECE: Locating faulty spinal areas with the Pendulum	
2. Diagram: Arrangement of rule for pendulum tests	20
3. Diagram: Section of apple	32
4. Diagram: Compensator box and ring	58
5. Diagram: Arrangement of rule and Maury Compensator	60
6. Orthodox 'stick' method of using Delawarr diagnostic instrument	<i>Facing</i> 74
7. Delawarr diagnostic instrument showing vial connection to rule	<i>Facing</i> 75
8. Broadcast and direct ultrasonic treatment set shown connected to a rule by means of a vial connection	<i>Facing</i> 118
9. Maury Compensator arranged for finding energy content of various substances	<i>Facing</i> 119

FOREWORD

It is because I am so convinced of the value that Radiesthesia could be to the practice of medicine that I am happy to write a foreword to this book.

If any doctor will so far forget his orthodox training as to carry out a few of the simple experiments outlined in the early part of the book, I feel confident that he will find that there is at least *something* in Radiesthesia and that he may well be persuaded to delve a little deeper.

The average doctor, I think, if he looked the question fairly and squarely in the face, would be bound to admit that there are still many diseases and disabilities which only have a name or label, and with which he has to be satisfied as a diagnosis. Furthermore, in spite of the expense and increasing complexity of modern orthodox methods of investigation, we still have to treat far too many maladies by purely empirical means and without adequate knowledge of their true aetiology. This hiatus in our knowledge could be filled to a very large extent by the unbiased use and development of Radiesthesia.

Mr. Wethered has furnished us with a most painstaking and comprehensive survey of radionics in the present stage of that science, incidentally revealing how much more remains to be amplified and elucidated; the wide range of inquiry he has covered shows an amount of persistence and assiduity which we might well envy.

The subject with which the author has dealt particularly well is that of Homoeopathy, its value to medicine in general and, more especially, in radiesthetic work. He has also candidly pointed out the difficulties entailed in its use, at least to its greatest possibilities, by any but the especially experienced and endowed, and has pointed out how these handicaps can be largely overcome by the employment of the radiesthetic approach. I hope that Mr. Wethered will some day find time to extract and augment the strictly

practical parts of his book and produce a textbook which will make its appeal to the medical profession.

Beginners in this subject may, on the whole, find it a not too easy book to follow through, but I am sure that those who persist will find it well worth while.

GEO. LAURENCE

PREFACE

It is now more than eight years since I first set myself the task of writing a book on medical radiesthesia, which was published under the title *A Radiesthetic Approach to Health and Homoeopathy*. The reception which this book received, and the letters which have been sent to me as a result of it, have convinced me of the very real need which is felt for instruction in radiesthesia as applied to medicine by both doctors and laymen interested in homoeopathy.

It has been proved that radiesthesia can be an asset of great worth to homoeopathy, for through radiesthesia we are dealing with radiation and energy, and it is the energy contained in the homoeopathic remedy which confers upon it its remarkable powers. The intensity of this energy and its effect on human tissue, as on pathogenic organisms, can be accurately assessed through radiesthesia.

In my researches during the last five years, I have worked very largely with radionic instruments. At the same time, for purposes of analysis, I have devised a method whereby I can retain the rule method described in my former work. It is thus that I have been able to maintain and develop the rule technique which I previously employed, but with the added advantage that quick and reliable tests can be made by pendulum, using any one of the numerous rates provided with the radionic instruments.

I remain more convinced than ever that in the homoeopathic remedy we have a powerful means to health, provided that we can use it to the best advantage. In this book I have tried to show how we can go about the task of diagnosing and treating a case with the assistance of radionic

instruments. Naturally, different practitioners will use different methods, but fundamental principles remain the same. I have paid particular attention to the problem of choosing the remedy radiesthetically without violating homoeopathic principles. That is to say that it has been my endeavour to show how remedies can be selected which will treat the patient as a whole. I have restricted myself to the pendulum as the dowsing instrument, as I believe it to be highly sensitive and more easily mastered by the generality of practitioners than the 'stick' method of operating radionic instruments, or the divining rod.

While trusting that this book will be acceptable to laymen interested in the related subjects of medical radiesthesia and homoeopathy, I hope it will also find its way into the hands of not a few doctors, and others qualified in one or other of the healing arts. It should also be made clear that medical radiesthesia is not necessarily restricted to the practice of homoeopathy (although it is admirably suited to it), but can be equally employed in more orthodox procedures.

I wish to thank Dr. Geo. Laurence for writing the Foreword and for reading the proofs of this book. His encouragement has been a source of great satisfaction to me.

VERNON D. WETHERED

Weybridge.

PREFACE TO THE FOURTH EDITION

It is good to know that since this book was first written, people have been taking more and more interest in homoeopathy and other alternative medicine. Homoeopathy has the advantage over much of orthodox medicine in that there are no side effects, it is extremely economical, and its remedies are easy to take. This is unlike antibiotics which can be unpleasant to taste and which certainly have their failures.

In the past homoeopathy would undoubtedly have made greater strides if its practice had not relied on sympto-

matology; that is matching the symptoms of the remedy as appearing in *Materia Medica* to the symptoms of the patient. This state of affairs has been changing in recent years through the appearance of radiesthesia and radionics, whereby it is possible to make an accurate diagnosis of the cause of disease and to treat it specifically. To take one example. I have been diagnosing aluminium poisoning in those who are allergic to it over the last thirty years, but even now I should say that most doctors are unaware of its dangers and the misery that it can cause. But through radiesthesia the poison can be detected in the body in just ten seconds. We now know that the best remedy for eliminating it is *Lycopodium*.

With the help of radionic instruments numerous tests can be made to ascertain the cause of illness and disease and treatment can be given with homoeopathic remedies and by broadcasting treatment through the ether. All this work depends on the subtle radiations given off by matter of whatever kind. One advantage it has is not only in the accurate prescribing of remedies, but deciding exactly what potencies are required. This can be as important as choosing the remedy itself.

Although many people are coming to appreciate the significance of these new therapies, they are still not nearly as widely known as they should be. It is to be hoped that those unacquainted with them will find this book both valuable and useful.

VERNON D. WETHERED

CHAPTER I

THE MEANING OF RADIESTHESIA

THE word 'Radiesthesia' means 'sensitivity to radiations'. It has been known of for centuries in the guise of water divining. Only recently has the word Radiesthesia appeared in the English language; it is better known in France and other European countries by its French equivalent *Radiesthésie*. The basis of radiesthesia is the carrying out of tests depending on sensitivity of human beings, which may be sensitivity to the presence of running water, of metals, or indeed of radiations coming from any object or person. The old English word 'Dowsing' has been employed in the past to denote the practice of testing for the presence of water and other objects. Some dowsers, or diviners, have been highly successful in searching for lost objects or persons by carrying with them in their search a sample or 'witness' (after the French word *témoin*) of the missing object or person, and not infrequently we read in our newspapers of diviners assisting the police in tracking down murderers or missing people. The instrument mostly used for practices of this kind is the divining rod, which may consist simply of a V-shaped hazel twig cut from the tree, or two whalebone rods bound together at one end.

In the past radiesthetic work, consisting mostly of finding water supplies in arid districts, consisted of 'field work' carried on out of doors. It is only in comparatively recent years that human sensitivity has been employed on any scale for delicate work of a laboratory nature involving precise measurements. Work of this nature is widely practised in France and is being followed with great interest by radiesthetists in Belgium, Italy and other European countries. A number of radiesthetic periodicals are published on the Continent and societies have been formed there, in the United States and other countries, with the object of furthering the interests of radiesthesia. In England

the British Society of Dowzers was founded in 1938, largely through the enterprise of Colonel A. H. Bell, D.S.O., O.B.E., who has been President of the Society since its inception. This Society has members living in most parts of the world and it publishes a quarterly journal, holds lectures, and arranges demonstrations and occasional outings. While the original aim of the Society was to develop the practice of water divining and other out-of-doors activities, its sphere of interest has now been greatly extended to investigate the nature of the radiations involved in radiesthetic work and to develop its applications in realms such as those of mineralogy, agriculture and medicine.

In this book we are concerned with medical radiesthesia, which covers many methods, from quite simple ones to others which are far advanced. Some of the methods which can be employed for simple diagnosis and testing remedies are unlikely to commend themselves to doctors or those scientifically inclined, consisting as they often do of work with diagrams or anatomical charts, where often enough a psychic element is implicit in the results obtained. But while there are many people who take a somewhat elementary interest in radiesthesia by using methods which are somewhat severely limited in their scope, that is no reason why the scientifically trained should assume that the whole subject is unworthy of their attention. The fact is that human sensitivity is of such an order that often the simplest methods of testing can produce reliable and worthwhile results.

The radiesthetic instrument generally used for precision testing (as opposed to work in the field) is the pendulum, which may be made of whalebone, ivory, plastic or wood. A cotton reel suspended by a fine thread makes quite a good pendulum and one that is fully sensitive. Anyone who has never used rod or pendulum before might try as a first experiment suspending a cotton reel over different articles of food, sweets, chocolate, tea, coffee, etc., and their own brand of cigarettes. It is best to place each article in turn on a clean sheet of white paper. Individual reactions are not always the same, but generally it will be found that the pendulum will gyrate in a clockwise direction if the food (or

whatever it is) suits the person in question, in an anti-clockwise direction if it is unsuitable, while if it is neither good nor bad, the pendulum will oscillate in a straight line. It is suggested that the reel should be suspended with a length of thread of $4\frac{1}{2}$ to 6 in.

The advantage of radiesthesia as applied to medicine is that much information can be obtained about the patient, which cannot readily be ascertained in any other way. It can therefore add to the knowledge obtained through clinical examination and may throw an entirely new light on a case. While similar information can sometimes be obtained by orthodox methods, it should be remembered that radiesthetic tests can be carried out at any convenient spot and in the minimum of time, provided that a blood smear, saliva specimen, or other suitable sample of the patient is at hand.

The number of people interested in medical radiesthesia is steadily growing, and not a few are finding it useful in keeping themselves fit. This is by no means to be deplored. Under the National Health Service the individual is quite rightly not expected to visit his doctor for every petty ailment to which he thinks he may be subject, and it is inevitable that he will dose himself from time to time with such simple remedies as aspirin or an aperient. There is an old saying that one is either a fool or a physician by forty, and I think most people will agree that it is all to the good that the general public should try to take an intelligent interest in their health. This, in fact, is what they are frequently asked to do by the authorities.

I am not, of course, suggesting that sick persons should be dissuaded from seeing their doctor and putting themselves under his care. It is indeed their duty to do so. But if the individual has a quick and simple method of deciding before he takes his aspirin, or whatever it is, that it is really what is wanted and that it will do him good, it is surely common sense that he should use it. As a keen student of medical radiesthesia for a number of years, I am convinced that the individual, if a dowser, has the opportunity of doing a little more for himself in keeping himself fit than he has had in the past, and dealing with those little ailments

which are not considered serious enough for taking professional advice. This applies more particularly if he is interested in homoeopathy. But this is really by the way. What is of far greater importance, I am more than certain that radiesthesia can throw new light on the physiological processes which are factors in health and disease, and help us to understand better not only the causes of disease, but ways in which we can deal with it when it occurs. Moreover, the radiesthetic method will often detect incipient disease before it has reached the clinical state, where definitely pathological, and possibly irreversible, tissue changes may have taken place. When incipient, the condition can be successfully treated much more easily and expeditiously than where it is only discovered at a later stage.

With these introductory remarks, let us pass on to a closer examination of what is involved in radiesthetic medical work.

CHAPTER 2

SIMPLE PENDULUM TESTS

BEFORE I go on to describe simple methods available to the radiesthetist for examining and treating a case, I should like to emphasize that while there are a number of methods open to him with varying degrees of complexity, I have confined myself in this book to those with which I am familiar myself. My purpose is to describe those methods which will give the reader a better understanding of the meaning and scope of medical radiesthesia and the place which it should take in medical practice of the future. Although I have friends in the medical profession who are keen students of radiesthesia like myself, I write as a radiesthetist and not as a doctor, and this the reader should constantly bear in mind. If I as a radiesthetist can convince the reader that radiesthesia opens up new possibilities in the field of medical practice of the future, I shall be more than satisfied.

Up to the present the number of doctors who have been able to give much time to the study of radiesthesia is very few, but their number is increasing. It was perhaps inevitable that laymen should have played some part in initiating experiments in this new field of science—for such it is. And indeed this may have had certain advantages. I recall one lay radiesthetist who was told by a medical friend that it was all to the good that she was not a qualified doctor, as she would in that case never have been able to forget what she had been taught and to approach the subject of radiesthesia with an open mind. Medical training, as it is today, does nothing to prepare students for work of such an unorthodox character.

Medical radiesthesia is developing along lines which differ radically in many respects from the precepts and practices of orthodoxy, as will appear later in this book, but one hopes that it will eventually be conceded that these

departures are not regressive, but rather that they hold out hopeful prospects for therapies which are more rational and soundly based than some of the medical practices widely employed today. At least we can hope that they will come to be regarded as useful adjuncts to longer established techniques.

In taking a case, one of the first requirements is to ascertain how the different organs are functioning. Often it will be known in advance that one or more organs are diseased or affected in some way or another, but nevertheless it is good practice, radiesthetically speaking, to find out as much about the patient as possible. Often enough imbalances will reveal themselves which were quite unexpected, and these imbalances may throw new light on the case.

In order to find the condition of an organ in a patient, it is necessary to have a standard sample of it. This may be a healthy animal organ prepared in a powdered, desiccated form, the actual organ preserved in alcohol, or a starch impregnated 'witness' as made in France. The radiations of animal organs, human or otherwise, give off similar radiations, and thus it is that the condition of a human organ can be discerned by making tests with the organ of a rabbit or guinea pig, which have been found by experience to be wholly satisfactory. It is possible to employ the wave-forms of the different organs as generated by radionic instruments, but this will be discussed later.

A very simple method of testing organs of someone present in person is to hold a witness of the organ to be tested in the pendulum hand and point at the organ with the index finger of the free hand. It is thought advisable to hold the thread between the thumb and first finger with the witness touching the thread. If the organ is toxic or not functioning properly, the pendulum will probably gyrate anti-clockwise, though occasionally it may be found that an operator's pendulum, while gyrating clockwise for a good reaction, will oscillate for a bad one. Results almost equally good could probably be obtained without the help of a witness, provided that the operator is thinking of the organ concerned. Neither method, however, can be considered precise.

For precision testing I personally favour the rule method, giving numerical results. For this method of testing we place a specimen of the patient at 0 cm. at the left-hand end of a graduated rule (a 100 cm. rule is convenient), and the organ sample or witness at the 100 cm. mark at the right-hand end of the rule. The rule should preferably be supported on rubber blocks so as to insulate it from stray radiations on the table. Saliva in a 2-drachm or $\frac{1}{2}$ -oz. vial makes a reliable human specimen. If the organ in question is healthy, the pendulum will oscillate at right angles to the rule at a position exactly half-way between specimen and sample, i.e. at 50 cm. To find out if it does, hold the pendulum loosely over the half-way point and, if necessary, start it oscillating across the rule. But this may happen quite involuntarily. If the balance point is below 50 cm., the pendulum will take up a diagonal oscillation relative to the rule and not at right angles to it, pointing down the rule towards the zero mark on the rule, i.e. towards the patient's specimen. The operator then has to move the pendulum gradually down the rule until the oscillation is at right angles to it. This will indicate the balance point.

If function of the organ is deficient, the balance point will be below 50 cm., say at 47 cm., or even 45 cm. Forty-five centimetres is quite a bad reading and readings below it are comparatively rare. Occasionally a reading above 50 cm. will be found, indicating gross inflammation or toxæmia.

The rule should be rather longer than 100 cm., as it is sometimes desirable to place remedies on the rule together with the specimen. Moreover it is not desirable to place specimen or witness at the extreme ends of the rule. A good overall length is 106 cm., with 3 cm. to spare beyond either end of the graduated scale. A satisfactory width for the rule is 3 cm.

We must consider at this point the autonomic nervous system. The sympathetic nervous system secretes adrenalin at its nerve ends, while the parasympathetic nervous system secretes acetylcholine at its respective nerve ends. Now it is easy to understand, and it can be shown radiesthetically, that the sympathetic and parasympathetic nervous systems are of opposite polarity or, as we may say, they produce

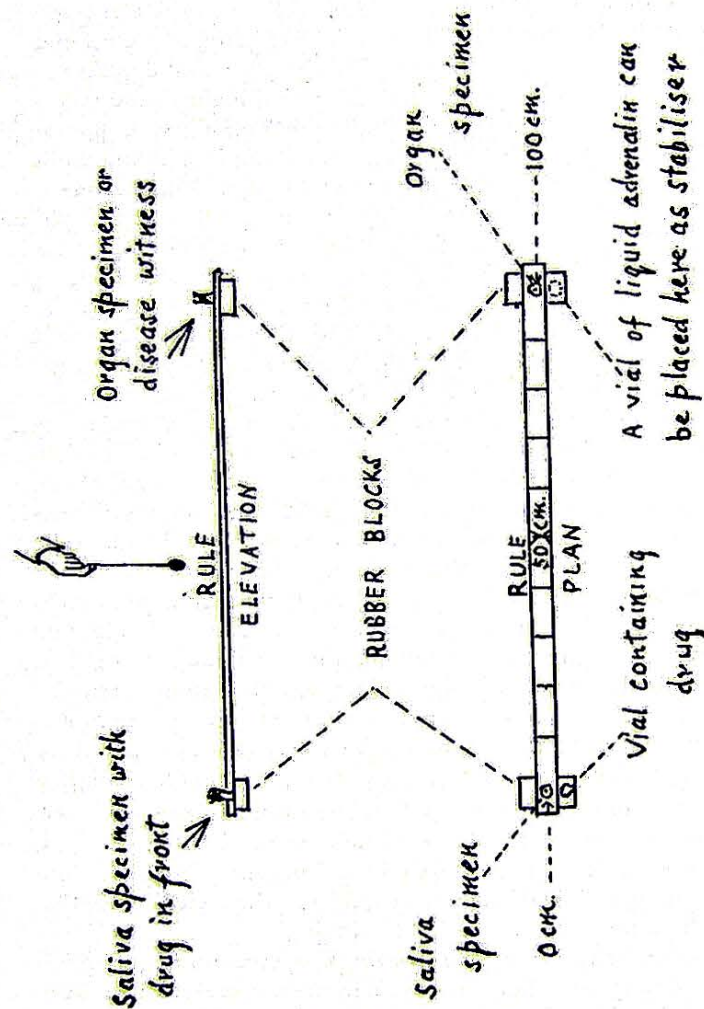


Fig. 2. Arrangement of rule for pendulum tests with human specimen, witnesses and remedies

opposite actions. This is, of course, well known. For where one stimulates the action of an organ, the other will depress it.

When I first began to study medical radiesthesia, I was greatly in need of a sample of the sympathetic nervous system. Starch impregnated witnesses of sympathetic nerves were available in France, but owing to the war (this was in 1939-40) these were then unobtainable in England. Moreover I was unable to procure a sample of a sympathetic nerve fibre, which would have made a satisfactory witness. I eventually found that liquid adrenalin in a glass vial made a satisfactory witness of sympathetic nerves, while at that time Dr. W. Guyon Richards, who pioneered medical radiesthesia in this country, had proved the value of acetylcholine as a witness of the parasympathetic nervous system.

It is necessary to say something of the work of the late Dr. Guyon Richards at this stage, for medical radiesthetists in this country owe him much for the researches he carried out, and the contribution he made to what is known of medical radiesthesia today. A Cambridge man, Richards served as an Army doctor in the early part of his career. Some time after entering private practice he had a breakdown in health, and it was during this time that he studied the work of the American doctor, Albert Abrams. Abrams was something of a genius and all modern radionic work owes much to his investigations. We might say that he was the pioneer of radionics as it is known today. He found out, amongst other things, that every disease has its own specific radiation, and can be identified by suitable instruments utilizing a radiesthetic technique.

Richards greatly added to the knowledge and techniques contributed by Abrams and developed his own ideas on original lines. Only those who knew him can appreciate the full extent of his work. But he left a permanent record of many of his most important achievements in his book *The Chain of Life**.

For various reasons which we need not go into, Richards turned to comparatively simple pendulum methods at the

* Guyon Richards: *The Chain of Life* (Health Science Press).

beginning of the Second World War, and in this new field he again developed a technique which has left its mark on the work of his successors. To return to organ testing, he found that an organ out of balance could be affected in four different ways. The technique has been described rather loosely as 'measuring up' on the sympathetic and parasympathetic nervous systems. The technique, which really involves 'polarity' (of which more later), is as follows.

With a human specimen at 0 cm. and a witness of an organ at 100 cm. on the rule, we place close to the organ witness, but not actually on the rule, a sample representing sympathetic nervous system. Supposing that we obtain a reading of 47 cm. We know then that the organ's radiation is deficient; its function is impaired. We then replace the sample representing sympathetic by one representing parasympathetic, when we may again obtain a reading of 47 cm. On the other hand the reading may be 53 cm. In the latter case we are safe in assuming that the patient is suffering from some infection, although the organ is standing up to it fairly well. With both readings at 47 cm., the organ may be said to be in a 'shocked' condition, i.e. its function is impaired through an infection or some other cause. It may quite easily be due to general debility and lack of tone throughout the system, when other organs, glands, etc., will be similarly affected. In like manner it is also possible to obtain readings with measurements against sympathetic and parasympathetic with both giving the same reading *above* 50 cm., such as 53 cm., for example. In that case the organ may be said to be in a febrile, or highly toxic, state. With the reading against sympathetic above 50 cm. and that for parasympathetic below 50 cm., it will probably be found that the patient is in a state of tension, both mental and physical, possibly inclined to hysteria and certainly living on his nerves.

We thus have four conditions pertaining to an organ, which can be found by utilizing liquid adrenalin and acetylcholine as sympathetic and parasympathetic nerve samples. The same effect can be observed by using a bar magnet. If, instead of placing liquid adrenalin alongside the organ witness, we place the north end of the magnet close to and

pointing towards it, with the magnet arranged at right angles to the rule, the same reading will be obtained. (Possibly the distance of the pendulum balance point from the 50 cm. mid-point of the rule may be increased slightly owing to the greater effect of the magnet.) Similarly the south end of the magnet can be used instead of the acetylcholine sample.

Thus the four arrangements of organ readings appear to give indications of the organ's electro-physical balance, and this will become more evident as we proceed. The arrangements may be designated thus:—

Sympathetic	—	Sympathetic	—
Parasympathetic	+	Parasympathetic	—
Sympathetic	+	Sympathetic	+
Parasympathetic	—	Parasympathetic	+

The plus and minus signs indicate respectively readings above and below the mid-point (50 cm.) of the rule. In addition to these groupings I have found that we can sometimes obtain a normal (50 cm.) reading on sympathetic with a high reading for parasympathetic. Thus we may have S=50, P=60. In this case, according to various tests I have made, the organ is active, but gross toxæmia is present. We must conclude that a normal reaction for sympathetic does not necessarily mean that an organ is in an entirely healthy state; it may be very much otherwise. But if the reading for parasympathetic is also normal, we can assume that the organ is healthy. I shall henceforth refer to sympathetic and parasympathetic nerve samples as S and P.

S and P, as we have seen, can be compared to the opposite poles of a magnet. I have used these samples in a great variety of tests. They are often much to be preferred to magnets, as the latter may leave residual influences close to, or on, the rule, thus vitiating further tests. Moreover, extensive radiesthetic work with magnets can be very tiring to the operator, assuming he has a reasonably high degree of sensitivity.

Richards prepared tables in which he gave suitable

remedies for correcting the imbalances of the various organs according to their electro-physical state. He had previously been puzzled as to why an organ such as liver, for example, sometimes wanted Opium, whereas at other times Podophyllum, or (less frequently) Juglans Regia or Arsenic Alb. was required. It should be understood that simple tests for an organ, using only the human specimen and organ witness on the rule, give worthwhile results, but the method Richards devised gives added precision and information on the state of the organ concerned. If an organ shows imbalance on the rule and the placing of a remedy close to (or as we might say, in radiative circuit with) the human specimen restores the balance point to normal (50 cm.), that is an indication for the remedy on test. It will be understood that when we place a remedy close to the human specimen, the radiation of the remedy will affect that of the human specimen, just as it would the person represented by the specimen if taken orally by him, so that we have here a useful means of finding what treatment is required.

As well as measuring up organs, the rule method is equally useful for finding out other bodily conditions such as the state of the endocrine glands, nerves, blood, vitamins, infections and poisons, as well as mineral and other deficiencies. In fact, the tests we might usefully make are almost endless, provided we have the necessary samples. French witnesses are manufactured giving off the radiations of microbial and virus infections such as catarrh, influenza, B. Coli, Streptococcus, Staphylococcus, Typhoid, Paratyphoid, etc. These witnesses are employed in the same manner as the organ witnesses, being placed at 100 cm. on the rule, with the human specimen at 0 cm. If the patient is not infected by the particular microbial or virus infection under test, the balance point will be at 45 cm. or below, but if he is infected, the balance point will be above 45 cm., the acuteness of the infection depending on how high the reading is. With a really bad infection the pendulum may point far up the rule, finding its balance point across the rule at 80 cm., or higher. For tests of this kind I personally as a rule place my sample of sympathetic nervous system against the infection witness, as I am of the opinion that it

helps to stabilize the readings. This is, however, by no means essential.

An interesting point to note is that, in radiesthetic work of this kind, the radiation from the human specimen reflects the condition of the patient as he is *at the moment of test*. In other words, the specimen is linked radiatively with the patient wherever he may be. In all the work I have ever done, I have always found this to be true. Some operators may question this assertion, and indeed have done so in the past, but if it were not so, it would be impossible to broadcast treatment through the ether, as is being done every day by radionic practitioners. There must indeed be a radiative link between patient and bloodspot, or whatever the specimen consists of, for it to be possible to give treatment *at a distance*, as in fact it is. Work with radionic instruments will be considered later. But it may be said that where operators using some form of diagram for their tests insist that the radiation of the specimen remains that of the patient when it was taken and that it does not alter with the condition of the patient, I suggest that the shape of the diagram, and particularly if it is a closed one, may cut out all radiations coming from outside, so that what is measured is the radiation of the matter comprising the specimen as, and when, it was taken from the patient.

It is possible to assume from what has been written on the subject that a human specimen does in fact normally give off two quite distinct radiations, viz. that of the patient as he was when the specimen was taken and that of the patient as he is at the moment of test. It is indeed strange, as it is undoubtedly true, that one can ascertain the condition of a patient who may be many miles away—quite possibly in a different continent—at the moment of test, and it certainly has its advantages. For instance, once the practitioner has obtained a specimen of his patient, he can continue using that specimen for prescribing indefinitely. So that each time a patient overseas requires help, all he has to do is to write an Air Mail letter stating his symptoms. No new saliva specimen or blood smear is necessary. In this way a good deal of trouble and expense is avoided on the part of the patient.

CHAPTER 3

REICHENBACH AND BAINES

It should be clear by now that radiations play an important part in the make-up of the individual. Every organ, nerve, bone and secretion in the body is radiating its own energy, all of which can be detected with the pendulum. We must naturally ask what is the nature of the dowsing reaction by which the twig dips, or the pendulum oscillates or gyrates. The question has so far never been satisfactorily answered, although we can say that at least part of the mechanism of the automatic response is a neuro-muscular reaction. But what exactly is it that we detect with the rod or pendulum? If we cannot answer that question, we may perhaps be able to come nearer the truth if we see what Baron von Reichenbach has to tell us.

Carl Reichenbach was born at Stuttgart in 1788 and lived till 1869. He was a contemporary of Michael Faraday, that genius of experimentation, who discovered so much about electricity and the elementary laws which govern it. Reichenbach was a scientist who carried out many researches, but what concerns us here are his experiments on magnets and what he called the Odic force, Odyle or Od—manifestations of matter, alive or dead, which could be seen and felt by sensitives.

Reichenbach found that when a sensitive remained in a totally dark room for some time, he could see light given off by certain objects, which included magnets, the fingers of the hands, crystals, and bodies affected by chemical action. Such manifestations were produced by bodies affected by friction, light and sound. A number of Reichenbach's original experiments are described in his book *Letters on Od and Magnetism**, first published in 1852 and translated into English in 1926. We are told in this book how he came to divide people into two classes, the sensitives and non-

* Hutchinson & Co.

sensitives. One of the first experiments he describes is to take a large natural crystal, such as gypsum spar, and lay it horizontally over the corner of a table so that both ends project unsupported. If a sensitive approaches one end of the crystal with the palm of his hand exposed to it, he will experience a sensation of cold, rather like a cool refreshing current coming against his hand. At the other end, which will be the end from which the crystal grew, he will experience on his hand an unpleasant feeling of warmth, which will in time affect his whole arm and produce a tired feeling. Reichenbach goes on to tell how in 1844, when on a visit to a highly sensitive girl, he took a very large mountain-crystal and placed it in a room from which all light was excluded. The girl was also placed in darkness, and a short time after being brought into the room where the crystal was, she was able to say exactly where it lay. The whole body of the crystal, she said, was glowing through and through with a fine light, "while a body of blue light, the size of one's hand, was streaming out of its peak, in constant motion to and fro, and occasionally emitting sparks; it was tulip-shaped, and disappeared in fine vapour at the summit". "When I turned the crystal round", he goes on, "she saw a dense red and yellow smoke rising over the butt-end."

Numerous experiments of a like nature were carried out with the help of sensitives, and it was always found that where an article of any kind gave out what appeared to be a blue flame, a sensation of pleasant and refreshing coolness was felt on the hand, whereas where a red-yellow flame appeared, the feeling was warm, uncomfortable and fatiguing. These strange phenomena could not be related in any way to heat, electricity or magnetism, nor was it ordinary light, because light is an accompaniment of the phenomena, and light by itself never produces sensations of warmth, coolness, etc. It appeared to be a force which fits in somewhere between electricity, heat and magnetism, and Reichenbach christened it 'Od'.

Now, while this force manifested itself in crystals which have no electric or magnetic properties by themselves, it was equally evident in the case of magnets. The influence

from the north end of a bar magnet produces a cool sensation pleasant to the hand, while that from the south end is warm and unpleasant. In darkness both ends of a bar magnet could be seen by a sensitive 'smoking and sending out sparks', with blue flame at the north pole and reddish-yellow at the south. If you were to blow on this flame-like emanation, it would flicker like the flame of a candle, and light from it could be focused by means of a magnifying glass. If an object is placed in the middle of the flame, the flame will pass round it just as an ordinary flame would do, so that the phenomenon appears to be in fact a physical one, with laws of its own. This Od could be associated with or without magnetism, and in both cases it was found that it was of like strength. Further, light from the sun was found to produce Od of the blue cool variety, while that from the moon is reddish-yellow in appearance and unpleasant to feel. The sun has long been spoken of as being 'male-positive', with the moon 'female-negative'.

These investigations of Reichenbach are so important that we must pursue them a stage further. It was found that after sensitives had been in complete darkness for a considerable time, say for two or three hours' duration, they were able to distinguish plants, flowers and animals. First a grey cloud would be seen where a flower stood, then its individual blooms would become distinguishable, and they could even be identified by their colour. Moreover the human body was seen shimmering in a fine glow. Luminous projections flowed out from the fingers, and it was seen that the colours varied in different parts of the body, right hands being luminous with a bluish fire, while left hands appeared a yellowish red, the latter being on that account brighter than the former. Not only that, but the same difference exists between the two feet, and in fact the whole right side of the body appears bluish and somewhat darker than the other, while the whole of the left side came out reddish-yellow and brighter.

Medical radiesthetists will be at once aware of the significance of these statements, knowing as they do that the human body is 'polarized' as to its right and left sides, the right side being spoken of as being positive and the left

negative. Various animals were found to have the same polarity, while plants, investigated from root to leaves, showed themselves subject to the same laws. Thus, Reichenbach concludes, the whole nature of organic life "beams and abounds in a streaming wealth of Odic force"—a force which goes some way to explain animal magnetism, dowsing and similar phenomena. In fact, through tests with high-sensitives, it has been concluded that everything gives off Od in greater or less degree, which is to be compared with the finding of radiesthetists that 'everything radiates'.

It is a long time now since Baron von Reichenbach carried out these experiments, and it would be useful if they could be repeated and confirmed by modern investigators. So far I have not come across anyone who has attempted this work, but if it could be carried out by radiesthetists, we might learn more about radiesthesia and the non-material factors affecting life and health. It is a fact that the presence of any element or compound in the human body can be detected through radiesthesia, provided we have the necessary witness or sample, which may be taken as proof that everything in Nature radiates. Is it not likely that such reactions are connected in some way with the emanations referred to by Reichenbach as Od? While dowsing reactions are in no way dependent on electrical phenomena, electricity and magnetism do produce dowsing responses.

We have the evidence of various authorities, such as the late Dr. W. J. Kilner*, of St. Thomas's Hospital, Oscar Bagnall† and others, that human beings are surrounded by auras, which can be seen by many people under the right conditions of light. In order to increase visual sensitivity, dicyanin or other suitable screens can be used, or screens made up in the shape of spectacles in which suitable chemical liquid is introduced between two plain lenses for each eye. So we may say that the human aura comes on the fringe of the visible spectrum and is as essential a part of a human being as his body of flesh and blood. In fact we are told that the physical body as we know it is penetrated

* Dr. W. J. Kilner: *The Human Atmosphere (the Aura)* (Kegan Paul).

† Oscar Bagnall: *The Origin and Properties of the Human Aura* (Kegan Paul).

throughout by the non-material etheric body, and that there are several auras whose limits are detectable at different distances from the body, the outer aura or emanation stretching out to a distance of several feet.

Physiology, or the science pertaining to the functions of the body, has mostly been regarded in the past from the point of view of chemistry, and in fact there have been those who considered that even our thoughts, actions, likes and dislikes were very much a matter of chemical action and reaction. But observations by such persons as Reichenbach, Kilner and Abrams (to mention only three) must convince us that there are other equally important factors at work, and that chemistry by itself is insufficient to explain to us the meaning of the life forces.

So let us leave now the question of auras and the manifestations described by von Reichenbach and turn to the investigations carried out by Arthur E. Baines, who came to look upon physiology as essentially an electrical problem. Baines was an electrical engineer, who in his early years joined the Eastern Telegraph Company. It was when cable-testing and as a result of a series of experiments that he became convinced that a force resembling electricity, if not identical with it, was constantly generated in the body, and that its tension was dependent upon the state of health of the subject.

I believe that something still remains to be learnt from Baines in order to gain a proper understanding of physiology, and that radiesthesia can help in this understanding. I am not aware of the extent to which physiologists and neurologists of today would accept Baines's statements, but it has to be remembered that Baines spent a lifetime dealing with electrical matters of many practical kinds, and that in his later years he carried out many experiments on the electrical aspects of physiological function. If I recall some of the statements he made, it is simply to put them before the reader for his consideration, and in the hope that he will study Baines's findings for himself. He published several books on the electrical aspect of physiology, and it is clear from his writings that he had a special aptitude for electrical experiments of a comparatively simple nature

which, if accepted, would modify the ideas of many of us on the subject of life in both plants and animals, and in the maintenance of the life that is within us—and thus on the subject of health.

To quote from his book *Studies in Electro-Physiology**, Baines says: "We know, or at all events it can be demonstrated, that man is a self-contained neuro-electrically controlled machine, dependent for the due performance of his functions upon a constant supply of nerve-energy at a low potential; that nerve force is generated in the body with each inspiration, and that the nerve-impulse is neuro-electrical and not chemical. If that is so, and it cannot successfully be disputed, it may reasonably be assumed that in all probability electricity plays a part in the vegetable as well as in the animal world. Investigation has shown the soundness of this theory, as I hope to be able to prove, and further research at the hands of men more capable than myself may lead to far-reaching consequences in the direction of an advancement of our knowledge of practical horticulture and floriculture."

Baines goes on to summarize his conclusions, and amongst other things he states that everything living, whether animal or vegetable, has a well-defined electrical system, the non-living possessing *capacity* only; and that only in conjunction with moisture. Broadly speaking, the edible part of a fruit or vegetable is the *positive* element, or that part which yields a positive galvanometric reaction. Dry earth is a bad conductor of electricity, and therefore water is required as an electrolyte, as well as being necessary in the formation of protoplasm, etc. And he continues by saying that every tree, shrub, plant, fruit, vegetable, tuber, and seed is an electrical cell, differing from cells made by human agency in that it cannot be polarized, or discharged, so long as it remains structurally perfect. And he shows that the skin, peel, rind or jacket of fruits and vegetables is of the nature of an insulating substance, primarily designed for the conservation of their electrical energy. These insulating substances give a negative galvanometric reaction.

* George Routledge & Sons, Ltd., 1918.

Baines's book contains a number of attractive drawings in colour of different fruits and vegetables, like the apple, banana, onion, potato and turnip. The details of the experiments cannot be described here, but the results in every case were similar. In the apple, for instance, the stalk, receiving its negative charge from the earth, communicates directly with the negative core, which is insulated from the positive, or edible, portion. The core terminates at its upper end, which is the positive terminal. The edible part of the apple is positive, while the skin—the insulating part—is negative. Cut the apple, and the insulation begins to break down. The apple will then begin to lose its electrical charge. Once the charge is lost, the apple becomes inedible.

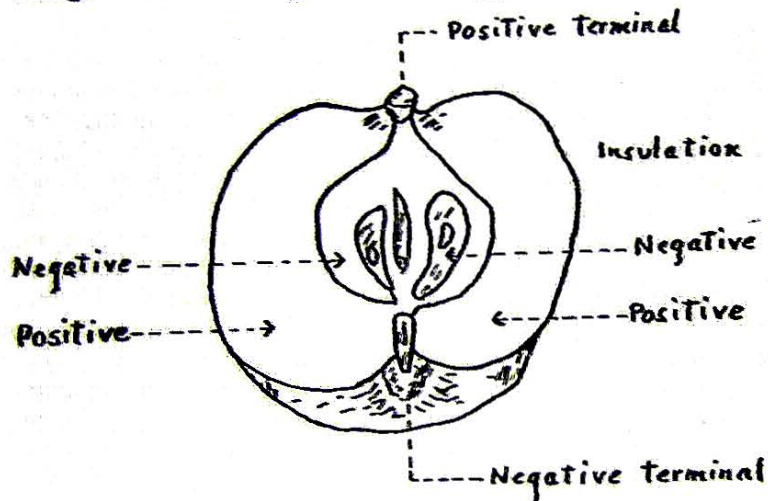


Fig. 3. Section of apple (after Baines) showing its electro-physiological properties, with positive fruit insulated from the negative central portion

Similarly, in the banana, the negative terminal, or stalk, is connected with the skin and an inner lining, from which the positive flesh of the fruit is instantly detachable. "Nowhere does there appear to be any actual electrical contact between the negative and positive systems except, possibly, by osmosis—the flesh being enclosed in an envelope—and as the whole of the flesh is positive, the dietetic value of this fruit should be high". To quote

further: "Unfortunately, it has when ripe, and probably owing to its porous skin, a comparatively low insulation resistance, and therefore a short life."

Reichenbach and Baines have shown us two things. Reichenbach, while confirming in his highly spectacular experiments (if they are to be believed, and be it noted, his work was accepted by Dr. William Gregory, M.D., F.R.S.E., one-time Professor of Chemistry in the University of Edinburgh, among others) the non-material aspect of life in human beings, as of non-living objects, through aural manifestations, also deduced from his experiments that the aural effects differed as to one side of the human body from the other. Now the late Dr. Ernest Martin demonstrated with his pendulum how one side of the body is polarized in relation to the other, and that the extent of the etheric body could be delimited by pendulum. We can postulate therefore that the aura of a person (the word 'aura' being taken to refer to these aural manifestations as a whole) represents some kind of radiesthetic force, often described in radiesthetic literature as a 'magnetic field'. Moreover certain radiesthetic measurements made by rule methods are claimed to be (and undoubtedly are) connected with these aural manifestations.

As to Baines, he approached the subject of animal and plant life from the electrical aspect, and came to the conclusion that electricity plays a fundamental part in the life of the organic cell, and in fact that the phenomenon of the electrical battery, with its positive and negative components and concomitant insulating material, is found as an essential principle in all organic life. Such a statement is in conformity with the work of G. Lakhovsky, who maintained* that biological existence is basically an electrical phenomenon, healthy tissue being maintained by a dynamic equilibrium of the cells. Further evidence as to the part electricity plays in physiology is given in Chapter 15.

Having come so far, we must examine next certain simple radiesthetic experiments, which go some way to confirm the work of Reichenbach and Baines.

* Georges Lakhovsky: *The Secret of Life* (William Heinemann [Medical Books] Ltd.), ch. 5.

CHAPTER 4

POLARITY

DOWSERS are accustomed to speak of various objects as being positive, negative, or of being neutral, i.e. having neither a positive nor negative influence. Moreover, it is accepted that the colour red is positive and makes a reliable positive witness, whereas blue is negative and is equally good as a negative witness.

It is a simple matter to confirm these polarities on test. Place coloured ribbons representing the colours of the spectrum on the table in front of you in the order in which they appear when white light is diffracted by a prism, i.e. red, orange, yellow, green, blue, indigo and violet, and hold your pendulum over each one in turn. You will probably obtain clockwise gyrations over the red, orange and yellow ribbons, anti-clockwise rotations over the blue and violet ribbons, while the pendulum will oscillate over the green, this being the neutral colour. The strongest gyrations will probably occur over the red and violet ribbons. The ribbons should not have been in contact with each other immediately prior to the test, and indeed they are best kept in small glass vials so as not to pick up stray influences, as by handling, for instance.

It is important in making tests for polarity to use a neutral pendulum. For myself, I found that whalebone ivory pendulums gave uncertain indications, and I had to resort to a cotton reel suspended by a fine thread. A small bulldog clip used as a pendulum gave equally accurate indications. Some dowzers use plastic pendulums, and it will probably be found that there is an optimum suspension length for tests of this kind.

Samples of S and P, representing the positive and negative aspects of the autonomic nervous system, will be found to give clockwise and anti-clockwise gyrations respectively. Over a bar magnet the pendulum will probably be found to

gyrate anti-clockwise over the north pole and clockwise over the south pole, depending on the dowser's individual reactions. A pocket torch battery is sometimes used as a witness for testing the polarity of objects, and all that is necessary is to touch either pole of the battery with the index finger of the free hand while the pendulum is held over the object.

It is possible to purchase in shops selling fancy goods what are described as 'sex indicators'. These consist of a small metal rod about 1½ in. long in the shape of a pencil, which is suspended by a string. Held over a woman's hand, it is said to describe a continuous circle, whereas over a man's hand it is supposed to oscillate. These indicators are sold in Europe as egg-testers, and they have been found useful for testing the sex of animals, birds and insects. For tests of this kind, results may be more certain if the elbow of the pendulum arm is rested on the table or, still better, on a rubber block.

Polarity occurs throughout Nature, male-positive and female-negative characteristics occurring in animals, plants, organic and inorganic matter. Even the atoms of which matter is constructed constitute the positive nucleus with the negative cloud of electrons surrounding it, the two forming a balanced unit in which the positive and negative magnetic forces are equalized.

Mention may be made at this point of the work of a Frenchman, the late A. Bovis. Bovis was in many ways a remarkable man. He had little education, but he had a quite extraordinary flair for pendulum work. He devised a rule, known as the Bovis Biometer, on which he claimed to be able to measure the radiations of objects in Angström units with the assistance of a pendulum of his own design. But what is perhaps of equal interest is that he classified matter examined with the pendulum according to the pendulum reactions he obtained. According to Bovis, there are four kinds of radiations (as indicated with his own special pendulum), which he termed positive, negative, mixed-positive and mixed-negative. And he showed how these four different radiations could be demonstrated over a horse-shoe magnet. It is regrettable that the work of

Bovis has never been fully publicized in England, for he had some remarkable ideas and his work was accurate and precise.

I hope that by now the reader realizes that just as a magnet contains two magnetic fields, or fluxes, of equal intensity, the maximum intensity of which is situated at the poles, so polarity plays an important part in all natural phenomena. Polarity is indeed associated with health and disease, and with the condition of food and plants.

If you take a human saliva specimen and place it at 0 cm. on the rule, you should obtain a balance point between 40 and 45 cm. Suppose it is 42 cm. Now place a sample of S close to the specimen and note the pendulum reading. It may remain at 42 cm., but on the other hand it may go down to 39 cm., or even up above 42 cm. to 45 cm. The latter is very unlikely. Suppose it goes down to 39 cm. Now repeat this experiment with P. The reading for P may be 39 cm., or it may be well over 42 cm. In highly toxic or infected cases, it may go up to 70 or 80 cm. In fact, by this test for the polarity of an individual, we have at once a means of determining his general state of health. If the readings for S and P are the same as the rule readings for the human specimen alone (which we shall henceforth refer to as R, this also signifying any reading obtained with any specimen at 0 cm., but without any other sample), we can assume that there is nothing much wrong with the *general* condition of the individual. If S is below R and P well above it, we must assume that an infected or toxic state exists. On the other hand the reading for S may be the same as that for R, with P giving a high reading, such as 60 cm. This only occurs when the infection is not very acute and the patient is standing up to it well. In febrile conditions it is possible that S may be found above R, but this would be a rare case, probably of a very acute kind. With S above R and P below, we must assume a condition of considerable nervous strain. It not infrequently happens that both S and P give the same reading below R, such as 39, or lower (assuming still for argument's sake that R=42 cm.). In that case the vitality of the individual is low and something in the nature of a tonic may be called for.

Now these tests bear a strong resemblance to those for testing organs, and they are in fact another facet of the same phenomenon—that of polarity. I have found them valuable in making analyses and for finding suitable remedies. They do give a good indication of electro-physical imbalances in the system as a whole.

The reader will recall the reference made in Chapter 3 to the electro-physical properties of fruit, as suggested by A. E. Baines. I carried out the following experiment with a banana to see if I could confirm his ideas as to the positive and negative (insulating) properties of the fruit and skin of a banana respectively. I arranged my rule in a North-South direction with myself facing west, though I am not suggesting that this particular orientation was necessary. As usual, the 0 cm. end of my rule was on my left (to the south). I then placed some of the banana fruit in a glass vial and stood it at 0 cm. on the rule. The pendulum reading I obtained was 27 cm., an R reading (there being nothing else besides the specimen under test on, or adjacent to, the rule). I then placed S and P in turn alongside the banana sample, but just off the rule—in the usual manner—so that radiative contact was made. The reading went up in both cases to 33 cm. On the other hand a sample of the banana skin placed in a vial gave an R reading (i.e. with nothing else on or alongside the rule) of 25 cm., and 18 cm. in each case for S and P. We can record the results thus:—

	R	S/P
Banana fruit	27	— 33/33
Banana skin	25	— 18/18

The fruit and skin were left open to the air and periodical readings were taken to see how the readings had changed. I give a summary of these readings below:—

POLARITY TESTS ON BANANA FRUIT AND SKIN

		Banana fruit		Banana skin	
		R	S/P	R	S/P
First day	10 a.m.	27	— 33/33	25	— 18/18
	1.30 p.m.	33	— 40/40	30	— 23/23
	10.80 p.m.	30	— 34/34	30	— 25/25

		Banana fruit		Banana skin	
		R	S/P	R	S/P
Second day	10 a.m.	30—35/35	33—30/30		
	6.30 p.m.	32—32/32	30—30/30		
Temperature all day about 51-52 deg. F. Banana fruit and skin surfaces wet, no mould.					
Third day	11 a.m.	33—33/33	30—30/30		
	6 p.m.	29—25/25	30—33/33		
Temperature approximately 52 deg. F.					
Fourth day	10.30 a.m.	31—28/35	32—40/40		
	8.30 p.m.	26—25/30	24—30/30		
Fifth day	8.10 p.m.	30—28/28	26—26/26		
Sixth day	11 a.m.	30—25/25	27—27/27		
Seventh day	9.40 a.m.	30—25/25	32—27/32		
	9.30 p.m.	33—25/40	33—30/35		
Moisture began to disappear on skin, fruit still fully moist.					
Eighth day	9.30 a.m.	33—25/45	36—30/42		
Ninth day	10.30 a.m.	30—24/34	29—25/37		
	Temperature 50 deg. F.				
Tenth day	11 a.m.	28—28/26	28—25/25		
Temperature 50 deg. F.					
Eleventh day	8.30 p.m.	32—27/40	32—28/28		
Twelfth day	11.30 a.m.	25—20/35	25—22/33		
Mould has begun to appear on fruit which is still damp. Skin also shows mould and has grown hairs.					
Seventeenth day	12 noon.	27—21/29	24—20/26		
Fruit still damp but with large patches of mould on it. The skin is quite dry, hairy and with mould on it.					
Twenty-third day	2.30 p.m.	30—25/25	25—20/20		
Banana fruit still moist but heavily moulded. The skin dry, very much shrunk and covered in mould.					

As a convenience I propose to refer to a set of readings where those for S and P are the same, and above those for R, as being positive, while I refer to a set of readings where S and P are the same, but below R, as negative. Thus on the first day the banana fruit gave a positive reading, while the skin gave a negative one.

It is interesting to see how the readings changed as day

succeeded day. I am inclined to think that the banana fruit had reached its optimum food value at 1.30 p.m. on the first day, when its positive reading was 33—40/40. If we regard the skin as an edible fruit, its food value might well have reached its optimum at 10.30 a.m. on the fourth day, when it gave a positive reading of 32—40/40. It will be observed that by then it had completely changed its polarity. Daily readings of this kind were no doubt affected to some extent by the prevailing humidity and temperature, as they sometimes showed marked changes in the course of a day. But the banana fruit showed an 'unbalanced' polarity for the first time on the fourth day (when S and P gave different readings), and I suggest that it was at this point that disintegration began to take place in the molecular structure of the fruit due to bacterial activity. In a like manner the condition of the skin underwent a similar change for the first time on the seventh day. The final result after twenty-three days was that both fruit and skin showed negative polarity, where bacterial activity had (it is suggested) more or less come to an end, but with the fruit showing a higher R than the skin. I assume that R is an indication of the 'quality' of the substance under test.

Any conclusion that one draws from a test series of this character must necessarily be considered tentative, but I have recorded these results in the belief that they do give some indication of polarity of a substance under constant change, and confirm (at least in some part) the findings of Baines.

I trust the reader will bear with me a little longer to consider some tests I made on some miscellaneous organic and inorganic substances, including food samples preserved in alcohol. Tests for R, S and P were as follows:—

	R	S/P
Yolk of egg	30—35/35	
Apple	31—35/35	
White sugar (natural state)	28—30/30	
Brown sugar	30—35/35	
Bemax	32—36/36	
Rum	30—33/33	
Butter	31—35/35	

	R	S/P
Margarine	31	33/33
Fresh drinking water	30	36/36
Stale tap water	26	31/31
Same shaken for 15 sec.	26	37/37
Radiostol	30	35/35
Thyroid dried extract	30	33/33
Pure aluminium sample	30	30/30
Aluminium 6	30	34/34
Aluminium 30	30	37/37

It will be seen that the edible foodstuffs give positive readings, S and P being invariably the same distance above R. For tests of this kind the pendulum should be tuned in each time to the substance under test by holding it over the substance and adjusting the length of suspension to give a strong gyration.

In my book *A Radiesthetic Approach to Health and Homoeopathy** I showed how R readings on the rule orientated North-South gave an indication of 'Identity', while those obtained with the rule lying East-West indicated 'Energy'. This is seen in the above table where the R (identity) reading for aluminium remains at 30, whether it is in its pure form, or potentized to the 6th and 30th centesimal scale. Potentization of a metal, or any remedy for that matter, conveys energy to it, as will be seen later. And as energy is conveyed to the aluminium, so are the S and P values increased. We may say therefore that *positive* readings of S and P do indicate energy or vitality, and we can safely infer that high positive readings for a foodstuff indicate a high energy content, or freshness and good quality. The energy value of foodstuffs as determined by pendulum is therefore an indication of its goodness and suitability as a food.

In accordance with my book, the R readings in the table are an indication of identity, but it will be seen that the higher the reading of R, the better the food value. Brown sugar gives higher R, S and P readings than white sugar, butter higher S and P readings than margarine (the close similarity in molecular structure in this case perhaps being

* British Society of Dowzers.

responsible for the same R reading), and fresh drinking water is from every point of view better than stale tap water. The highest readings obtained for a foodstuff, both for R, S and P, are for Bemax, which is very rich in food value, although the S and P readings for fresh drinking water are the same at 36. Stale tap water shaken for 15 sec. increases its positive readings from 31 to 37, which is just an indication of the corresponding increased molecular activity.

We have already seen that if you place a specimen of your saliva on the rule at 0 cm., you will obtain a pendulum reading at about 42 cm. What is it that you are measuring? We can postulate that it is a delimitation of your auric, or 'magnetic', field. In fact, just as the human body is surrounded by its auric bodies which penetrate the body itself and stretch out beyond it into space, so is the specimen, which is in radiative contact with its owner, surrounded by a corresponding magnetic field, consisting of the non-material substance appropriate to such phenomena.

Now hold a sample of a tonic medicine such as Nux Vomica (a homoeopathic remedy in the 3x potency should be suitable) in your free hand, and you will probably find that the R reading for your saliva specimen goes up the scale, indicating that your vitality is increased. If this occurs, Nux Vomica suits you at the time of test and the auric field of the specimen is expanded. Now hold a sample of Opium 8x in your free hand with the Nux Vomica. You will find that the reading goes back to 42 cm., as the Opium is antidoting the Nux Vomica. You could, of course, test first with the Opium, which may suit you at the time of test where the Nux Vomica does not, and antidote it with the Nux Vomica. In testing remedies for yourself, homoeopathic or otherwise, this method of test is a useful one, the reaction being favourable if the remedy held in the free hand increases the rule reading. Two remedies held together in the free hand may increase the reading very much more, indicating that they can be taken together with advantage.

If, now, you place a small pocket compass in your right-hand side pocket, in all probability you will again find the scale reading increase. But on placing it in the left-hand

side pocket, the reading will probably decrease to some figure below 42 cm. This shows that the electrical field of the compass is interfering with your auric field, and that it is increasing your vitality when placed in the right-hand pocket, but doing you harm when in the left-hand pocket. It also shows that the body is polarized as to its right and left sides, as otherwise the reading would be the same, whichever pocket the compass was in. This confirms the findings of Reichenbach.

According to Sri K. R. K. Murty, an Indian radiesthetist*, every human being develops electrical potentials in the body, and the positive and negative potentials so developed are distributed throughout the body. From the electrical point of view he divides the body into four zones, viz. 1) Above the level of the navel. 2) Between navel and knee. 3) Below the knee and down to the ankle. 4) At the feet. Moreover he divides each zone into two portions, right and left, and says, for instance, that in Zone No. 1, Portion No. 1, the front is negative and the back positive, while in Portion No. 2 the front is positive and the back negative. Also in Zone No. 4 the right foot is positive but the sole is negative, whereas the left foot is negative but the sole positive.

One test, which Sri Murty describes, can easily be verified by the reader. He says that the right hand of a man, when held above the level of the navel with palm upwards, is positive, whereas if it is held between the navel and knee, it is negative. And when the left hand is compared with the right hand, it is found that in corresponding positions, it is of opposite polarity. At corresponding points the potentials in the body of a man and woman are also of opposite polarity.

The late Dr. Ernest Martin used to treat his patients by correcting their magnetic field by making them wear insulated wire around their persons, the ends of which crossed each other at the median line. These wires constituted in fact 'open circuits', and it was important that the coils were worn the right way round according to test. Dr. Martin pointed out that the etheric body extends outside

* See "Human Electricity and Dowsing", *B.S.D.J.*, XI, 79, p. 18. 1958.

the human body to about one inch or so, the outside envelope being referred to as the etheric skin. If you hold your pendulum close to the body on the right-hand side, it will rotate anti-clockwise if the body is in health, and clockwise on the left side of the body. If the body is out of health in the region tested, the gyrations are reversed. He supplied insulated wire which could be worn round the neck or waist, arm or leg. It was found by pendulum that the ends of every wire have opposite polarities, and that is why they have to be put the right way round. He sometimes made his patients put a coil of wire in one or other of the side pockets, according to test requirements, or a dielectric material, such as a piece of yellow plastic 'cloth'. If a coil was in the right-hand pocket, the dielectric placed in the left-hand pocket would augment the effect. The effect of wearing a coil can be ascertained by measuring its effect on the value of R.

There are certain objections to treatment of this kind and, in the author's opinion, it should only be used with care. One difficulty is that, owing to ionization changes in the atmosphere, the polarity of the patient may suddenly change. According to Martin, about 20 per cent. of his patients showed marked instability in their polarity characteristics, and I recall a time when the Aurora Borealis was very active with its strong concomitant electrical effects in the atmosphere, and he told me that it was almost impossible to treat one of his patients suffering from St. Vitus's Dance satisfactorily, as her polarity was constantly changing. I heard of another case of a person who had been recommended by her practitioner to wear a coil round her neck. The weather was thundery and, going home in the train, she felt as if she was being strangled, and hastily removed the coil. In my own case I once found that a coil round my waist, while strengthening the abdominal muscles and obviously suiting the middle portion of my anatomy, was affecting my head and depressing my pituitary gland. I found it impossible to concentrate, and had to think quite a measurable time before I could answer a question. Incidentally, Martin confirmed these reactions with his pendulum.

Dr. Martin made the rather remarkable discovery that coloured glass could have a marked polarizing effect on the body and, provided the right piece of glass was employed, all that was necessary was for it to be placed at a convenient spot in front of the patient *in his line of vision*. He postulated the possibility that you might be able to sit at your desk and keep yourself properly toned up by placing a suitable piece of coloured glass in front of you. I was interested in this discovery and purchased a number of plain coloured lenses from an optician, and was able to corroborate the fact that a suitably chosen colour did in fact correct one's polarity as tested by pendulum. The action was apparently connected in some way with the eyes. As Dr. Martin commented, what the explanation of this phenomenon was in terms of physics passed his comprehension. He used to test the polarity of a patient by holding a short-suspension whalebone pendulum over his upturned thumb. With a balanced, or normal, polarity, the pendulum oscillates.

CHAPTER 5

HOMOEOPATHY

HOMOEOPATHY might be called the Cinderella of the medical profession. Despite the derision which has been poured on it by many medical men, ever since its discovery by Hahnemann in the second half of the 18th century, it has always had a strong and devoted following by a small minority of doctors—men who were so convinced of its efficacy that they continued to treat their patients on homoeopathic lines, and to ignore the scoffs of their colleagues.

The principle behind homoeopathy is extremely simple. It is that a drug which will produce the symptoms of a disease in a normal healthy person will cure that same disease in a person suffering from it. *Similia similibus curantur* is often referred to as the law where 'like cures like'.

It is worth recalling how Hahnemann came to discover the principle with which his name will always be associated. Studying a treatise on *Materia Medica* by an English physician named Cullen, of which he produced his own translation, he was profoundly dissatisfied with the explanation given of how Cinchona cured ague. So he decided to take strong doses of the drug, as were prescribed by physicians of the day. He was astonished to find himself suffering from acute attacks of ague, such as occur in malarial cases. From that point he went on to test various substances, one at a time, and to note the effect they had on him. In every case he found himself suffering from symptoms of the disease for which the substance was ordinarily prescribed.

Hahnemann had been appalled by the general medical practices obtaining in his day, consisting of the administration of strong doses of crude drugs and the widespread use of venesection. So he began to experiment with the adminis-

tration of drugs in small, and even very small, quantities, paying particular attention at the same time to the suitability of the drugs as 'proved' by experiments on himself, and he found that the results were far better, with the minimum of aggravation to his patients.

It was at this point that he made his discovery of potentization, whereby the healing power of a drug could be greatly increased by triturating, or succussing, it. The potency he came to favour most was the 30th centesimal potency, which has a dilution of 1 in 100 to the power of 30, or 1 in 1 followed by 60 noughts. But it should be made very clear that it is not the dilution in itself which confers power on the drug, but the method of potentization. Potentization is not implicit in homoeopathy. Occasionally the pure drug prescribed on homoeopathic principles acts better. But potentization greatly adds to the ability of the homoeopath to get results, and in the generality of cases he will employ potencies. It also enables drugs and substances to be employed which are too poisonous or toxic to be used in their crude form. Moreover, there are substances like some metals and herbs which have no therapeutic value in their crude form, but are of potent use in the hands of the homoeopath. *Lycopodium*, a dust-like powder obtained from the moss *Lycopodium Clavatum*, is an excellent example of this.

In the orthodox school of medicine, drugs are often prescribed more or less empirically, with varying results. Where orthodox medicine fails, the reason all too often is (according to homoeopathic law) that an attempt is being made to find a specific for the disease. Thus do we so often hear of a wanted 'cure' for influenza, rheumatism, for poliomyelitis and cancer. The homoeopath, on the other hand, does not think so much in terms of disease, as in symptoms. Elucidate the symptoms, discover the drug whose symptoms as given in *Materia Medica* are the same, and the patient is cured. That, at least, is the homoeopathic approach. According to the homoeopath there cannot be one 'cure' for a named disease, but many, depending not so much on the nature of the disease as on the symptoms of the patient. Thus it is that there are a number of excellent homoeopathic remedies for influenza, measles,

chicken pox, tonsillitis, rheumatism, and so on, one of which will do most to cure the patient, according to the degree in which its symptomatology matches the symptoms of the patient.

It is a notable fact that Hahnemann's fame spread all over the Continent during a ravaging epidemic of cholera in 1831-32, following several publications by him on its cure by homoeopathic means. Although he had never seen a case of cholera, he had obtained accurate details of the symptoms it produced, and on the symptoms alone he recommended Camphor. He also prescribed the remedies required for the later stages of the disease. During the last epidemic of cholera in London in 1853, the results of treatment through homoeopathy were so favourable that the statistics were at first suppressed by a medical committee of the Board of Health appointed in connection with the epidemic. They showed that under homoeopathic treatment death from cholera was only 16.4 per cent., whereas under orthodox treatment it was 51.8 per cent.*

It is common knowledge in homoeopathic circles that a complete cure of a major disease condition can be effected at times by the administration of a single dose of a homoeopathic remedy in high potency. But owing to the involvement of the disease, or the difficulty of matching the symptoms exactly to it, such cases are rare. I should like at this point to refer to a remarkable case of cure related by the late Dr. J. H. Clarke in *The Prescriber* †, as exemplifying the possibilities of homoeopathic treatment. An account of the case was first sent by a Canon Roland Upcher, Rector of Stradbroke in Norfolk, to *The Homoeopathic World*, and it was the canon who effected the cure. The patient was a woman of 50 years of age, who was conveyed to hospital suffering from great pain in the lower abdomen with vomiting, and she was unable to keep her food down. "Two eminent surgeons from a certain county town met the three local practitioners in consultation. They unanimously diagnosed the case as undoubted cancer of the stomach. The X-ray was not used. But as it was in so difficult a

* *The Royal London Homoeopathic Hospital Centenary (1849-1949)*, p. 5.
 † By John H. Clarke, M.D. (Homoeopathic Publishing Company).

position, it was judged too dangerous to operate upon; and the poor woman was sent home to die. However, not without a second consultation at her home”.

The result was that the first diagnosis was confirmed. The woman was in such a desperate condition that she could only lie in bed and groan. She could neither take any food, nor retain or pass anything. Under these circumstances the canon determined to see what homoeopathy could do. After eliciting carefully the history of the patient, he gave a single dose of *Bacillinum* 30, a tubercular homoeopathic vaccine (there was a history of consumption in the family). On calling three days later, he found that the woman had gone out and had walked a mile and a half down to the town. Next she received two doses, one drop of *Thuja* Ø, 24 hours apart. On calling at the end of the week the woman met the canon at the door saying that she had had a discharge from the womb. The discharge continued for a week and the tumour in the abdomen, with *outside* swelling nearly as big as a football, slowly subsided. “But as the woman appeared so weak and prostrate with the discharge, I got frightened and judged it well to antidote the *Thuja*, so administered *Pulstailla* 30, one dose”. Next day the discharge ceased and the tumour immediately began to swell up again.

It must have been a difficult problem as to what to do next, but the canon decided, purely on homoeopathic grounds, to give her three drops of *Bellis Perennis* Ø. A week later he found the woman washing clothes. On being asked how she was, she replied that she was quite well, and when asked: “How’s that?”, she replied: “Well, sir, three days after you gave me that last dose, I had a great bearing down as if I was going to have a baby and *that* thing all came away, 4 lb. of it, and I and my husband buried it in our garden”.

Now this is not a case of pure homoeopathic prescribing in the rigid sense. First, as the canon wrote, two stone walls had to be knocked down, those of a tubercular strain and the effects of a previous vaccination. But the case does illustrate, as well as anything could, the miraculous power of the homoeopathic remedy when correctly prescribed. Homoeopathic literature is full of seemingly miraculous cures, but the problem of determining the best remedy in

its correct potency is a very difficult one and homoeopathy, like any other system of medicine, has its inevitable failures.

We might ask ourselves at this point what the explanation of homoeopathy is. The answer is not an easy one, and indeed the medical protagonists of homoeopathy have always based their claims on the assertion that, whatever the explanation, it *works!* But a consideration of the phenomenon of resonance may help us to understand.

Everyone knows that if you strike a certain note on a piano, it can start a vase vibrating so that it may crack if the glass is thin enough, always provided that the vibratory period of the vase is the same as that of the note. Perhaps the most easily understood instance of resonance is where soldiers are ordered to break step when marching over a bridge, for if they kept in step and the impulses happened to coincide with the natural period of vibration of the bridge, the amplitude of vibration imposed on the bridge might build up to such an extent that structural failure would occur.

It will be shown later that the potentized remedy contains a high degree of energy by reason of its potentization. Its drug content is infinitesimal in anything but the lowest potencies, and its action must therefore be due to some energy effect. We can in fact postulate a radiation which activates certain bodily tissues, or will eradicate microbes, toxins or poisons. Each potentized drug will have its own specific radiation, consisting as a rule not of one single wavelength or frequency of vibration, but the summation of several individual frequencies, producing what we can refer to as a ‘specific waveform’.

To put it as simply as we can, if we have not one, but several frequencies of vibration imposed one upon another, the result will be a composite vibration with its own specific frequency, i.e. a specific waveform. A useful analogy is where one wave on the sea overtakes another to form a larger wave with its own distance between wave crests, i.e. its own ‘wavelength’.

If the reader has come with me thus far, he will appreciate that the homoeopathic remedy, containing a highly potent vibratory action transferred by a specific waveform, will

only activate a material, be it human tissue, bacterium, toxin or what-not, of similar waveform, or of a waveform bearing a simple arithmetical relationship to it, such as one-half, one-third, etc., which we can refer to as a harmonic of the activating force.

To return to the analogy of the soldiers crossing the bridge, if the bridge has a natural frequency of vibration X times that of the time between each step the soldiers take, where X is a whole number, each step of the soldiers will augment the vibration of the bridge. In all such cases we have the phenomenon of resonance.

This specific action of the homoeopathic remedy is made clearer by taking one or two concrete examples. Just as we can take a herbal extract and potentize it, so can we take a sample from a culture medium of a single colony of bacteria such as B. Coli, B. Typhosus Coli, B. Gaertner, etc., and make a potency of it. Such potencies are known as homoeopathic vaccines and are specific to their own genus of microbe. Thus a person suffering from a B. Coli infection will be greatly helped, and probably cured, by taking one or more doses of a B. Coli potentized vaccine, such vaccines being mostly used in the 30th, or higher, potencies. To what extent such vaccines should be used in actual practice is a matter of opinion, but some homoeopathic vaccines (or nosodes, as they are often called), such as Bacillinum, Tuberculinum and Carcinosis—to mention only a few—are amongst the most valuable homoeopathic remedies we have. But often enough a homoeopathic remedy other than a vaccine is preferred, which may be said to be in resonance with the infection in question.

In cases of metal poisoning, it is often good practice to administer the metal in potency, which by having the same vibratory rate as the metal in question, will eliminate it. The remedy produces a specific stimulation in the system, which resonates with the metal in question and neutralizes it. Metal poisoning will be considered in more detail later.

In classical homoeopathic prescribing, as has already been emphasized, attention is given not to the determination of specific pathogenic organisms in the system, but to the symptoms of the patient. These symptoms are treated with

remedies having the same, or similar, symptomatology, the homoeopathic *Materia Medica* containing detailed records of the action of every drug on the organs of the body, of its effect on the mind, the emotions, the extremities, and seemingly irrelevant effects, such as whether it is suitable for persons suffering from heat, from cold, for those who feel better in the morning, the evening, at night, and so on. These compilations were originally obtained by testing out different drugs on small groups of 'provers', i.e. normal healthy people, who noted with the utmost care what effects each drug had.

It is often and truly said that Nature is the true healer, and that the life force within us is always trying to maintain us in perfect health. On the other hand there are inevitably factors in our lives whose tendency is to create imbalances in our system, whether these be of a psychological, dietetic, occupational or environmental kind. A robust person in full health can usually surmount such influences, but there comes a time for most of us when the system is unable by itself to throw off the cumulative results of such influences, the consequence being an impairment of health, with perhaps the beginnings of a chronic condition of toxæmia and psychological strain. In such cases it is usual to find bacterial invasion, malfunction of certain organs and imbalance of the endocrine system, impairment of the nervous system and a general lack of tone. Sedatives and other crude drugs can often enough do little or nothing to help such cases, and to restore the system to normal balance. What is wanted is the right kind of stimulus to tune up specific tissues requiring it, to eliminate bacterial and virus infection and reduce poison toxins. This homoeopathy can do.

Perhaps the most marked difference between allopathic and homoeopathic treatment is that the former can do so little to eliminate disease conditions of long standing, whereas homoeopathy provides energy to the system, assists Nature in her attempt to throw off toxic material and restores balance to the nervous system—the seat of all physiological action. Too often allopathic treatment merely suppresses the symptoms of a disease instead of curing it. Toxic

material is thus forced deeper into the tissues, only to manifest itself later in some more serious condition, such as asthma, heart disease, rheumatoid arthritis, or affections of the skin.

No sensible person would belittle the good that new drugs like Penicillin and M. & B. have done, or the life-saving work that they have accomplished. For the treatment of acute diseases they have certainly proved their worth. But it is in the chronic cases where allopathic treatment leaves so much to be desired, and they do suggest to the homoeopath that many of them can be traced back to crude drugs administered in mass doses, with little or no attention given to their toxic propensities.

When taking a case the classical homoeopath will ask his patient in the first place what illnesses he has had, the treatment given, and to what extent inoculations and vaccinations have figured in his medical history. It is by no means unusual to find that a chronic condition has as its cause a vaccination, which may have been given years ago. I will quote just one case, of Dr. J. C. Burnett's, given in Dr. M. L. Tyler's *Homoeopathic Drug Pictures**: "Middle-aged man: eczema for 20 years with a *pustular eruption on leg*. The eczema dated from a re-vaccination twenty years before. Thuja 30x cured. The pustules at once began to wither, and patient 'too busy to come himself', sent word later that his skin was well". Such cases in homoeopathic literature are legion.

According to Burnett, "the protective power of vaccination is due to a diseased state of the body. One suffering from vaccinosis may not be ill in the ordinary sense. But he must be in a subdued morbid state, he has been blighted, or he is no vaccinate". He also stated that some of his worst cases of vaccinosis were those in whom the vaccination did not 'take'.

It is not for me to argue for or against vaccination and, according to Dr. Tyler, Burnett was no anti-vaccinator. But it is as well to admit that vaccination can produce morbid conditions developing into deep-seated disease.

* By M. L. Tyler, M.D. (Brux.), L.R.C.P., L.R.C.S. (Edin.), L.R.F.P.S. (Glas.) (Homoeopathic Publishing Company).

It remains to be said that the homoeopath claims to have better means of protection against smallpox than vaccination.

To those who have studied such questions, there is much room for concern over the modern tendency to inject all too readily morbid material of one kind or another into the bloodstream, thus contaminating the systems of not only the subject, but possibly his offspring. For it is within the knowledge of the homoeopath that psoric strains are passed on from one generation to another, which will more often than not manifest themselves in a subacute form, with no apparent connection with the original condition from which it stemmed. This is well illustrated in the case of the woman with the tumour recorded earlier in this chapter.

The homoeopathic pharmacopoeia contains a great many remedies, and it is impossible to retain the leading symptoms of all of them in one's memory. But repertories are available in which symptoms of all kinds are classified, and through which it is possible to arrive at a drug whose symptomatology closely fits the case. Even so, it is often extremely difficult to choose the best remedy in a difficult case in which the disease condition is complex. There may in fact be several disease conditions, all of which must be dealt with in order to obtain a cure. One disease condition can be suppressed by another, and this may become clinically evident as treatment proceeds. It is not unusual for skin symptoms to manifest themselves anew during homoeopathic treatment, or for the return of a discharge in cases with a history of venereal disease, indicating that a previous disease condition has been suppressed rather than cured.

In a person with a bad medical history homoeopathic treatment may be necessary for a considerable time, and if prescribed in the orthodox homoeopathic manner, remedies will be changed as new symptoms appear. Effective treatment can be carried out in this way with a limitation placed on means, i.e. by the practitioner restricting himself to perhaps 100 remedies, where actually 1,000 or more are available. Disease conditions, as they find their way into the patient's system, will be removed in the reverse order,

those contracted last being the first in the order of elimination.

Out of all the remedies available, we can postulate that there will always be one or two whose choice would bring great relief and rapid advance towards cure. We might hypothesize that such remedies syntonize in some way with a vital force within the subject, augmenting the efforts of Nature to restore equilibrium. But whatever the action, it seems that few have the ability to find the perfect simillimum, even admitting full medical training and long study of the homoeopathic technique.

I think one can say that those with long experience of homoeopathy are fully convinced of the potential value of the homoeopathic remedy as a therapeutic instrument, for they will sooner or later have experienced, either in themselves or in their patients, the truly amazing results that can be obtained. But owing to the difficulty of prescribing, failures too often occur, and sometimes the failures seem to be underlined in their totality. If great accuracy is required in finding the remedy to fit the patient, so can failure be complete if the wrong remedy is applied. It is all a matter of tuning—of resonance. The vase must be closely syntonized to the note of the piano if it is to vibrate. And incidentally, people could not be more wrong when they say that at any rate, if homoeopathy cannot do much good, it can at least do no harm. A badly prescribed remedy can upset a patient badly, even if it cannot produce the toxic effects of mass doses of crude drugs.

A study of homoeopathic history makes it clear that exceptional cases of cure were almost invariably procured by men who had made a life study of homoeopathic *Materia Medica* and had an exceptional aptitude for applying it. Such men exist today. But to expect that their achievements could be emulated by the general run of medical practitioners, or even by more than a relatively few specialists, would be expecting too much. The trend of medicine today, as of yesterday and the day before, is to try and find a specific remedy for every disease—the very antithesis of homoeopathic philosophy. Only diligent study and exceptional skill can produce the best type of homoeopath.

What, then, of homoeopathy in the future? To those radiesthetists who pin their faith on the homoeopathic remedy, radiesthesia, and all that the term implies, seems the answer. Through radiesthesia we can ascertain with confidence a remedy (or remedies) which will go some way to clear up a case, even if it is unlikely to be the simillimum. The method is very different, though in no way antagonistic, to classical homoeopathic prescribing. As much as possible is found out about the patient through a radiesthetic or radionic analysis (i.e. with the help of radionic instruments), and remedies are found to eliminate on test the disease conditions, to tone up deficient organs and balance endocrines.

Vitamin and mineral deficiencies have to be attended to and due attention paid to nerve function, the condition of the blood, bone, circulation, and so on. If the remedies tested are selected in the first case after a close study of symptomatology, so much the better. In that way a good remedy from the rigidly homoeopathic point of view will be found. To what extent the practitioner will rely on his knowledge of homoeopathic *Materia Medica* and on his radiesthetic tests must depend very largely on his experience and personal proclivities. But radiesthesia can do an enormous amount in helping to give him an accurate picture of his patient, and ensuring that important disease conditions needing individual attention are not missed. How to go about these tests will be described in later chapters.

CHAPTER 6

ENERGY CONTENT OF HOMOEOPATHIC REMEDIES

IT has been shown in Chapter 2 how the presence of a species of bacteria in the system can be demonstrated radiesthetically by means of a specimen of the subject or patient, a witness of the bacterium, and a rule. If the system is not infected with that particular bacterium, the pendulum will balance at 45 cm., or below. But if the system is infected, the pendulum will balance at 50 cm., or above. The higher the reading, the more acute the infection is.

It will be understood that radiesthetic tests for bacterial invasion depend in some way on activation of the offending material. And in order to deal with pathogenic organisms homoeopathically, it is known that the more acute the infection, the higher the potency required, subject always to clinical considerations and the general condition of the patient.

Whereas a crude drug is chosen according to its specific action on the pathogenic organism in question, we can say that the drug is toxic to the organism and so destroys it. The exact action is in fact often obscure. But when we use potentized homoeopathic remedies, toxicity is in no way involved. A 30c potency entails a dilution of the pure remedy of 1 in 1 followed by 60 noughts. Even a 6c potency has a dilution of 1 in 1,000,000,000,000. A 200c potency has a dilution of no less than 1 in 1 followed by 400 noughts! We are in fact reaching a subatomic scale of quantities, and we may well infer that potencies enable us to employ some form of subatomic energy. At any rate, if we admit that potencies have any action at all, we must assume that some form of energy is involved.

I showed in my book* that an indication of the energy content of a potentized remedy can be found by arranging

* *A Radiesthetic Approach to Health and Homoeopathy* (British Society of Dowsers), p. 55.

the rule lying east and west, so as to neutralize telluric magnetic influences, and finding the pendulum balance point. The tests were made with myself facing south, with the samples placed at 0 cm. on the rule. Thus a sample of Aluminium Ø gave a reading of 26 cm., while at the other end of the scale one of Aluminium 200 gave 40 cm. Potencies within this range gave proportionate readings on the rule.

I have lately been able to use another method of demonstrating the energy content of potencies by employing a Maury Compensator. But first, I must describe what I came to name as my 'Vial Connection'. This consists of two glass vials, preferably 2-drachm or ½-oz., connected by a fine string fastened round their respective necks, with the string ends leading inside the vials so as to increase the influence. It is advisable to give the string several turns round the neck of each vial before tying it. It was in trying to find some means of conveying a radiation off my rule to one end of it that I discovered this simple arrangement, and I have made every day use of it in my radionic work. Amongst other things, the radiation of something lying on the table in front of me can be brought through this connection to one end of the rule.

After acquiring a Maury Compensator, I found that I could carry out certain novel experiments with it in conjunction with the vial connection. But I should first explain briefly of what the Compensator consists. There is a box, 6 in. by 4 in. by 2½ in. deep, into which can be plugged a circular insulated coil of 8 in. diameter, through which very small currents can be passed from a single U2 battery and the necessary resistances inside the box. A microammeter reading from 0 to 500 microamps is arranged on top of the box, and the necessary current within this range passing through the coil can be provided by an On/Off switch. Furthermore, a second switch enables one to step up the current in four stages. For currents up to 500 microamps it is set at "1". Stepping up the current in four stages is accomplished by turning this switch to "2", "3", "4" and "5". As I am not aware of the current passing through the coil of my instrument with the second switch at positions

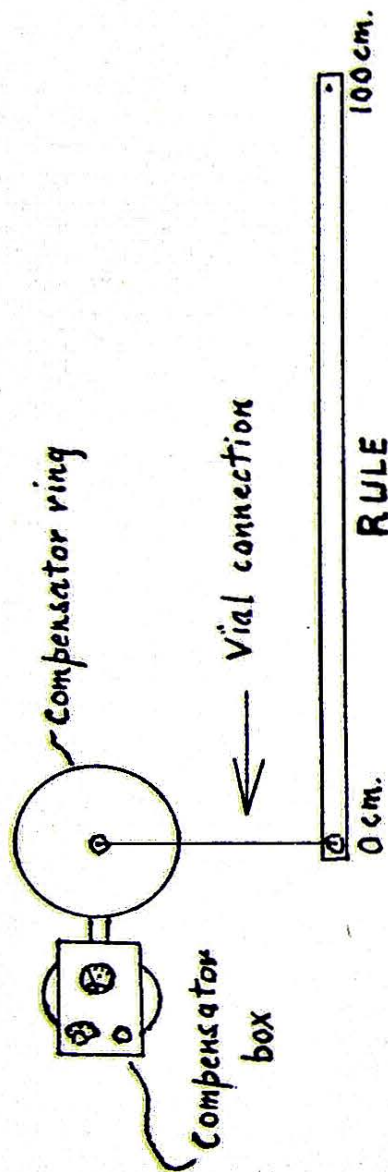


Fig. 4. Compensator box and ring arranged to left of rule with vial connection to left-hand end of rule

"2"—"5", I will restrict my observations to currents up to 500 microamps, i.e. with the second switch set at "1".

To show how a radiesthetic indication of the field strength within the coil can be obtained, I arranged my Compensator on my table opposite the 0 cm. end of my rule so that the coil was immediately opposite the 0 cm. mark, with the Compensator box well to the left, as is shown in the diagram. The distance from the centre of my rule to the nearest point of the coil was 15 cm. I then placed one vial of my vial connection in the centre of the coil, with the other vial at 0 cm. on the rule, so that the string between the two vials was stretched fairly tight and did not touch the table. With the current switched off, I found the balance point on the rule with my pendulum. It read 21 cm. I then turned the first switch to the "On" position, but with no current showing on the microammeter. It still read 21 cm. The readings I then obtained, when the current passing through the coil was increased in stages to 500 microamps, were as follows:—

	Cm.
Switch at "Off"	21
Switch at "On", no current showing on meter	21
100 microamps	22
200 "	24
300 "	25½
400 "	28
500 "	30

We can deduce from these readings that the vial connection does enable us to obtain some indication of the field strength within the coil, as produced by the current passing through it. (See diagram opposite.)

I next arranged the Compensator to the right of the rule so that the coil was opposite the 100 cm. mark, with the Compensator box well to the right of the rule, as in the second diagram. I then placed in turn samples of Sulphur in different potencies at 0 cm. on the rule and found the pendulum readings. As is my custom, I placed a sample of liquid adrenalin close to the vial on the rule with the idea of stabilizing the readings as much as possible. The results were:—

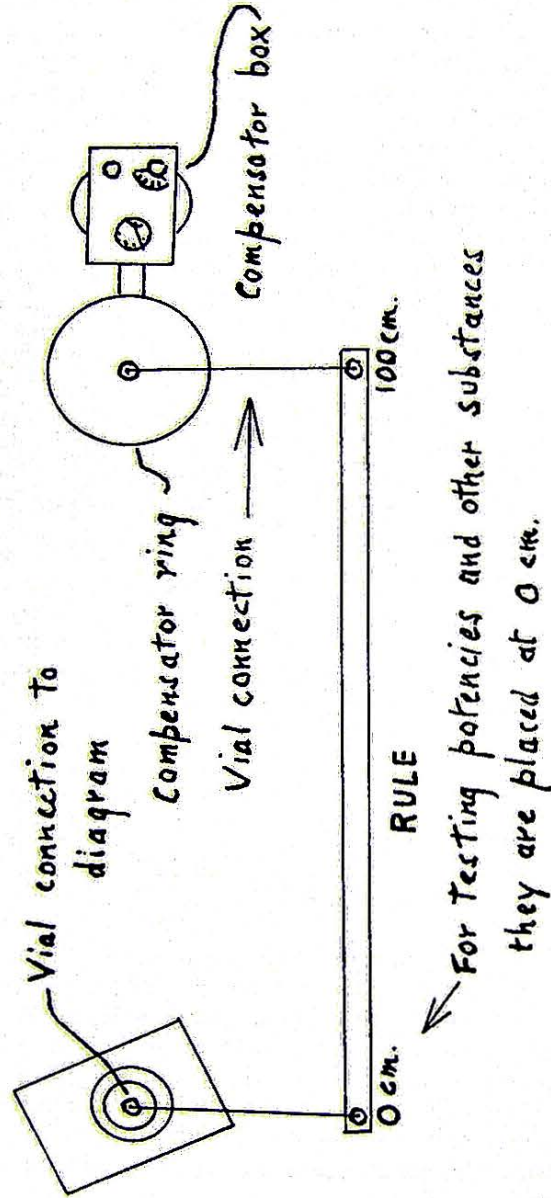


Fig. 5. Arrangement of rule and Maury Compensator for finding energy content of various substances and for tests on diagrams

Sulphur \emptyset	Cm.
1x	38
8x	38
6c	40
30c	45
200	52
	60

It will be seen that the higher the potency, the higher the reading on the rule. In other words, the magnetic field of the remedy was increased as the potency was increased, thus bringing the pendulum balance point closer to the vial connection. It is simply a matter of balancing one magnetic field against another. This test may be taken as confirmation that the potentization of a remedy conveys energy to it.

Hahnemann, in his *Organon of the Healing Art*, wrote: "In the healthy condition of man the spirit-like vital force, the dynamis that animates the material body, rules with unbounded sway and retains all the parts of the organism in admirable harmonious vital operation as regards both sensations and functions, so that our indwelling, reason-gifted mind can freely employ this living, healthy instrument for the higher purposes of our existence". It stands to reason that where parts of the physical economy are disturbed, energy may be required to restore normal balance.

Again, Dr. Herbert A. Roberts has written*: "The nature of energy is dynamic, and this dynamis penetrates every particle, every cell, every atom of the human economy. Any disturbance of this vital energy or force results in a disfigured or disturbed development of the whole human economy. Such a disturbance may come from pre-natal influences, such as the effects of sudden fright; it may be caused by indulgences on the part of either or both parents at the time of conception; the cause may lie in excessive worry during gestation; it may be due to hereditary stigma of either one or both of the parent cells, which may perhaps be due to hereditary diseases or miasms. Like an indelible

* Herbert A. Roberts, M.D.: *The Principle and Art of Cure by Homoeopathy* (Homoeopathic Publishing Company, 2nd ed., 1942), p. 36.

brand, the warping of this dynamic energy is a stain that 'will not out!' And he continues: "On the other hand, after the separate individual life has been established, we know how terrific are the consequences of fright; the fright of the mother who transmits the effects to the nursing child, with a consequent disturbance to the vital energy long after the incident is forgotten. Or the mother's vital force may be disturbed by worries, or by sudden fright, and she herself may suffer from the consequent serious disturbance. These are but a few instances where there may be serious disturbances of the vital force".

It is a singular fact that in homoeopathic *Materia Medica* the mental symptoms are considered of paramount importance in prescribing, and there are many remedies whose symptomatology is primarily mental. Homoeopathy offers a fertile field of practice in mental cases. Thus, in employing homoeopathy, we are dealing not only with physical qualities, but with the totality of man's make-up. There is reason to suppose that the high-frequency radiations of high potencies act primarily on the aural bodies, and through them to the physical.

Subatomic physics has shown us that matter is not dense, but consists of myriads of protons, neutrons, electrons, atoms and molecules, arranged in complex patterns of energy fields, where the distance between the particles is of an order many times that of the size of the particles themselves. Dr. Raynor C. Johnson put it graphically thus*: "If all the nuclei and electrons [i.e. of the atoms] in a man could be somehow collected together, they would constitute a speck which might just be discerned by the naked eye. The substantiality of matter is thus an appearance only . . ."

It is time we gave up thinking in medicine of gross effects and concentrated on the pattern of energy systems which constitute life. To penetrate and correct imbalances in these energy systems, the application of radiant energy of carefully selected amplitude and frequencies is required.

* Raynor C. Johnson, M.A. (Oxon.), Ph.D., D.Sc. (Lond.): *The Imprisoned Splendour* (Hodder & Stoughton, 1953), p. 47.

CHAPTER 7

THE PRELIMINARIES OF CASE-TAKING

THE first object in taking a case should be to find out as much about the patient as possible. Not only the patient's medical history, but that of his family, should be ascertained. That is to say, any history of cancer, tuberculosis or venereal disease in the family should be noted, or lesser diseases or ailments sustained by his parents, such as malaria, rheumatic fever, etc., or diseases where such organs as heart and skin have been affected. Hereditary taints often play a basic part in the manifestation of disease. It should also be borne in mind that chronic states of ill-health are sometimes derived from vaccinations or inoculations, or infections acquired during the mother's pregnancy. German measles may even lead to such serious conditions in the child as hare-lip or congenital heart disease. Homoeopathic treatment of the mother might obviate these consequences.

Admittedly it is not always easy to ascertain facts of this kind from a patient, but fortunately the medical radiesthetist has other means of doing so. Or rather I should say that he has the means of finding out by his tests whether his patient reacts to psoric diseases, and latent disease conditions which are hereditary. The orthodox homoeopath, as we already know, will not only make records of this character, but will go fully into the symptoms of his patient. He will then match the symptoms with a remedy, whose symptoms in *Materia Medica* agree with those of the patient. If the disease condition is not complicated, a cure will follow. Otherwise benefit should be received, certain of the more superficial disease conditions may be removed, and a new set of symptoms will supervene. These will be taken due note of for the next prescription.

Homoeopathy has provided many cases of remarkable cure, often with the employment of only one remedy. We

might assume that in all such cases the patient had a tolerably good constitution, which was affected by one basic factor of disease. Remove the basic factor and the patient returns to a normal level of health. Often enough, however, we have to deal with cases which have been complicated by years of ill-health and divers treatments of the suppressive kind, where the constitution has been seriously impaired and the reactive power of the patient is limited. In such cases it is a difficult matter indeed to sort out guiding symptoms, and equally difficult to decide what remedies to apply. There may indeed be no disease state in the ordinary sense of the word, but gross debility and a general malaise. Some people seem to be permanently 'under the weather', although never really ill! Or again, you have the occasional patient who believes in homoeopathy, but enjoys a fair share of normal health. When not feeling well, he will at times consult his homoeopathic practitioner and expect quick and satisfactory results. But it is not easy to ensure in such cases quick satisfaction by homoeopathic case-taking alone.

Some practitioners have a quite extraordinary aptitude for taking a case on the method laid down by Hahnemann, but such practitioners will always be in a very small, and probably dwindling, minority. To become such as they requires much individual study, intuition and resource, where routine treatment finds no place, and every case requires an entirely new approach. For they know that no two cases are the same, whatever names their particular diseases may have. Moreover such case-taking takes up a lot of time.

Radiesthesia provides a kind of half-way house between the approach of the orthodox homoeopath and the cut-and-dried empiricist, though the radiesthetic practitioner should be much nearer the orthodox homoeopath in both outlook and method. But he does depend to a great extent on routine testing. And he has the great advantage that no remedy should be prescribed by him which does not do good. Certain means are open to him for determining in advance whether a remedy can effect a certain change in the patient, even if it is not a very good remedy for the patient as a whole. But he has also the means of finding

whether a remedy is well indicated and will be of general benefit. The radiesthetic practitioner working on homoeopathic lines will have to pay equal regard to his tests and his knowledge of homoeopathy. Medical radiesthesia and homoeopathy should be regarded as indispensable allies, each to be employed in degree to suit the knowledge and experience of the practitioner.

The medical radiesthetist will first find out what factors are contributing to his patient's ill-health. He will test for infections, the state of the nerves and endocrine glands, the condition of the various organs, vitamin and mineral deficiencies, and so on. With two standard boxes of Turenne witnesses he will be able to test for forty infections, or disease conditions, and forty organs. That is a fairly comprehensive list. He will have available a witness of uric acid, but should also obtain a sample of urea (I favour a 1x potency) from a homoeopathic chemist. Other samples can be added to as necessary. Witnesses of "Great sympathetic" and "Nerves, minor" are included in the Turenne box of witnesses, but samples of liquid adrenalin and acetylcholine might well be added, preferably in $\frac{1}{2}$ -oz. vials. Ampoules of acetylcholine make good witnesses of the parasympathetic nervous system.

I am confining myself in this chapter to pendulum methods of diagnosis and treatment in conjunction with witnesses and samples. Work with radionic instruments will be dealt with later. It cannot be emphasized too strongly that positive reactions, i.e. pendulum readings above 45 cm., may be obtained for an infection, where clinically that infection does not exist. In a grossly toxic case some indication of a number of infections may be obtained, but in such cases most attention will naturally be given to those infections showing a high reading. As the case proceeds, it will become clearer as to what importance should be attached to the lesser infections. A certain amount of screening is implicit in this work, and after treatment an infection may give a higher reading than it did before. Lower positive readings may be related to the toxins of the disease, rather than active viruses or bacteria. Or again, they may be related to 'soil' condition.

It is not unusual in testing a new case to obtain positive reactions for such diseases as syphilis, gonorrhoea, tuberculosis, poliomyelitis, or cancer, which in a toxic patient may be related to hereditary stigmata rather than active pathogenic organisms. Positive reactions for carcinoma are not uncommon in a toxic case, where in fact no clinical condition of cancer exists. All such reactions must, however, be regarded as evidence of disease conditions, which must be dealt with in the course of treatment, either directly or indirectly. That is to say that certain positive reactions may disappear during treatment without specific attention being paid to the particular infection represented by the witness in the prescription. Where there is a clear indication as given by a high positive reaction of one of the basic diseases such as syphilis, gonorrhoea, or tuberculosis, it should, of course, be dealt with specifically—probably with a nosode. Pathogenic organisms such as Streptococcus, Staphylococcus, and bowel organisms like B. Coli (in its invasion state) and the typhoid group, etc., should be treated specifically.

Where it is known that a particular pathogenic organism exists, it is good practice to ensure its elimination. While the orthodox homoeopath, depending purely on homoeopathy, would no doubt eliminate such an organism in the course of treatment, it might be some time before it was in fact eliminated. The radiesthetic approach should be to deal as far as possible, and at once, with all known disease factors. It is not difficult to understand that whereas a particular microbe must have its own specific waveform, it will be highly susceptible to a remedy with the same waveform, or perhaps with a waveform having a harmonic relationship. When bombarded with a powerful radiation similar to its own, it cannot continue to exist in the system. It thus comes about that we can say that there are certain remedies which are specific, or 'near-specific', to certain microbial organisms, and that where a particular organism is present in the patient, it is good practice to employ the appropriate remedy. The efficacy of the remedy can be confirmed on test.

Richards produced a comprehensive list of the various

pathogenic organisms with their appropriate remedies*, and he also gave remedies for the virus equivalents of those organisms. It seems clear that in doing this Richards's meaning of a virus was something different from what is generally implied by the term in medical textbooks. Dr. H. Tomlinson, who took over Richards's practice and made a close study of his work, refers to such viruses in his book† as "dispersed phases of bacteria", which can be manufactured by, and in, the body. Richards's radiesthetic investigations on viruses are not easy to follow, but it may be found when working with witnesses that his virus remedy deals better with a given organism, as represented by the witness, than the bacterial remedy. Dr. Tomlinson gives a list of the bacterial and virus remedies in his book, in addition to the various organs with their remedies, as indicated by tests on the sympathetic and parasympathetic nervous systems.

Supposing that a patient has a B. Coli infection. This will be found by obtaining a reading above 45 cm. on the rule. Let us assume that the reading is 60 cm. Both the bacterial and virus remedy for B. Coli is Granatum, and if we place some Granatum 30 in radiative contact with the patient's specimen, the reading should be much reduced. The endeavour should be to find a remedy which cuts out the waveform of B. Coli and reduces the reading to below 10 cm. There are, of course, other remedies which deal with B. Coli also, such as Cantharides, Ipecacuanha, Ignatia, and Silica, and if, for instance, Silica is clearly wanted to treat a bone condition, it may not be necessary to include Granatum in the prescription. I might mention that I seldom use Granatum myself. If a remedy is found which is a constitutional remedy for the patient, it may be found that it deals very well with a number of disease conditions. The aim should be to use the minimum number of drugs in a prescription, while covering all disease conditions.

It is always good practice to test for urea and uric acid, and for polarity. In a new case of gross toxæmia, urea and uric acid will probably give high readings of 60 cm. or more,

* See *Radiesthesia II* (Medical Society for the Study of Radiesthesia).

† H. Tomlinson, M.B., Ch.B., M.R.C.S., L.R.C.P.: *The Divination of Disease* (Health Science Press), p. 132.

while the polarity may give some such reading as 42-38/70. Provided you have a selection of about 20 or 30 remedies at hand which have a good coverage of the more ordinary infections, a good indication for the prescription is to find which remedies will reduce the P polarity reading (see Chapter 4) from 70 to below 10 cm. The selected remedies can then be placed together in radiative contact with the specimen, with the remedies on one side of the specimen and P (i.e. a sample of acetylcholine) on the other, and if the reading remains at below 10 cm., the remedies may be prescribed together.

A good indication for a remedy is to test it against urea, that is to find if it reduces the reading for urea to below 10 cm. If it does, it can be assumed that it will reduce toxæmia, and probably one or more infections or toxins. If in a badly infected case a remedy as tested reduces urea and also cuts out the P polarity reading, it is very well indicated. For badly infected states 30c remedies may be given twice a day for several days. This may give better results than one or more really high potency administrations (and with less chance of severe reactions), especially if at the same time low potencies are also prescribed to normalize badly affected organs. More often than not liver and intestines will be the organs most needing attention. If, instead of using a homoeopathic remedy for testing against urea, a nosode is employed, and this reduces the pendulum reading, that is an indication for the presence in the patient of the infection represented by the nosode. For instance, if B. Coli 30 reduces the urea reading from 55 cm. to 20 cm. or below, the patient has a B. Coli infection, this being acute if the reading is below 10 cm.

It should be explained that there is the class of patients who are obviously suffering from bacterial or virus infection with gross toxæmia, where the first step is to find out basic causes and reduce the disease conditions. Only later will it be profitable to go closely into symptomatology. On the other hand there are old patients for whom the grosser disease conditions have been eliminated, but in whom certain symptoms remain. At that stage the patient will judge results by the success achieved in the removal of the

symptoms. New patients enjoying average good health may also complain of one or two leading symptoms, and may show good readings on test. In such cases close attention to homoeopathic symptomatology is necessary to obtain results.

Let us take an instance of a patient who had had several treatments, but complained of athlete's foot, red patch on thigh, sore lips, itching spine and general heaviness. She also said that she could not stand heat. It was found on test that this patient had acute parasitical infection. As she could not stand heat, remedies having the symptom "Aggravation by heat" were tested, and it was found that Pulsatilla 6 dealt very effectively with the parasites. Sabadilla and Pulsatilla were prescribed in the sixth potency. The patient said afterwards that she felt very much better and the prescription suited her well. It may be found that one remedy selected on symptomatology will deal with a number of disease conditions, as well as correcting malfunction in certain organs and endocrine glands known to be deficient. If it balances up endocrine glands and the autonomic nerves in addition to other factors, we can assume that the simillimum—or more probably a near-simillimum—has been found. It may well be a constitutional remedy for the patient.

Valuable work has been done with an apparatus known as the Emanometer, which might be described as of radionic type, by which precise indications can be made under laboratory conditions of physiological activities, and of the control of such activities by drugs. With this apparatus homoeopathic remedies have been divided into eleven groups according to their electro-physical properties, and it is claimed that a patient tends to remain constantly in one particular group throughout his life, so long as the normal balance of health is maintained. When the health becomes unbalanced from conditions which are not acute, the tendency is to change into a group of a particular series, while in acute conditions a patient may change to any group without appearing to follow a known law. With minor ailments a patient otherwise in good health will probably be helped most by a remedy within his own group. These investigations do suggest that there is a constitutional factor at

work in the application of homoeopathic principles, and in fact treatment on symptomatology recognizes that persons belong to different constitutional types.

A West End practitioner has employed to good effect a list of remedies selected according to the date of birth of the patient, and the twelve Schüssler biochemic salts have also been related to the twelve signs of the Zodiac. It would be foolish to reject such ideas as being entirely worthless and unscientific. In practice one finds evidence of truth behind such concepts, even if we cannot at present accord to them any scientific basis. Such concepts do, however, tend to confirm the idea of the constitutional remedy and the principle of prescribing on symptomatology.

Dosage and potency are two of the most difficult things to decide in treating a case. They are largely interrelated, for it can be accepted that the higher the potency (and the deeper acting the remedy), the fewer the doses required. The orthodox homoeopath will often give only one dose in a 30c, or higher, potency of a remedy selected on symptoms, and wait to see the reaction. He may get very satisfactory results. But the radiesthetist has certain signposts which afford to him useful data in deciding on potency and dosage. Unless the practitioner is very sure of himself, he will think twice before going to higher potencies than 30 c.

Where there is gross bacterial invasion, high readings for urea and uric acid and gross imbalance of polarity, with certain organs showing bad malfunction, a number of repetitions of 30c doses of the wanted remedy, or remedies, may be called for, given once or twice a day—or in acute cases, three times a day—with, as a concomitant, 3x tissue remedies prescribed to assist the badly affected organs back to normal activity. As treatment proceeds, the changes taking place in polarity, urea and uric acid poisoning, and other disease factors, will be observed. No hard and fast rule can be given. Questions of age, vitality and susceptibility to drug action must all be taken into account. Where polarity is normal, with a reading such as 42-42/42, 6c remedies may be all that is required, or perhaps a few 30c remedies given once a day to deal with one or more disease conditions giving a high reading. Very satisfactory results

can sometimes be obtained by employing one or more carefully selected 3x remedies alone, generally prescribed as to two tablets three times a day before food for from ten to twenty-one days. In fact, with normal polarity, low potency 3x remedies may be all that is required, to match the low energy content of the condition being treated.

Nosodes should always be used sparingly, when at all. Nosodes such as Syphilinum, Bacillinum, Tuberculinum, Carcinosis, Vaccinosis, for instance, can be of cardinal use in treatment, but it is safe practice to prescribe only one dose at a time, given in 30c potency, or higher. It must be again emphasized that such remedies may be called for where the diseases which they represent are not clinically present in the patient. Such administrations can be made with much added confidence, if only given after appropriate radiesthetic tests. Thuja is a sycotic remedy which should always be used with care. It requires few, if any, repetitions, except perhaps where really low potencies are employed. If a nosode is well indicated, it will reduce urea and uric acid to below 10 cm., and also the P polarity reading, where P is higher than S.

With only the saliva specimen on the rule, a remedy which will increase the pendulum balance point (R) by a good margin is well indicated, but it may fail to deal with some important disease factor which can be found through radiesthetic tests. But as such remedies are in fact increasing the vitality of the patient, a simple test of this kind is often useful as indicating whether a remedy constitutional to the patient at the time of test has been found. I consider this method of test as of great value in making a final check of remedies selected for a prescription. Any remedy employed should increase the vitality reading to well over 80 cm.

It might be useful at this point if I gave a list of twenty-four 6c remedies which I have now kept by me for a number of years in a suitable container, as they are among the more important homoeopathic remedies and deal with a variety of disease conditions, and with the nervous system. It must, of course, be very much a matter of opinion as to what would be the twenty-four best remedies to use if one were restricted to that number, but the reader may like to have

my own list, which is naturally a very small proportion of those I actually use. I have placed against the remedies infections or disease conditions with which they are competent to deal, with a few other desiderata.

Aconite. Colds. Catarrh. Tension. Fright and mental agitation.

Aluminium. Aluminium poisoning. B. Welchii. Typhoid group. Neurasthenic states. Tones up intestines.

Anacardium. Heart remedy. Neurasthenia. Irritability. Those who are 'quick off the mark'. Typhoid group.

Arnica. Nerve weakness. *Shock*. Bone remedy. Pus. Stimulator of suprarenal gland.

Argent Nit. Neurotic effects. Spinal symptoms. Weak ligaments.

Arsenic Alb. Influenza. Food poisoning. Prostration and restlessness.

Belladonna. Respiratory tract. Measles. Mumps. Scarlet fever. Tonsillitis. Sunstroke.

Bryonia. Rheumatism, worse from movement. Irritability. Cough. Dry mucous membranes. A liver remedy.

Calc. Carb. A constitutional remedy. Catarrh. T.B. diathesis. Thyroid and parathyroid dysfunction.

Carbo Veg. Indigestion. B. Welchii. Lacks oxygen. Collapse. A valuable antidote to other remedies.

Cinnamon. Influenza and common cold virus. Cancer.

Granatum. B. Coli. Tapeworm.

Crotalus. Streptococcus. Tuberculosis. Septic states.

Elaps Cor. B. Gaertner. Food poisoning.

Ipecacuanha. Dysentery. Nausea. Indigestion. Dyspnoea. Cough. Haemorrhage.

Lycopodium. Liver and bone remedy. B. Morgan. Impotence. More robust mentally than physically.

Natrum Mur. Anaemia. Malaria. B. Gaertner. Cancer. Mental and physical tension. Diabetes. Colds. Often a useful antidote.

Nux Vomica. Cold in head. Nerve tonic. Tones up liver and intestines. Hard irritable persons. Indigestion and constipation.

Opium. Liver remedy. Constipation. Intestinal atony. Shuggish and drowsy. Antidotes lead.

Rhus Tox. B. Morgan. B. Typhosus coli. Rheumatism and lumbago. Better from motion.

Ruta. A rectal remedy. Injuries where bones are involved. Cancer of rectum. Eye-strain.

Silica. Bone remedy. Caries. Syphilis. Cancer. Tetanus. Sclerosinum (thickened tissue). Feels unable to carry on, mentally and physically.

Staphysagria. Sex difficulties and obsessions. Nervous affections with irritability.

Sulphur. The anti-psoric remedy *par excellence*. Strep-tococcus. Dysentery. B. Morgan. Cancer. Boils. Liver remedy. Constipation.

The few notes on these twenty-four remedies may add something to the reader's knowledge of them. Whether they will suit in a particular case must depend on a combination of symptomatological and radiesthetic tests. It might be added that Hepar Sulph. will often be found useful for dealing with staphylococcal infection.

According to Richards, with the stomach giving — — reactions, i.e. the same readings where both are below 50 cm. (see page 23), *Nux Vomica* should suit. In that case *Nux. Vom.*, placed against the specimen, will return both readings to normal. Other remedies, which may be more suitable in a particular case, are given in Dr. Tomlinson's tables*.

The radiesthetist, in trying to find the best remedy to correct a given condition, will want to test the most likely remedies for it. Such remedies will be found in a homoeopathic repertory. Dr. H. Fergie Woods gives in his excellent little book *Essentials of Homoeopathic Prescribing*†, as a cure for mumps, *Baryta carb.*, *Belladonna*, *Carbo veg.*, *Merc.* and *Pulsatilla*. The radiesthetist using this repertory will test these remedies in turn against a witness of mumps and find which cut out the waveform of the disease. The experienced homoeopath, knowing his patient, might conceivably find a better remedy on symptomatology, but we live in a practical world, and through radiesthesia we should be able to ensure a good standard of results. We must consider, in the next chapter, radionic instruments.

* op. cit., pp. 99-127.

† Homoeopathic Publishing Company.

CHAPTER 8

RADIONIC INSTRUMENTS

By radionics we mean the use of instruments employing a radiesthetic technique for the diagnosis and treatment of disease. As already mentioned, Dr. Albert Abrams was the first to use an instrument, employing a radiesthetic technique, to diagnose and treat disease. Work on somewhat similar lines has been carried out in Glasgow by the late Dr. W. E. Boyd. The method depends on the fact that a dull tone is felt on percussion of different areas of the abdomen of a patient, or a subject linked with a witness of the patient, when the patient or subject is facing west, the area in any particular case depending on the disease contracted by the patient.

Dr. Ruth Drown in the United States, and the Delawarr Laboratories in England, have carried out work of major importance in designing compact radionic instruments for diagnosis and for broadcast treatment, whereby an instrument is tuned to the bloodspot of the patient and specific radiations thought by some to be of electro-magnetic type are broadcast through the ether to the patient, wherever he may be.

The scientific basis on which these instruments work is still somewhat obscure, and an explanation of the way in which they operate is best left to their designers and manufacturers. But I have used a Delawarr diagnostic instrument for much of my own work, and it is necessary for me to give a brief description of it. The instrument is about the size of a portable wireless set and opens out like a small suitcase. On the right is a panel with two small circular cavities, or wells, at the top, arranged on either side of a central tuning knob, with two rows of four dials each in the centre of the panel. At the bottom is a seventh dial on the left and a rectangular detector plate on the right. The plate is covered by a rubber strip and reactions are obtained on it by passing



Fig. 6. Orthodox 'stick' method of using Delawarr diagnostic instrument. The instrument shown is arranged for left-handed operation

the fingers of the right hand over the rubber surface, exerting at the same time a slight downward pressure, when the rubber will produce a dragging motion, resisting the movement of the fingers and resulting in a crisp note or sound, known as a 'stick'. The phenomenon is somewhat akin to the percussion note experienced when using the Abrams technique on the abdomen of a patient.

There are two switches on the panel, one for bringing the detector into action, and the second for connecting the area beneath the panel with a second panel on the left side of the instrument. On this second panel are placed what are known as 'Detail Sheets'. Earth and antennae sockets are also provided on the first panel.

To explain how the instrument works, it is best to take an actual example. Suppose that it is required to find out the condition of a patient's liver. We place a bloodspot or saliva sample in one of the two containers at the top of the main panel, according to whether the patient is male or female, and start turning the tuning knob slowly, passing the fingers of the right hand over the rubber detector at the same time with a series of 'brushing' strokes until a 'stick' is obtained. The patient's bloodspot is then tuned into the set. Next we place the rate for liver, i.e. 596, on the appropriate dials. The first dial is employed for disease conditions only, so we begin with dial 2, and turn dials 2, 3 and 4 to the digits 5, 9 and 6 respectively. It should be explained that the first dial is calibrated in tens from 0 to 100, whereas the remaining five dials in the centre of the panel are calibrated from 0 to 10. The seventh dial at the bottom of the panel is calibrated like the first dial from 0 to 100 and gives an indication of the energy content of what is being tested. It is referred to as the 'measuring dial'. The normal intensity of human tissue is found when a stick reaction comes in with the measuring dial at 80. If, then, we gradually turn this dial anti-clockwise from 100 and the liver is functioning normally, a stick will be felt at 80. If the liver is diseased, or in otherwise poor condition, a reading below 80 will be obtained.

It appears that the phenomenon of the stick depends on acoustic wave radiation in the cavity below the panel. The

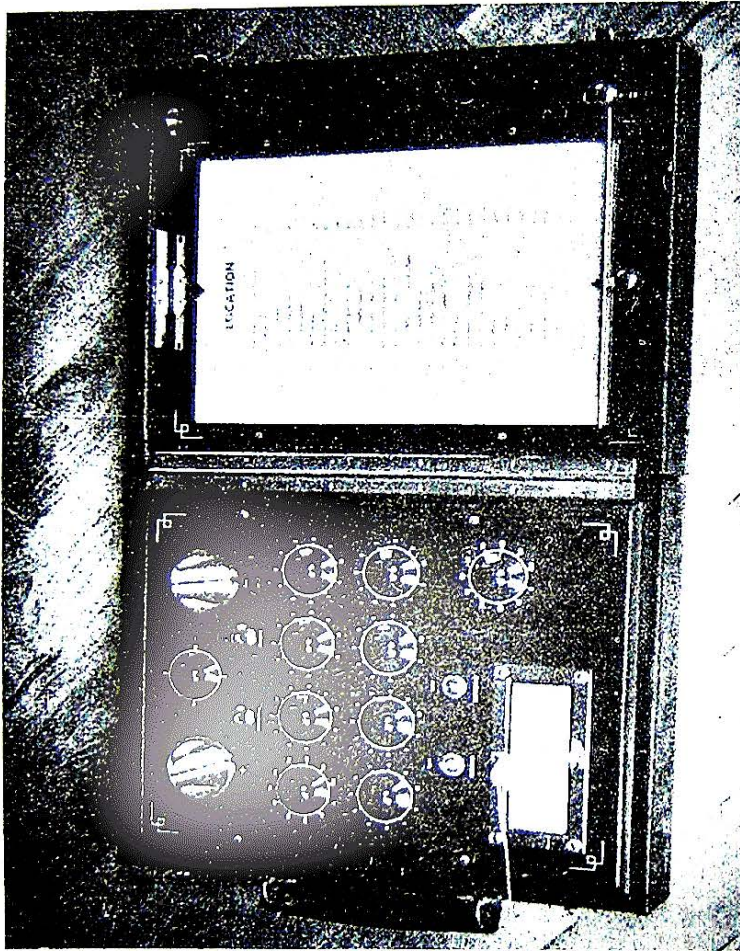


Fig. 7. Delawarr diagnostic instrument (left-handed) showing vial connection to rule. The waveforms generated by this instrument can be used for pendulum work on the rule

bloodspot is tuned in to the cavity, and when the waveform of 'liver' at an intensity agreeing with the condition of the patient's liver occurs, the phenomenon of resonance takes place, signalized by a stick.

Further information can be obtained about the patient's liver by bringing the first dial into action. A reading of 10 on the first dial indicates 'deficiency', 40 indicates 'inflammation' and 70 indicates 'pain'. Thus, if we put up the rate 40.596, i.e. 40 on the first dial followed by 5, 9 and 6 on the next three, this is the rate for 'inflammation of the liver', and if there is inflammation in the patient's organ, a stick will occur with the measuring dial at 0. By turning this dial to 100 and gradually reducing the reading, and at the same time using the detector, a stick occurring at 80 would indicate a high degree of inflammation, i.e. toxæmia, in the patient's liver. A test for 'deficiency of liver', with the rate 10.596 set on the dials, would show the degree of malfunction, or lack of tone, in the organ, while the rate 70.596 would be employed to ascertain if the organ was producing pain. A suitable remedy to disperse this pain, placed in the container opposite that holding the bloodspot, would reduce the reading on the measuring dial as found by a stick reaction to perhaps 20, or below.

In a similar manner we can decide whether the patient has contracted a disease condition, e.g. the common cold virus. The rate for this is 40.652, and if set on the instrument with the measuring dial at 0 and the patient has the infection, a stick will be obtained. The intensity of the infection can be ascertained by turning the measuring dial to 100 and gradually reducing it until a stick is again felt. If the reading is, say, between 60 and 80, the degree of infection is high. We thus have a ready means of discovering the condition of a patient's organs, glands, and other physical attributes, and of any disease condition to which he might be subject.

A standard technique is laid down by the Delawarr Laboratories for the use of their instruments. On the left-hand panel various detail sheets are placed in turn, and a cursor comprising a sliding bar is gradually moved down the panel until it is over an organ, or disease condition, affected in the test. For instance, supposing that the main symptom

of the patient is constipation and it is required to ascertain what organs are contributing to this regarded as a disease condition. The rate for constipation is set on the dials and the cursor run over the Location Sheet, on which is printed a list of the principal organs, respiratory, nervous, circulatory and other systems. As the cursor passes over an organ or system contributing to the constipation, a stick will occur. It can be assumed that there is a psychic factor at work in such a method, but it is safe to say that a psychic factor enters into all radiesthetic work. This aspect of the subject will be considered in some detail later. At the same time it is thought by some well qualified to offer an opinion that there is a physical basis for this use of the cursor and, moreover, in order to obtain satisfactory results, the switch connecting main and secondary panels should be turned to the "On" position, presumably enabling the radiation in the cavity of the main panel to be transferred to the second panel. Each dial on the main panel consists of what is known as a 'resonator'. By turning the dials the acoustic vibration, or waveform, within the cavity is modified. But as previously inferred, an accurate description of this remarkable instrument must be left to those who were responsible for its design.

It is no intention of mine to deal in detail with the standard technique adopted by practitioners employing the Delawarr diagnostic instrument, and in any case different practitioners will use it in accordance with their own requirements and ideas. For myself, I began my radiesthetic work using a rule and have always preferred to keep as much as possible on the physical plane. Those who prefer to work on the psychic level will claim at least 80 per cent. reliability in their results, and the psychic method has the advantage that the putting up of rates on the instrument panel can be largely dispensed with, with a consequential saving of a good deal of time. It should, however, be stated that those who use the diagnostic instrument with the approved technique do so mostly in conjunction with broadcast treatment by means of specially designed broadcast radionic instruments. Those who have gone into the matter and experimented for themselves will be convinced

that treatment of this kind is dependable and effective, provided that the operator has the necessary qualifications and experience.

Most of the work I have carried out myself with radionic instruments has been done in conjunction with a rule, and by putting up the necessary rates for every condition that I wanted to test. This has convinced me of the remarkable accuracy of these instruments in providing waveforms of the various physical and disease conditions it is desired to test. In fact I have used the rule in the same way as if I were employing ordinary samples and witnesses, but instead of putting samples or witnesses at the right-hand end of my rule, I have connected that end to my instrument *via* my vial connection. That is to say that one vial is placed on the 100 cm. mark on the rule, with the other on the detector plate of my instrument. The measuring dial is set at 80.

An advantage of the method is that the range of movement of the pendulum along the rule is very much greater than the range of movement of the measuring dial. Moreover, a more accurate reading can be obtained with the pendulum as found by oscillations across the rule than can be secured by stick reactions, which build up to a maximum at the point of resonance. In other words, the rule method provides a means of obtaining an *exact* measurement, which can be verified by allowing the pendulum to oscillate as long as required across the rule. On the other hand a stick reaction is an almost instantaneous phenomenon, and once it has been made, it can only be confirmed by going through the procedure again.

Let us then see what we can find out about an organ such as the liver, using the combined radionic *cum* rule technique. First, we can put the rate for liver—596—on the instrument, and with the measuring dial at 80, the pendulum balance point will be 50 cm., if the liver is normal. The human specimen will, of course, be placed at 0 cm. on the rule and not on the instrument. The tuning knob and aerial do not come into action. Now we can measure up the liver on sympathetic and parasymphathetic, just as if we were using a liver sample, by putting in turn

liquid adrenalin (S) and acetylcholine (P) in radiative contact with the vial on the rule. Supposing the readings are 47/47. The liver is obviously below strength. With S again placed in radiative contact with the vial (i.e. close to the vial but just off the rule), turn the first dial on the instrument to 40. The pendulum reading may go up to 60 cm. In that case there is inflammation, which may well be indicative of toxæmia, in the liver. We can then give the reading for liver as 47/47-60. If we now turn the first dial to 10, and knowing that liver function is below normal, we will not be surprised to find a reading above 45 cm., say 50 or 55 cm., indicating liver 'deficiency'. Whenever the first dial on the instrument is used, we are checking a 'disease condition', and it will be recalled that when using ordinary samples, a positive reaction for any disease condition was indicated by a reading above 45 cm.

There is one great advantage in using the radionic instrument in conjunction with the rule. Suppose we want to find a remedy to restore liver to normal function. Using samples only, we can place a remedy against the human specimen (i.e. in radiative contact with it) and find if it sends up the pendulum reading from 47 to 50 cm. But if we put up the rate for 'deficiency of liver' on the instrument, a suitable remedy will cut out the waveform generated by this rate altogether and reduce the pendulum reading from 50 or 55 cm. to below 10 cm. That is a very positive and dependable test. Equally, we can find whether the remedy will deal as effectively with the rate for 'inflammation of liver' by cutting out its radiation.

Supposing that a patient has a parasitical infection, we will obtain a positive reaction for 'parasite' (a suitable rate is 80.810), such as 65 cm. If we add to this rate in turn rates of different organs which are suspected of being infected by parasites, we can find out which organs are primarily affected by the readings obtained. For instance, if the test for colon is 85 cm., we know that this organ is badly infected, and it may well be that the seat of the trouble will be there. A remedy that will reduce this reading to below 10 cm. is well indicated for dealing with the parasites. Where through radionics it is known that a tumour exists,

it is particularly useful to be able to get an indication of what organ, or organs, are affected.

The value of radionics is greatly enhanced by the great number of rates which have been worked out, so that we can find out the condition and function of almost all those many items which contribute to the anatomy of the whole man. There is a rate for almost every bone in the body, and lists of rates are provided for arteries, ductless and other glands, ganglia, joints, muscles, nerves, nerve and vein plexuses, secretions, sinuses, vitamins and so on, in addition to those for the various organs and structures. The state of the blood, with indications of its pressure, can be determined, and amongst the most interesting rates available are those for the various brain centres, and for the hypothalamus. The range of anatomical rates is indeed almost embarrassing, and it requires much skill and experience to make the best use of them.

The same could be said of the numerous rates given for the diseases and disease conditions of both mind and body. I will not weary the reader with anything but the shortest adumbration of what is supplied, but in addition to comprehensive lists of pathogenic bacteria and viruses, there are lists of poisons and toxic substances, toxins, and simple and malignant tumours. With a radionic instrument we can make a quick and dependable test for such conditions as gallstones, fibromas, tumours, blood pressure, diabetes, and so on, in addition to abstract conditions such as mania, depression, shock and selfishness! We can see at once the implicit assumption that abstract and mental conditions have their own waveforms, just as material conditions have. Not only can we assess the physical state of the patient, but his psychological condition also.

Rates for all the elements have been worked out, which are useful for determining deficiencies in such things as calcium, phosphorus, iodine, silica and the trace elements. Of the detail sheets, the 'Cause Sheet' is probably the most important. This begins with ten general rates covering ten major causes of imbalance. I think it is always good practice to check up on these general rates when taking a case. The rates cover the following:—

1. Virus
2. Bacteria
3. Poison
4. Allergy
5. Toxins
6. Secretion imbalance
7. Hormone imbalance
8. Mineral imbalance
9. Vitamin imbalance
10. Psychological condition

In addition, the sheet contains rates for toxic condition and septicaemia (invaluable in testing a case), and others relating to major disease conditions covering desiderata such as psoric diseases, asthma, diabetes, tumours, migraine, epilepsy, and so on. Other sheets give rates for the detailed anatomical structures of the various organs and also the structures comprising the central nervous system, reticuloendothelial system, circulatory system, muscular and skeletal systems, as well as the skin, hair and nails.

At the time of writing little has been published of how these rates were acquired, more particularly the abstract rates relating to conditions of the mind. But it is through working with them that one comes to assess their value and to appraise the way in which they can best be used. One can only say that in treating a case of anxiety neurosis, fungus, fracture, arthritis, ulcer, hepatitis, fibrositis, sclerosis, asthma, diabetes, or what-have-you, it is of cardinal benefit to be able to set the rate for the disease on one's instrument.

CHAPTER 9

BROADCAST TREATMENT

A word must be said about broadcast treatment, which is used exclusively by a number of radionic practitioners. This is amongst the newest and most unorthodox of therapies, and it has yet to be seen to what extent it will be accepted in the future. The method was pioneered in the United States, and the Delawarr Laboratories have produced some highly efficient instruments in England. These instruments can be supplied when desired to give alternative direct ultrasonic treatment to the patient, who sits in front of the instrument about three feet away.

For broadcast treatment it does not seem to matter where the patient is, and he may well be on the other side of the world. Usually bloodspots are used and the same specimen can be used indefinitely, both for giving and checking treatment. I have myself used saliva specimens in small vials, and they were fully satisfactory.

The first time I had personal evidence of the efficacy of broadcast treatment was when I was teaching myself how to use my newly acquired diagnostic instrument. In order to strengthen the reactions, I connected the instrument to earth. I placed my saliva specimen in the positive container, and tuned it to the instrument by means of the knob at the top of the main panel. I was putting up rates for various organs and disease conditions to see what reactions I could obtain. The time came when I put up the rate for *B. Typhosus Coli*, when I was astonished to feel almost instantly a strong prickling sensation across the abdomen at about the level of the transverse colon. This idea of broadcasting to myself had never occurred to me, but it is known that a diagnostic instrument can in fact be used for broadcasting, and subsequent tests proved that I had a very real *B. Typhosus Coli* infection.

In treating disease conditions, the Delawarr Laboratories

advise as a rule that the complementary of the disease rate should be put on the instrument, and not the actual disease rate. For instance the actual, or recognition, rate of *B. Typhosus Coli* is 40.448, whereas its complementary rate is 60.662. In other words, in order to find the complementary rate, we subtract the number on the first dial from 100, and each of the digits of the subsequent dials from 10. Nevertheless some practitioners consistently use the recognition rates for broadcast treatment, apart perhaps from a few special cases.

An experience of my own touching on this question of treatment rates may be worth recording. I was trying to help a long-standing case of acute psoriasis. The patient came from Jamaica, and was visiting England for an engineering course. He had previously been over to try and get this most unpleasant condition cleared up, but in spite of visits to specialists and a period spent in one of our leading teaching hospitals, no relief was forthcoming. After having him under my care for a few weeks without achieving any positive results, I had the idea of trying to work out a general anti-infection rate personal to himself. I did this by putting a sample of urea 1x at 100 cm. on my rule, with the patient's specimen at 0 cm., and at the same time setting up the patient's saliva specimens on a broadcast instrument and tuning them. I then slowly turned dial 1 of the instrument first to 10, then to 20, and so on, until I found the number which reduced the reading for urea on the rule to the maximum extent. Having found that number, I repeated this procedure with Nos. 2, 3 and 4 dials, and so on, until the waveform of urea was eliminated. This was rather a lengthy procedure, but the rate that came out was 80.718221, and on examining it I was astonished to find that the first four digits comprised the recognition rate for 'ringworm'. Now the interesting point is that I had previously found that, according to my instrumental tests, ringworm was a basic factor in the case, and I had even treated the patient with the complementary rate for ringworm. This, despite the fact that on his previous visit to England, orthodox tests for ringworm had been negative.

It might be suggested that I had ringworm in mind and

that this affected this particular test. I can only say that such an idea was quite out of my mind and I personally discount it. At any rate this experience led me to believe that there may be a good deal to be said for using the recognition rate for broadcasting. And it did impress upon me the accuracy attained by these radionic instruments. For direct ultrasonic treatment, it is generally accepted that the complementary rate should always be employed.

The possible objection against using the recognition rate in broadcasting is that the disease condition as set on the instrument might conceivably be accentuated in the patient by the stimulus given. But in the case of a pathogenic organism, it may well be that it may be less able to withstand bombardment with its own radiation, i.e. with a radiation of its own waveform, than that of the waveform represented by its complementary rate. With the instrument correctly tuned, I am of the opinion that the stimulus is sufficiently strong and maintained to destroy such organisms, rather than stimulate them to greater activity. Nevertheless it is accepted that there are certain recognition rates which should not be used, and in dealing with a gross condition like 'fibroma', for instance, it would probably always be advisable to use the complementary rate as the disintegrating force.

In order that treatment may be effective, the broadcast instrument must be accurately tuned. There is a standard method of tuning Delawarr instruments in conjunction with bloodspots and aerial, as laid down by the Delawarr Laboratories, the tuning depending on stick reactions on a 'portable detector'. At the same time not everyone interested will find the use of this detector easy, and I am not alone in preferring the pendulum wherever possible in radionic work. Much will depend on what one has been accustomed to in the first place. The skill of some operators using stick reactions is certainly most impressive.

If a practitioner wishes to tune a broadcast instrument with the pendulum, I think he might try the following method. After seeing that all the dials are set at 0 and the aerial at 0 deg., one of the patient's specimens is placed on one of the plates. The pendulum is then held above the

other plate and the specimen rotated until the pendulum gyrates in full circle. Alternatively the pendulum could be held immediately above the specimen. Next, place the second specimen on the second plate and hold the pendulum over it. Rotate the specimen until the pendulum rotates in full circle. The treatment rate is now set on the dials, and the aerial turned clockwise until the pendulum gyrates over it. A position should be found such that the pendulum will gyrate clockwise over both specimens and the aerial. But as exact tuning is required to be fully effective, a third specimen of the patient is placed at 0 cm. on the rule, and the R reading observed with the assistance of the pendulum. It will probably be found to be well above the normal reading of 42 cm. Suppose it is 65 cm. The setting of the aerial should be noted and the aerial then returned to 0 deg. Now turn the aerial again clockwise until the maximum R reading is obtained. The reading should go right up the scale to 100 cm. When that occurs, the instrument is accurately tuned to the patient, wherever he may be. The position of the aerial should only differ by a few degrees from the previous position found.

The employment of these instruments for broadcast treatment, as has already been stated, should not be undertaken without previous instruction. There are several points to note in setting rates on the dials. To give just one example, the complementary rate of 50 for setting on the first dial is not taken as 50, but 90, as 50 is already the recognition rate. 50 is, incidentally, the rate for cancer.

It can be mentioned here that the Delawarr Laboratories have produced some interesting direct treatment colorscope instruments, which are based on the principle of the radiation of fundamental energy by means of chromo modulation, where any band of the visible spectrum may be selected at will. With these instruments, specific cell groups in the body can be stimulated. A radionic camera has also been designed whereby it can be confirmed from a bloodspot of the patient whether such a condition as uterine fibroma, for instance, is present in the patient. In diagnosis a positive reaction for such a condition may come out on the instrument, but the waveform of a disease condition may

occur before the condition has manifested itself on the material plane. Often, I think, it is possible to come to a fairly definite opinion as to whether a gross disease condition does exist clinically in a patient, judged by radionic tests for the condition and other tests covering the general health. But one can by no means always be certain. Quite apart from clinical examination, it may be useful at times to have visual evidence as to whether a suspected disease condition has passed the incipient stage. If it has, checks on treatment can be made by having further photographs taken at later dates.

An advantage of the Delawarr camera over X-ray photography is that the density of tissue adjoining the condition photographed in no way interferes with the results. The method employs the principles of the Delawarr diagnostic instrument, in that the disease rate of the condition to be photographed is set on similar dials in the camera. If the disease is clinically present, i.e. in material form, it will be shown on the photographic plate. If it is not present, the plate will be blank, despite any dense bone or other tissue coming within the field of the camera. For an accurate delineation of the extent of a disease condition, X-rays may give more useful information. The camera has the advantage that the patient need not be present for the photograph to be taken.

Some remarkable experiments have been made with the Delawarr camera, which go far to enforce the importance of the non-material aspects of life. By photographing a potency of Aconite, a picture of the aconite flower has been revealed on the photographic plate. This, incidentally, is proof of the value of the homoeopathic remedy and that the influence of the remedy is retained during potentization, so that a stimulus of specific type depending on the remedy employed is conveyed to the patient.

In addition to broadcasting specific waveforms as set on the dials of a broadcast instrument, it is also possible to broadcast the effects of homoeopathic or other remedies by standing them on one or other of the plates and tuning them to the instrument. Whether a practitioner employs the broadcasting technique regularly or not, it can be useful

as a means of treatment in an emergency. Nevertheless treatment by homoeopathic remedies given orally has been fully tested over the years, and not a few doctors, and others, prefer to restrict themselves to the better established system. Even so, radiesthesia and radionics can greatly assist them in making their diagnosis and in finding the correct remedies, and—where homoeopathic drugs are used—the correct potencies.

Any explanation of the forces involved in broadcast treatment must be left to the experts. It is thought that fundamental energy, probably of a cosmic nature, is at work. If a deficient organ in a patient is treated by this method, the stimulus provided by the waveform of the same organ generated by the instrument and broadcast to the patient *via* the bloodspots or saliva specimens, will bring the patient's organ up to a normal degree of activity, after which a state of equilibrium will be maintained, the two energies of patient's organ and waveform as generated by the instrument being maintained in balance. Thus it is claimed that anything in the nature of an overdose cannot occur. It may well be, however, that there is an optimum time for treatment with any one specific waveform, and I think indications of this may be found by pendulum tests on the rule.

When first treatment is begun with the instrument accurately tuned, the pendulum will show a high R rule reading for the patient. As treatment proceeds this R reading will gradually drop, and will eventually return to a normal of, say, 42 cm. It may well be that at this point the treatment is complete.

General treatment rates have been worked out for dealing with virus, bacterial and other general disease conditions, and one of its most valuable uses to which broadcast treatment can be put is in balancing up the endocrine system. It is, of course, essential that the primary, or basic, factors in a case should be treated, and that as full a radionic analysis as possible should be made before deciding what rates are to be employed. Due regard must be given to psychological factors, and these can be treated specifically where necessary. Such treatment can greatly help to im-

prove, or even cure, physical, in addition to psychological, states, and I remember a practitioner telling me that a troublesome duodenal ulcer (if I remember aright) was greatly helped (if not cured) by treatment with psychological rates alone.

The broadcast technique involves no form of artificial energy of any kind applied from outside. On the other hand mains connections are required for treatments of the 'direct' ultrasonic type. Treatment by broadcast therefore suggests that we are equating in some way a universal source of energy to life forces as manifest in the body.

Since the above was written a book entitled *New Worlds beyond the Atom** has been published, which describes how Mr. George de la Warr started to take an interest in radiations, and how this led to his investigations into radionics and radionic therapy. It was written by Mr. Langston Day in collaboration with Mr. de la Warr and contains some remarkable photographs taken with the Delawarr camera.

* By Langston Day in collaboration with George de la Warr (Vincent Stuart Ltd.).

CHAPTER 10

TREATMENT

IN this chapter I am dealing with treatment by the oral administration of homoeopathic remedies. I have come to the conclusion through a fairly long experience that in the homoeopathic remedy we have one of the most powerful means of controlling physiological activities. And I also believe that if the homoeopathic remedy is to find more general acceptance amongst the medical fraternity, it will be through the ordinary prescription of such remedies, to be taken by the mouth. Advanced radionic techniques must remain the prerogative of the specialist, and in any case it must be some time before their value in therapeutics can be widely assessed. We have a host of witnesses to the value of homoeopathy from which to draw, dating back to the time of Hahnemann.

In what follows the statements and suggestions made are intended as a guide to others interesting themselves in homoeopathy and radiesthesia. Medical radiesthesia is still in its infancy, or at least we can say that it has not passed the early adolescent stage. A difficulty in studying methods is to decide how best one should proceed in taking a case. So many tests are open to the practitioner, and so many ways of testing for remedies. For practical reasons the time factor must be taken into account in making an analysis, and the time that is necessary to acquire all the information desirable must militate against the wider adoption of the method. Nevertheless, where time and trouble are taken, the results often prove very rewarding, and we can hope that as time goes on it will be possible to introduce some simplification in determining all those desiderata necessary for consideration of a case, and something approaching a straightforward routine method of testing. Perhaps the solution will one day be co-operation between doctors and radiesthetists, whereby the radiesthetist is given the status of a medical auxiliary.

Cases which provide a promising field for medical radiesthesia are those of the chronic type, where the level of human activity is below what it should be and the disease in question has some generalized annotation such as rheumatism, rheumatoid arthritis, eczema, psoriasis, asthma, epilepsy, gastritis, or just plain debility. The object must be to try and discover basic imbalances and disease processes at work. Through radiesthesia we have the ability to do this. Sometimes it will be found that there is one primary factor at work, whereas at other times there may be a number of disease factors, often accompanied by gross toxæmia.

Of primary factors in disease today, I believe that one that is most prevalent is aluminium poisoning, and it is an excellent example of where the radiesthetic method can be applied. A test should always be made for aluminium before a prescription is made up, unless it is known for certain that the patient is not absorbing aluminium. For a high intensity of aluminium in the system can render largely abortive any treatment given.

One is always up against difficulties in discussing the incidence of aluminium poisoning through cooking in aluminium pots and pans, and boiling up water in aluminium kettles. First, there are strong trade interests which carry on propaganda in favour of the aluminium cooking utensil, and they are quite right from their point of view. And then the housewife too often finds aluminium saucepans and frying pans easy to keep clean and burnished and more convenient to handle than utensils made in enamel, or metal other than aluminium. Unfortunately the fact remains, as medical radiesthetists know too well, that aluminium is doing much today to undermine the health of the nation.

There are, of course, many people eating food cooked in aluminium who are perfectly well, but often those who are not well are found to be affected by this baneful metal. It seems that aluminium can be destructive of almost any human tissue, and its idiosyncratic action is perhaps the reason why the dangers of using it are not more widely known. Where there is any unhealthy tissue present, it

seems to me that aluminium will fasten on it and become activated, spreading its baneful effect throughout the system. It can attack the gastric system, nerves, skin, intestines and sex organs. It is probably a major factor in almost all duodenal ulcers today. Dr. Tomlinson finds that about 90 per cent. of his duodenal cases are absorbing aluminium and, as he says, this is a surprisingly large percentage. It encourages the growth of *B. Welchii*, a gas-forming organism often prevalent in cases of indigestion, flatulence and constipation, and sometimes produces alternate attacks of constipation and diarrhoea. It can at times produce extreme prostration, whereas at others it can excite the sex organs and exacerbate sexual passions, and I have sometimes wondered whether some of the youths of today who commit sexual crimes, which are all too prevalent, are not being affected by aluminium. Only radiesthetic tests could tell. It is easy to believe that it is so, judging by the symptomatology of Alumina, the oxide of aluminium, which is often employed in potency to eradicate the effects of aluminium poisoning from the system.

It must be understood that it is not just a question of finite particles of aluminium causing the poisoning. It is activation of the metal in the system which causes the trouble, and that is why an activated (i.e. potentized) remedy is required to eliminate it. One could quote a number of cases of poisoning by aluminium affecting the patient in different ways. As bad a case as I have known, and one in which the doctor concerned had given up hope of recovery, was a bronchial asthmatic in which the production of mucus was so excessive that there was constant danger of suffocation. Another was one of paroxysmal tachycardia who, in addition to other treatments, had been kept in hospital under observation without any resolution of the case. A lady once wrote to me complaining of catarrh and indigestion. My analysis showed aluminium poisoning, and I obtained a reaction for influenza. She then told me that she had had injections for influenza and had always used aluminium for cooking in her home. She was wise enough to give up this practice.

Aluminium attacks mucous membranes and is a cause of colds and catarrh. It also reduces vitality and encourages the invasion of pathogenic bacteria; it thus tends to produce toxæmia, especially as it is a potent instigator of constipation and is often associated with hæmorrhoids. A lady in South Africa, who was shortly to have a baby, complained of a tearing, cutting pain in the rectum, which made it sometimes too painful to walk, and she had the impression that it affected the bladder, as the lower abdominal region became most painful. She also reported extreme exhaustion of legs and feet, aching feet and sensation of fulness. Feet always tired. Only relief, lying down. Walking and standing and climbing stairs most exhausting, to legs only. Rest of body quite normal and energetic, but legs seem weighted down.

Aluminium was found and, in starting the prescription, she reported that she felt better almost immediately. Incidentally, acute vitamin D deficiency showed up on test, which fortunately could be corrected before the baby was born. At any rate, everything went off all right. But later it surprised me that she was again affected by aluminium, and I was then told that in the nursing home where this lady had her baby, "everything was aluminium"! She described the home as "the biggest and best in the Union".

Having come up so often against this question of aluminium, one only wishes that all aluminium cooking utensils could be banned in our hospitals and nursing homes. The reverse of such a desirable state of affairs appears too often to be the case.

I have laboured this subject unduly, but I hope not in vain! There must be many people in industry, as in other walks of life, whose efficiency is grossly impaired by the involuntary intake of aluminium, for the metal is used more often than not in restaurants and canteens. I remember years ago when I was being treated for various infections and felt very debilitated. Aluminium poisoning was not at first spotted, but when it was and I obtained the necessary prescription, everything seemed to clear up at once.

If one is allergic to aluminium, I do not think one can ever be as well as one would otherwise be, if one has to take

meals in restaurants where there is aluminium cooking. But one can at least do something to mitigate the effects. Aluminium or Alumina, say in the 30th potency or higher, will always deal with the trouble.

So much, then, for the importance of making as full an analysis as possible, where the missing of one important factor in the patient's condition may render treatment almost useless. And, incidentally, the cure of an aluminium case by Aluminium or Alumina in potency is as good an example as one could find of the homoeopathic principle of cure where "like cures like". Lead poisoning is sometimes found in patients, and this also can produce a pseudo-paralytic state.

Often enough a new case is one of chronic ill-health where the general condition is at fault, and attention is directed to no particular organ. Routine testing is implicit, and as much should be found out about the patient as possible. A long-standing condition, such as that of arthritis, may show little departure from normal polarity, but urea and uric acid may well be high. Tests for 'septicaemia' and 'toxic condition' are always valuable. A chronic case may show no high reading for either, from which we may infer that the patient is careful of his diet and that the condition has passed into the passive stage. On the other hand I have had the opportunity of testing cancer cases sent home as incurable, where all tests for toxæmia gave gross indications, and I am of the opinion that toxæmia is a factor in disease which has not received the recognition it deserves. At the same time crude drugs can so often do little or nothing to reduce general toxæmia. They may deal with a specific disease condition, enabling the vitality of the patient to assert itself and restore normal function. But often enough they suppress symptoms and drive the poisons inwards, only to reappear at some later date in a grosser form of disease. The action of the homoeopathic remedy is from within outwards, and summons the latent forces of the body to eliminate the poisons through the excretory organs and the skin, and it is not unusual in homoeopathic treatment for temporary aggravations to occur at the skin surface.

Tests for the ten general disease conditions as found through the radionic diagnostic instrument (see Chapter 8) give a good idea of what it is necessary to treat. A reading above 45 or 50 cm. for virus or bacterial infection must be followed by specific tests for the offending micro-organisms. The common cold and influenza viruses are often found at all times of the year. Likely remedies to deal with the infections will be tested against the infections to see if they reduce readings to below 10 cm. Often it will be found that one primary remedy, chosen for one infection, will deal effectively with one or more of the others. Much will depend on the experience of the practitioner in determining what drugs to employ in dealing with a particular case. It may be inferred, I think, that some infections are very much secondary to others as found on test. Supposing that five or six remedies in the 80th potency have been put aside as likely to deal with the infections present, it is advisable to test these remedies to make sure that they are treating the patient as a whole. If not, though one of the remedies may deal with a disease condition effectively, it may at the same time devitalize the patient, upset him and impair treatment generally. It may also antidote one or more of the other prescribed remedies.

Every remedy should in a sense, and as far as possible, be 'constitutional' to the patient at the time of its administration, especially where repetitive doses are given. They should add to his vitality and help to balance up all factors, such as nervous system and endocrines. Naturally, in a toxic case, where Cinnamon (for example) seems very much wanted to deal with influenza, Cinnamon will be found well indicated, and it will not be necessary to worry too much about the constitutional aspect of its administration. By freeing the system of a disease condition, it will add to the patient's vitality. Only later will the constitutional aspect become important. Nevertheless it may be found on occasion that Arsenic Alb., another excellent influenza remedy, will suit the patient better and even deal with the influenza virus better. In that case the patient will have the mental symptoms of Arsenic Alb., and be helped better by having it.

It is always good practice to test each remedy separately on urea or uric acid, and where the P polarity is high, to find if it also cuts out the reading and brings the pendulum balance point to below 10 cm. Low potency remedies are very useful, given as a concomitant with those of higher potency, for toning up affected organs and assisting elimination. It is important that these should be well indicated as judged by all tests open to the practitioner.

Supposing that liver and intestines are highly toxic, as they may well be. Dioscorea 8x is often useful in toning up the intestines, and we can test it on, say, colon, in several different ways. If colon gives a reading of 45/55-70 (see page 79), we can find if Dioscorea placed against the specimen will restore the reading for colon measured on S and P to 50 cm. We can also put up the rate for 'inflammation of the colon', 40.27, and find if Dioscorea reduces the reading from 70 cm. to 10 cm., or thereabouts. If it also cuts out urea, it should be well indicated. It can also be tested on the P polarity reading and on the sympathetic nervous system.

If a remedy balances on sympathetic, i.e. if it restores sympathetic to 50 cm., if sympathetic is out of balance, or if it increases its normal reading to above 50 cm. (it will be recalled that a sample of liquid adrenalin can be used for this), it may be considered as well indicated and 'constitutional' to the patient at the time of testing. Dioscorea and Opium in the 3x potency will quite often be found useful in toning up intestines and liver, but they should be tested together before a final decision is made. If the worst organ reading is colon, it is always possible to run through the 30c remedies (if this is the higher potency being used) to see if they reduce toxæmia (i.e. inflammation) in that organ. If a remedy is truly 'constitutional' to the patient, it should do so.

As experience grows, so will it be possible to reduce the number of individual tests and to assess more quickly the basic factors to treat. A picture of the patient may quickly present itself and the intuitive faculties come into play. The constitutional aspect of homoeopathic treatment is well illustrated by the fact that if the remedy, or remedies,

administered are well chosen, *all* disease conditions will show reduction on test. We know then that the patient is being treated as a whole. If the general disease conditions 1-10 all give high readings before the first treatment, these will show reduction after it. But if any one of these readings is now noticeably higher than the others, even though below 45 cm., that is a matter for further investigation. A disease condition is still there.

To take the matter further, if after treatment all readings except that for No. 10 are at 25 cm., but the psychological reading is 40 cm., we can infer that the psychological condition of the patient is not very good and is a factor (of whatever importance) in the case. Remedies which reduce infections and balance endocrines will also reduce the general psychological reading. In this we see the close connection between the workings of the mind and body. Sometimes best results may be obtained by testing on the psychological rate alone, or on one of the specific rates for such states as 'worry', 'despondency', 'selfishness', 'grief', 'jealousy', etc. If 'jealousy' is the basic condition, it should give a comparatively high reading. In just the same way, if the general rate for bacteria is 55 cm., indicating infection, specific micro-organisms present in the patient will also give high readings of perhaps 70 cm., or higher.

If there is pain in a particular organ, or some reason why it requires specific medication, and yet by the tests enumerated that organ does not appear to be very much out of balance, it may be good practice to put up the rate for bacteria followed by the organ in question. In testing for remedies, it is always a good thing to test on as high a disease reading as possible, so that the greatest range for reduction of that reading on test is available.

Owing to our somewhat synthetic way of living, we are all of us subject to some degree of intestinal toxæmia. Suppose we are dealing with a simple case, where one or two infections have to be dealt with by 30c remedies, and all organs show normal balance. It may at the same time be good practice to assist the eliminative organs. Colon may show normal readings as tested on S and P and for inflammation, but if we put up the rate for 'bacteria in colon',

i.e. O.775227, a reading something like 60 cm., or higher, may very possibly occur. That rate can then be used for finding appropriate low potency, or 'tissue', remedies. Alternatively, if the rate for 'faecal toxins' gives a high reading, that could be used instead.

I have tried to put before the reader general principles involved in treating a case radiesthetically, and no doubt he would wish one to give a few examples to illustrate the general method. So much depends on what is in the practitioner's mind when analysing a case that this is not easy, but the attempt must be made. The actual prescription must depend very much on the individual practitioner, but the object is to reduce all imbalances and restore normal function.

I will take first a simple case of a patient complaining of debility. A somewhat dyspeptic patient, he is careful of his diet, eats little meat and is given to flatulence. Definitely of nervous type. Of the general disease conditions, only 1 and 8 gave readings above 45 cm., 'virus infection' being 50 cm. and 'mineral imbalance' 55 cm. Common cold virus and influenza virus gave readings of 55 cm., which are moderately high! Toxic condition 25, septicaemia 25, both very good. Inflammation of mucous membranes 50 cm. Urea 40. Uric acid 20. Polarity 38-35/35, showing low vitality. All organs gave good readings.

Decided to treat with Schüssler remedies and found eight of these in the 30c potency indicated on test. Gave these together as to 5 gtt. b.d. for 14 days. This was anything but an 'orthodox' prescription, but the report of the patient afterwards was very favourable.

The following case, whom I knew well, wanted a quick check-up, and is useful as indicating treatment for a few simple infections. General disease conditions 1-10 gave low readings with virus infection being 20 cm., but bacterial infection gave a *comparatively* high reading of 45 cm. So checked for bacterial infection. Obtained reactions by instrument for:

	Cm.
Gaertner	60
Morgan	60

	Cm.
Proteus	60
Streptococcus haemolyticus	60
" pyogenes	60
Welchii	60
Botulinum	60
Inflammation of pancreas	50
" " kidneys	50
Small intestine	43/45-50
Colon	45/60-65
Blood pressure	Normal

The prescription was Aluminium, Sulphur and Natrum Mur. in the 30th potency, 5 gtt. b.d., a.c., for 7 days. Dioscorea 3x, Sabadilla 3x, M60, 2 of each t.d.s., a.c. Aluminium deals with B. Welchii and was indicated on test. It probably normalized Botulinum also. Sulphur deals with streptococcal infection and B. Morgan. Natrum Mur. deals with B. Proteus. No specific drug was used for B. Gaertner, so presumably this was not required on test. Often Elaps Cor. is required for this. Sabadilla is often useful and well indicated for dealing with a catarrhal condition. In such a case a check for the 30c remedies may be made by placing them against the specimen and seeing if they reduce the general rate for bacteria from 45 to below 10 cm. A good prescription should reduce all general disease rates in this way.

Here is another straightforward case of an elderly but normally fit person:

General disease rates (see p. 81).

1. 85	Aluminium	95
2. 95	Food poisoning	95
3. 95	Septic poisons	55
5. 85	N. Catarrhalis	95
6. 90	Gaertner	95
7. 90	Streptococcus H.	95
8. 50	Streptococcus Py.	95
9. 40	Mycobac. T. B.	95
10. 60		

Inflammation

Colon	90
Liver	90
Heart	90
Arteries	95
Polarity	45-42/42

The patient was evidently rather 'knocked out' by the invasion of pathogenic micro-organisms and the aluminium poisoning, as judged by the polarity reading. I have no record of 'toxaemia', but doubtless it was considerable. The reaction for 'septic poisons' proves that. The readings are quite bad, the bacterial infection no doubt being encouraged by acute food poisoning, combined with acute aluminium poisoning.

The prescription was:

Aluminium	} 30c. 7 gtt. daily for 10 days.
Anacardium	
Calc. carb.	
Elaps cor.	
Hepar sulph.	
Dioscorea 3x	} M60. 2 of each t.d.s., a.c.
Opium 3x	

It will be observed that No. 4 of the general disease conditions was not taken. This is the rate for 'allergy'. If we obtain a reading for a patient of 65 cm. for aluminium, either with a sample of pure aluminium on the rule or its appropriate waveform, acute aluminium poisoning is present. If we now put up the rate 'allergy-aluminium', i.e. 80.43339799, and the reading is something like 90 cm., we can say that the patient is definitely allergic to aluminium.

Uterine fibromas are fairly common in women and surgical interference is not always advised. Provided that the health of the patient is maintained, such a condition may cause no particular inconvenience. But if such a patient is under treatment, it is as well to pay due attention to the fibroma with a view to reducing it if possible, and remedies particularly applicable to fibroma should be tested for

inclusion in the prescription. If 80c remedies are required to deal with infections, at least one of these may well be a fibroma remedy, while this or another fibroma remedy may be prescribed in the 3x potency. This remedy should be tested on urea as well as on 'uterine fibroma', and on the autonomic nervous system to ensure that it is 'constitutional' to the patient and will assist the general condition, in addition to acting on the fibroma. Tumours will, of course, be equally tested for and treated where necessary.

It is interesting that rates are provided for testing blood pressure, there being three rates—for high, low and normal B.P. I am unaware how these rates were obtained, but they are often useful in practice. The case of a patient, whose constitution was well known and who complained of being tired and exhausted, gave very low readings for the ten generalized conditions, the highest being 35 cm. for secretion imbalance. The rate for L.B.P. gave a high reading, while that for H.B.P. gave a low reading. Urea measured 45 and uric acid 90. Bone deficiency was 80 and polarity 45-40/40, indicating very much lowered vitality. Arnica and Lycopodium in the 3x potency, 80 tablets of each, given as to two tablets of each t.d.s., a.c., resulted in considerable benefit as judged by the report received. Arnica stimulates the suprarenal gland, and both Arnica and Lycopodium are bone remedies.

I think that in many cases of genuine nerve depletion, bone will be found to be deficient. Indeed bone and nerves are very closely connected, which is not surprising when one considers that the spinal cord is enclosed in the vertebral canal. It is known that spinal subluxations can affect the nervous system acutely at times. The rate for subluxation is given as 1084. At one time I thought this was an 'abstract' rate, but it is, of course, the rate for 'bone deficiency'. In treating 'nerve' cases, it is often useful to test for bone, spinal cord and, of course, nerves. 'Caries' is another useful rate. Often enough, in cases of neurasthenia or nerve weakness, bone remedies are called for. A spinal luxation can upset bone radiation, with the whole skeletal system affected, and it sometimes knocks out vitamin D. Vitamin D is of potent use in such cases.

In cases of chronic debility it is always advisable to watch the bone condition, for it can be a valuable guide to treatment. In cases when there is some spinal malformation, bone radiation is easily affected, and such cases may be found to be highly reactive to any sort of infection, particularly of the psoric kind. Psora, comprising disease taints, or stigmata, of an hereditary kind, play a much larger role in disease than is generally recognized, and treatment with (for example) T.B. nosodes, or remedies, are often of great benefit.

Tests should always be made for vitamin deficiencies, and where imbalances occur in the endocrine system, it will be found on test that wanted vitamins will tend to restore the endocrines to normal function. Occasionally it may be desirable to provide a specific stimulus to a gland found to be badly deficient on test.

A guide to treatment is to be found at times in measuring deficiencies in the natural salts and other elements. Thus it can be ascertained whether there is balance in such factors as calcium, phosphorus, potassium, silica, iodine, sulphur, and so on. Similar tests can be made for oxygen and water deficiencies. Constitutional remedies such as Calc. Carb., Pulsatilla, Lycopodium and the Schüssler salts are magnificent aids to treatment, when found suitable on test.

It will be understood that while the examples given above refer to cases analysed with a radionic instrument, much the same procedure would be used with the French Turenne witnesses, or other samples containing the radiation of the various organs and micro-organisms. Advantage would, however, be lost in that tests could not be made for 'deficiency' or 'inflammation' of the different organs so as to restore normal function, as can be done with a radionic instrument, and the conditions open to test would be limited.

It may be of some interest to give the following case, where primary infections present were ascertained with nosodes. The state of the organs was found with the assistance of Turenne witnesses. The patient was elderly, active and generally in good health. She complained of skin irritation and wanted a general check-up. Instrumental readings were made for virus infection (85) and bacterial

infection (50). Urea showed 50 cm. and uric acid 58 cm. Instrumental readings for septicaemia and toxic condition were also made, showing 45 and 48 cm. respectively. The nosodes were tested on urea, i.e. each nosode was placed in radiative contact with the specimen in turn and the effect noted on the urea reading. A reduction of urea of any consequence indicated the presence of the pathogenic organism. The organs were tested on sympathetic and parasympathetic, only those affected being recorded. Either Turenne witnesses, or natural animal samples, were used. I should add that 'adrenalin' showed 50 cm. and 'arteriosclerosis' 50, and it was known that the patient had a tendency to H.B.P. The test for aluminium was 48, which I should take as a negative reaction. Nevertheless aluminium may well have been a factor in the skin condition.

<i>Nosodes tested on urea,</i>		<i>Organs tested on S and P</i>	
<i>with urea at 50 cm.</i>			
B. Coli	35	Pylorus	48/52
Catarrh	30	Liver	47/52
Gaertner	25	Caecum	48/52
Proteus	25	Appendix area	47/58
Streptococcus	25	Bladder	48/52
Welchii	25	Arteries	47/47
T.B. Bovinum	25		
Carcinosin	40		
Paratyphoid	30		
Dysentery Co.	35		

The prescription, which was of course the result of my own special methods of testing, turned out as follows:

Aconitum	} 30c. 5 gtt. daily for 10 days
Alumina	
Carbo Veg.	
Crotalus	
Elaps Cor.	
Granatum	
Ipecac.	
Natrum Mur.	
Lycopodium 8x	} M60. 2 of each t.d.s., a.c.
Sabadilla 8x	

Alumina was doubtless included because it was indicated on test, and it is (like Carbo Veg.) antidotal to B. Welchii. Moreover, in a toxic case the intensity of the aluminium radiation is sometimes suppressed, as has been observed previously. It may be advisable to note that the Carcinosin reaction does not mean that the patient has cancer. Such reactions are not uncommon and appear to be related to toxæmia.

With regard to tests for blood pressure, I have occasionally obtained very low readings for both H.B.P. and L.B.P., and also very high ones. This does not seem to make sense, but I think the interpretation is fairly clear. In one case low readings were obtained for the sympathetic and parasympathetic nervous systems and all endocrines, for bone and the organs generally. The ten general disease conditions also gave low readings, the highest being that for psychological condition at 40 cm. Urea and uric acid each measured 5 cm. Both vitamins C and D were very deficient on test and the polarity was 42-30/25.

I have no record of organs other than 'heart', which was 40, but it was obvious that the vitality was so low that all radiations were affected. The actual B.P. readings are not recorded, but as far as my memory serves, they were about 5 cm. From the general picture we can be sure that blood pressure was low, especially as I knew the patient well (she was a near relative of mine), and she was certainly not subject to H.B.P. Any remedies in potency should, of course, restore readings for B.P., high and low, to 45 cm. On this occasion, I remember that I tested 30c remedies on the psychological rate, supplemented by routine checks. Composite vitamin pellets were found to suit and a general neurophosphate tonic prescribed.

In a case I have particularly in mind, where readings for both H.B.P. and L.B.P. were high (i.e. positive), they gave readings of 90. The autonomic nervous system was normal, but the patient was known to be highly nervous, with acute domestic worries. Her doctor found at about this time that her blood pressure was abnormally high. I am not aware as to why the reading for L.B.P. was high (a positive disease indication), but we might infer that both

high readings together showed that the condition was worse than it would have been with more understandable readings, where that for H.B.P. would be high and that for L.B.P. low. At any rate, remedies to treat such a condition should reduce both to a normal of 45 cm., although B.P. rates would not necessarily be used for finding the wanted prescription. Abnormal readings of this kind are very rare.

The rate for normal blood pressure is 4090734. If this is used as an 'organ' rate, I think it should be set on the dials as 0.4090734 (i.e. with the first dial at 0), where the pendulum will balance at 50 cm. for normal reaction. It will probably be found that the pendulum reading will then go up for H.B.P. and down for L.B.P., but I have not used this rate sufficiently to be dogmatic on this point. When used as a disease condition the first dial would naturally be used, and a normal condition will balance at 45 cm. These blood pressure rates have their uses, taken in conjunction with other radiesthetic tests, but they cannot replace objective systolic and diastolic readings obtained with the sphygmomanometer.

It so happens that since writing the above a case came in bearing on this very point. The patient, who is elderly, complained of swollen ankles and, being subject to H.B.P., she considered this a danger sign and wondered if her heart was all right. As it was a simple case and may help in an understanding of the radiesthetic method, I will deal with it fully. All ten general disease conditions except one gave readings of 5-10 cm., the exception being 'toxins', which gave 45. The heart was normal, but the aorta gave readings of 45/45-75. Brain tested on S and P was 45/45. Some of the digestive organs gave readings such as 5/5-5! That kind of reading sometimes occurs when the nervous system is much depleted and general radiations are affected, and in fact this applies in this case to the general disease conditions also. Bone gave 47/47-80, caries 85, urea 30, uric acid 5, while the sympathetic and parasympathetic nervous systems were both 44.

The readings to which I particularly wish to refer are those for blood pressure. They were:

MEDICAL RADIESTHESIA AND RADIONICS 105

H.B.P.	45
L.B.P.	75
Normal B.P. (0.4090734)	55
" " (40.90734)	50

I think we can infer from this that while the blood pressure is still on the high side, H.B.P. is not a factor in the case at the time of test. On the contrary, bearing in mind the reading for L.B.P., the blood pressure is probably below what it generally is for this particular person. As regards treatment, I thought of employing Schüssler salts for toning up the system, and found that four 6c salts restored colon from the low level of 27/27 to normal. But testing on sympathetic eliminated two of these. I suspected that Silica 6 was required, but this was not indicated by the test on colon, although it did not make the reading worse. I found, however, that Silica 6 normalized sympathetic.

I then tested Silica 6 and the other remedies by finding their effect on R, i.e. whether the rule reading of 42 was increased, and to what extent. Silica 6 took the reading up to 80, but the other two remedies were contra-indicated. I then tested for Calcarea Carb. 6, and this and Silica 6 together took the reading up to 100 cm., which was very satisfactory. The prescription was Calc. carb. 6 and Silica 6, two tablets of each t.d.s., a.c., for 10 days. Both remedies are invaluable constitutional remedies, two of the most essential remedies in homoeopathic *Materia Medica* that we have. Even if I have dilated unnecessarily on blood pressure as a condition to test, it may help to show the way in which experiments can be made so as to try and understand better the value and use of the rates which are available to us.

Where psora is implicit in a case, it may be advisable to employ a high potency nosode. Supposing we obtain a reaction for Tuberculinum (Koch) tested, say, with a 30c nosode on urea. There are several T.B. rates provided for instrumental tests, and if all give positive reactions, it may be decided to treat the condition specifically, according to the general picture of the patient at the time. Supposing that Tuberculinum (Koch) 200 reduces all T.B. readings to below 10 cm. That is a good indication for its adminis-

tration. It can also be checked by other tests. But there are very good remedies also available, and the tables of micro-organisms and remedies appearing in Richards's *The Chain of Life** may be found useful in this context. A number of remedies are given to deal with T.B. Koch. With a case actually in mind, supposing the most appropriate remedy is Lycopodium 200. The question we have to decide is whether any low potency remedies should be given with it. As Richards says†: "The powerful blow of a high potency will assist Nature towards balancing things, but the repeated small taps of a low potency are also useful in establishing a more rapid balance."

I should like at this point to refer again to the work being done with the Emanometer by highly skilled medical men, where a remedy in the appropriate potency is found which will balance the vitality of the patient at normal level and deal at the same time with the basic disease condition, whatever it may be, no other potentized remedies being allowed until the action of the remedy has spent itself. The period may vary from a week to a month or more, depending to a great extent on the potency of the remedy. I am not familiar with the technique used in conjunction with Emanometer work, but the method does agree very well with the concepts of classical homoeopathy.

Reverting to the case where Lycopodium 200 has been chosen as the remedy, we can see if there are any 8x remedies which will also deal with the T.B. condition. Actually Lycopodium 8x and Arsenic Alb. 8x were found to do so, and they made a good combination. Now, before the patient has taken a dose of Lycopodium 200, we can place this remedy at 100 cm. on the rule, with the patient's specimen at 0 cm. The pendulum will move right up the scale to a position close to the remedy. For this test no stabilizing sample of S must be used. After the patient has taken the remedy, the pendulum balance point will move to the left, say to about 55 cm. When this balance point has returned to a position close to the remedy during further testing, the action of the remedy will have spent itself. With

* *The Chain of Life* (Health Science Press), p. 148.
 † *op. cit.*, p. 142.

the balance point near the remedy, place Lycopodium 8x and Arsenic Alb. 8x against the specimen. It may be found that the pendulum balance point will move to the left, to say 45 cm. or lower. In that case the 8x remedies will augment the action of the high potency and are complementary to it. On the other hand, any remedy which increases the reading will be antidotal to it. Equally, after the high potency has been given, the reading for urea will be very much reduced, probably to about 5 cm. Any remedy which increases this reading will be antidotal to the high potency. A 200, or higher, potency may not be the correct one, and it may be found that a 30c will reduce the disease condition equally well, with better indications by one or other of the methods of check. There is undoubtedly much to be said for giving a high potency by itself, but low potency remedies may be useful for toning up organs and tissues. Arsenic Alb. is a powerful remedy and has a rapid action, and in my opinion both it and Arsenic Iodatum should be used with caution in low potencies. They are probably best used in the 5x potency, which does not require their classification as 'dangerous drugs'.

With a human specimen at the left-hand end of the rule and some T.B. Koch 30 at the other end, it can be found which remedies can be employed instead of T.B. Koch itself to reduce an infection. If Lycopodium 80 placed against the human specimen brings the pendulum balance point away from a position close to the nosode to a point well to the left of the rule's centre, Lycopodium can supplant T.B. Koch. Further tests should be made to ensure the correct potency. This is a method by which suitable remedies can be found to deal with specific infections, provided that the necessary nosodes are to hand. A well indicated remedy should reduce the reading to below 10 cm.

Psoric conditions of an hereditary nature will be found at the bottom of many chronic cases of ill-health, just as chronic troubles have often been traced back to prophylactic treatment by vaccination or inoculation, perhaps given years previously. The most cursory study of homoeopathic literature will confirm this. Bone is often a condition whose testing brings worthwhile rewards. A poor bone

condition may be induced through the general health and as a result of general infection, or it may have greater significance. Deficient bone radiation can be caused through a spinal luxation, in which case bone remedies can be of great help.

Sometimes it may be found that bone radiation is affected periodically, accompanied by complaints of weakness and debility by the patient. Bone remedies may help as a temporary expedient, but it may soon be evident that something further is required. If the rate for bacterial infection followed by bone (0.775284) is put on the instrument, showing to what extent bone is affected by pathogenic micro-organisms, and a reading is obtained on the right-half of the rule, tests can be made with nosodes to find whether psoric conditions are responsible for the condition. Treatment with one of the tuberculins, or other of the psoric nosodes or remedies, may bring considerable benefit. Spinal affections can be approached in this way.

While the author's method of measurement has been used in discussing treatment with homoeopathic remedies through radiesthesia, the principle is the same if specific tests are made with a diagnostic instrument with the orthodox stick reaction. The aim has been to give practitioners new to radiesthesia a somewhat deeper insight into its potentialities.

CHAPTER 11

TESTING FOR 'DEFICIENCIES'

HAVING covered a number of principles involved in radiesthetic prescribing, we must now discuss a simple rule test for finding 'deficiencies' of homoeopathic drugs in a patient. We saw in the last chapter that if a potentized drug is placed at 100 cm. on the rule with the patient's specimen at 0 cm., and with no sample of S placed against the drug as a stabilizing influence, the pendulum will in all probability balance close to the drug. If the patient begins taking repetitive doses of this drug, the balance point will concurrently move to the left of the rule. Thus, with the pendulum balance point close to the drug at 100 cm., if a remedy placed against the patient's specimen reduces the pendulum reading so that the balance point moves to the left, that remedy is reinforcing the action of the first drug and is complementary to it. Thus we saw in the last chapter how Arsenic Alb. and Lycopodium in the 3x potency might be found to complement the action of Lycopodium 200.

Now, supposing we place Lycopodium 200 at 100 cm. and put our sample of S (liquid adrenalin) in radiative contact with it. This is most easily done by placing S on a rubber block alongside the 100 cm. mark on the rule so that S is not actually on the rule. If Lycopodium 200 is very much wanted by the patient, the pendulum balance point will not be close to the drug: on the contrary, it will be found near the human specimen at about 10 cm. or under. The best way of understanding this is to say that the remedy shows a gross deficiency of Lycopodium 200 in the patient, so that it gives a very low reading. This method of test is, in fact, an excellent one for testing the suitability of remedies. Any remedy giving a low reading when placed at 100 cm., and stabilized by a sample of S, is well indicated for the person under test. In the case just cited, where Lycopodium 200 is

wanted by a patient, if Arsenic Alb. 8x and Lycopodium 8x are truly indicated, they will also give a low reading on the stabilized rule.

It appears that a normal, healthy person contains within his system the radiations of any potentized drug. Or, to put it in another way, if his energy system is normal, he will require no energy from outside to bring his system up to a normal state of activity, so that any test with an energized (i.e. potentized) drug will indicate that his own quantum of energy shows a normal balance when tested against a potentized remedy. What this means in practice is that if a potentized remedy is contra-indicated, it will show a balance point at 50 cm. If the balance point is below 50 cm., his system does not show perfect balance. A remedy which shows a balance point at 10 cm., or under, is very well indicated.

This brings us to a new and precise method of testing for infections with nosodes. Supposing that we place a sample of the nosode B Coli 30 at 100 cm. with the rule stabilized by S in the normal way, if the pendulum balance point is 50 cm., we can say that there is no B. Coli infection present. But if the balance point is 35 or 40 cm., that is a positive reaction for B. Coli. Sometimes, in an acute infection, the balance point may show a very low reading. Supposing it is 15 cm. A remedy placed in radiative contact with the patient's specimen, which will deal satisfactorily with the infection, will restore the pendulum balance point to 50 cm. In my opinion no nosode, of whatever potency, should ever be administered orally unless it shows a deficiency reading of 10 cm., or under. This test should effectively avoid any bad reaction through the wrongful administration of a nosode. More often than not a homoeopathic remedy will be required to deal with an infection tested in this way, which may be of the same or a different potency to that of the nosode used for testing purposes. In testing for infections with nosodes, I consider that nosodes of the 80th potency should ordinarily be employed.

This test for 'deficiencies' can be very useful for deciding which of several indicated remedies should be prescribed. We can illustrate this best by taking an actual case. A child

was found to be in a very poor state of health, with polarity readings of 42-34/34, i.e. with very depleted vitality. No active infections were found, but various organs and ductless glands showed marked lack of function, and the blood was in a very poor condition. 'Mineral imbalance' was indicated and gross deficiencies were found on test for Arsenic, Calcium, Potassium and Silica. Tests, including the R rule reading, confirmed that Arsenic Alb., Calcarea Phos., Kali Phos., Natrum Mur. and Silica were very well indicated in the sixth potency when tested separately, and they all appeared to be wanted. But while Kali Phos. took the rule reading up to 100 cm., Kali Phos. and Natrum Mur. together reduced the reading to about 70 cm. They were obviously incompatible. All these drugs gave 'deficiency' readings of 10 cm., or below.

By placing Natrum Mur. at 100 cm. on the stabilized rule and putting Kali Phos. in radiative contact with the patient's specimen, the pendulum balance point was brought up to 50 cm. On the other hand, Natrum Mur. placed against the specimen would not increase the reading for Kali Phos. to anything like the same extent. Thus Natrum Mur. was redundant and Kali Phos. was able to supplant its action. Equally, Kali Phos. was able to deputize, as it were, for Calcarea Phos. The prescription thus worked out as Arsenic Alb., Kali Phos. and Silica, which together took the R rule reading well up to 100 cm. and possibly beyond it. Each of these three drugs was required, as not one of them was able to supplant the action of either of the other two on test.

It will sometimes be found that the number of remedies in a prescription can be reduced by this method of testing, whereby it is discovered that one remedy will do the work of two, or even more. It may easily be found that a remedy carefully chosen on symptomatology will comprise an effective substitute for other remedies thought to be necessary as a result of tests for infections and other imbalances. A patient complained of a skin affection of the scalp and he had suffered for many years from eye weakness. Radiesthetic tests showed that his general health was excellent (which he himself confirmed), but they showed the presence of measles toxins and general vitamin deficiency.

Sulphur appeared to deal very well with the measles toxins and was well indicated by general tests. Various tests for the eyes and individual eye structures showed lack of function, but no inflammation. Gelsemium, first thought of on symptomatology, was found on test to restore eye function and to be highly suitable generally. It was also found that it complemented Sulphur as a remedy and could be used as a substitute for it. Where two or more nosodes are indicated, it may also be found that one nosode will act for the others as well as for itself. It is then extremely well indicated.

In a case that has been under treatment for some time and positive disease conditions have been satisfactorily disposed of, it is sometimes difficult to know how to proceed with treatment. The patient may complain of lassitude and fatigue, despite readings which show that organs generally are functioning more or less normally and that there are no obvious toxins to be dealt with. Very probably the nervous system will be found to be rather deficient in activity. It may be felt that the patient needs some assistance as provided by homoeopathic remedies and the energy which they provide to the system, but it may not be very clear as to how suitable remedies should be chosen.

In cases such as these, where limited assistance is indicated to maintain vitality and a sense of well-being, it is in my opinion very sound practice to test for the Schüssler salts. These salts increase metabolism, supply wanted energy to the system, and when rightly prescribed will deal effectively with slight imbalances in the system, which may be difficult to pin-point by ordinary radiesthetic tests. For instance, they will tone up the lymphatic system and eliminate catarrhal tendencies, which may be much better dealt with in this way than by prescribing some of the more ordinary homoeopathic drugs suitable for such conditions. As is well known, the Schüssler salts activate processes already present in the body and, when properly prescribed, introduce the very minimum of disturbance to the system.

The practitioner will have to decide what potency to use, which will depend to some extent on his radiesthetic tests. With a balanced polarity in the patient, the potency will

probably be of the order of 6x. At the same time, I think that sensitive patients will often do better with 6c potencies than either 3x or 6x, which are nearer the tissue level and may provide too great a stimulus at that level. If there is a material deficiency of an element like calcium or phosphorus in the system, a 3x remedy may be required, which may be *Calcarea Carb.* or *Phosphorus*.

When a test is made for the Schüssler salts on 'deficiency' readings, it may be found that four or more are indicated. The method already described for the substitution of one drug for another can then prove very useful. To take an example, the indicated drugs may include *Calcarea Fluorica* and *Silica*, but tests may show that *Calcarea Fluorica* will, as it were, take over the duties of *Silica* and provide its needed action, while *Silica* will not reinforce the action of *Calcarea Fluorica* or provide a substitute for it. The prescription may thus resolve itself into one or more remedies, which can be shown to be very well indicated by whatever tests are applied, and which, given together, once or twice a day, may provide just the stimulus that the patient requires to maintain organs, glands and nerves in a good state of balance.

CHAPTER 12

FURTHER NOTES ON TREATMENT

A DIFFICULTY in writing on treatment through radiesthesia and homoeopathy, as we have already seen, is that we must approach the subject from two different angles—those of specific tests and homoeopathic *Materia Medica*. If we identify a pathogenic organism, we can eliminate it by employing a remedy which is specific to that organism, i.e. one which by its frequency of vibration will shatter it. Or we might say that the remedy and organism are in resonance. That, of course, is not homoeopathy. The classical homoeopath would endeavour to find the remedy which had the same symptoms as those of the patient, and if he were successful, we might assume that while the general health of the patient would be very much improved, the particular organism would also be successfully dealt with. At the same time we might recall what Richards once wrote on this subject. "To give a number of remedies in one prescription is rather a horrible heresy to orthodox homoeopaths. I found in practice, however, that unless the specific killers were used, all organisms present were not got rid of".* In point of fact I believe it is virtually impossible to rid a badly infected system of pathogenic organisms with one remedy.

It will be understood by now that finding the correct remedy by orthodox homoeopathy is by no means easy, and that in a complicated case, where a number of disease conditions may supervene, better results may be attained by attending to specific conditions as determined through radiesthetic tests. What I am suggesting is that from the practical point of view, and in order to get the best results, it is a mistake to be too dogmatic in our approach to this difficult subject. Through radiesthesia and the homoeo-

* W. Guyon Richards, M.B. (Cantab.): *Radiesthesia—Medical Dowsing* (booklet), p. 5.

pathic remedy we have a means of dealing certainly with a number of specific conditions, even if the remedy chosen is not always truly homoeopathic to the patient considered as a whole human being. There are times when relief of a particular condition is very much wanted, which may be best dealt with by specific radiesthetic tests.

In radionic work it is an accepted procedure to deal specifically with a given cell group in the body, i.e. to find by radionic tests a remedy, or remedies, which will correct imbalances in a particular organ, for example. In other words, we might say that disease conditions (using the term in its widest sense) are treated one at a time. Again, that is not homoeopathy, but it may have its uses. At the same time I think many will agree that it is desirable to work as far as possible in consonance with homoeopathic law, and that best results will be obtained in the end by doing so. Radiesthesia can certainly help one in finding the simillimum, or at any rate, something approaching it.

With these few remarks, it may be helpful to the student to consider a few specific disease conditions and ways of treating them. What is said should only be regarded as pointers to treatment, for so much depends on the relationship between practitioner and patient, and what knowledge the former already has of the latter. If we take a simple case of influenza, we have a condition which, it would be legitimate to think, could easily be resolved. And yet it often takes a considerable time for a patient to show complete recovery. This is not, I think, because there is any inherent difficulty in dealing with the influenza virus, or even its residual toxins, but because in an attack of influenza other concomitant virus and bacterial organisms have also invaded the system. These equally require to be dealt with. The common cold virus, and such bacteria as *Streptococcus*, *Staphylococcus*, *B. Coli*, one or more of the typhoid group, etc., may easily be found also. Thus to help the patient towards a quick recovery, a composite prescription dealing with the various infections may be called for.

Through his own methods of testing, Richards recommended Cinnamon for *B. Influenza* and Cadmium Sulph. for the corresponding virus, according to his own method of

designating these pathogens. I have found that Cinnamon can be depended on to deal with the influenza viruses A and B as set on a radionic instrument, but Cadmium Sulph. should certainly be thought of where depression in the patient is marked. I remember Richards telling of a patient who had a long and persistent bout of depression following an attack of influenza, which was quickly resolved by the administration of Cadmium Sulph. (almost certainly in high potency). I have found that Cinnamon will also deal with the common cold virus.

Arsenic Alb. is another influenza remedy, although not so often wanted in my opinion as Cinnamon. But the Arsenic Alb. patient will show the prostration and restlessness peculiar to this remedy. Where difficulty is found in choosing between two or more remedies, we can find their effect on the R rule reading, the remedy which produces the highest reading being the best indicated.

There is another simple method of test which I will now describe. Place the patient's specimen on a clean sheet of plain white paper and hold your pendulum over it. Then pick up tightly in the free hand each of the remedies in turn and note the action of the pendulum. A clockwise gyration will probably be your indication for the remedy's suitability. Occasionally one comes across a remedy which will produce a very strong reaction, with the pendulum gyrating with considerable force. That is a very good indication for its administration. In a bad case of influenza, having found suitable remedies in the 6c or some higher potency, it may be desirable to choose by this method one or more 3x remedies to tone up organs and tissues and to reduce toxæmia. Chosen in this way, they should help materially to restore the patient's health and vitality. If the liver is out of order, a liver remedy will probably be required. Tests should be made with a selection of likely remedies. It is always best not to rely on just one method of test in deciding on a prescription, and there may be times when one has to work without a rule.

Many people complain of catarrh, and it seems often that little is done to relieve it. Tests can be made on the rate for inflammation of mucous membranes, followed by that for

any organ affected. Rates are also available for the various air sinuses. Low potency drainage drugs may be useful for clearing up affected organs, with higher potency remedies to deal with infections present. It is known that streptococcal infection can produce catarrhal symptoms. Rates are provided for both acute and chronic catarrh, and as one of these is a five-figure and the other a six-figure rate, they should give a fully accurate indication of the condition. When giving a high reading, these rates can be used for testing remedies. Catarrh often causes neuralgia, and quite often a simple remedy like Aconite is all that is wanted. Where there is deafness through catarrh, tests can be made on the rate for inflammation of the middle ear, and for chronic cases of deafness rates are available for the various anatomical parts of the middle and outer ears. One or other of the Schüssler salts may be useful for reducing inflammation of these structures.

Asthma is another complaint in which the mucous membranes are affected. Where there is much mucus, tests can be made on the rates for 'mucus' and 'pus'. Readings for both should be reduced to 10 cm., or under. In acute bronchial asthma, where there is much mucus, Hydrastis Ø may be required. I once saw remarkable improvement through its administration. In a gross condition the unpotentized pure substance is generally required. According to tests I have made, Hydrastis appears to be a leading remedy for 'pus'.

Neurasthenia is a condition which can be treated with every confidence through radiesthesia and homoeopathy. Tests will be made for the autonomic nervous system, endocrines, brain, and so on. Quite possibly the bone condition will need attention, and in fact one or more bone remedies will in all probability be strongly indicated. It will also be necessary to pay due regard to the psychological state. Remedies such as Anacardium, Aurum, Ignatia and Natrum Mur. can be of potent use in relieving mental stresses. Unfortunately such cases are all too often treated with sedatives, whereas radiesthetic tests would show that certain organs, bone and nerve tissues, etc., require toning up and restoring to normal function. Primary homoeo-

pathic nerve drugs are Arnica and Calc. Carb., which not only tone up the system, but have a soothing effect also. They are both important bone remedies. Like so many 'abstract' conditions, a rate is provided in instrumental work for 'neurasthenia', and this may be useful in making the analysis.

Constipation is a trying, if not necessarily a serious, complaint, and in its treatment special attention should be given to liver and intestines. The trouble may be partly psychological and is something which active, happy children seldom suffer from. As the years go by, we are more likely to be troubled by it. As we are dealing in constipation with a dense mass of material, low potency remedies or even crude drugs are generally required, and I think it is important to find one or more remedies which are truly constitutional to the patient. He may be a Nux Vomica type, or Opium may be his remedy. The complaint has before now been cleared up permanently by one remedy in high potency. If a patient needs something he can use as required as a standby, a proprietary medicine can be tested on the rule like any other remedy. In my opinion trouble of this kind is sometimes closely associated with the spine, and correction of a subluxation may cure the trouble. For this reason Silica is sometimes very effective. In a very obvious case of subluxation, I once found that Silica was highly deficient. Endocrine deficiencies, especially those of the sex and suprarenal glands, may be factors in this complaint.

Ever since I first came in touch with homoeopathy, I have never had reason to question the marvellous efficacy of the homoeopathic remedy, when rightly prescribed. But it has also been borne in on me through fairly long experience that a sound structure is essential in order to effect a cure. Every organ receives its supply of nervous energy from the spine, and impingement of spinal nerves can greatly affect nerve, and therefore organ, function. Most trouble seems to occur, at least in the first instance, in the pelvic region, and the sacroiliac joint is frequently implicated. Slipped discs are a fashionable complaint to suffer from today, but we might hear less of them if straightforward osteopathic lesions were corrected in time.

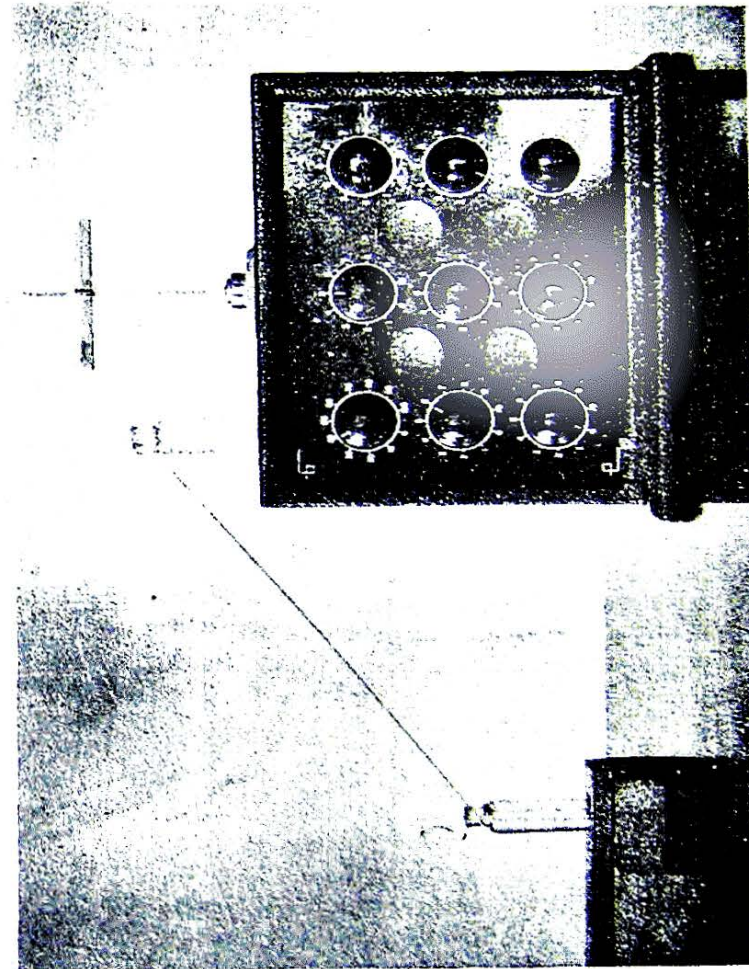


Fig. 8. Broadcast and direct ultrasonic treatment set shown connected to a vial by means of a vial connection. Designed specifically for treatment, this Delawarr instrument can also be used for generating waveforms for pendulum work on the rule

In cases of chronic sacroiliac strains I suggest that X-rays of the lower spine should be taken with the patient in the erect position, so as to check the relative heights of the hip joints and determine whether the length of each leg is the same. With a difference in length of $\frac{1}{4}$ in. or more (which is by no means unusual), permanent relief may be secured by raising the heel of the shoe of the shorter leg, so that the weight of the body is more evenly distributed on both feet. A lift of $\frac{1}{8}$ in. may be all that is necessary. Expert advice must naturally be taken as to the procedure to be adopted. Treatment through homoeopathy is more palliative than curative if major stresses and strains are imposed on the spinal column. The best way of raising the heel is probably to insert a rubber pad in the heel of the shoe. I have known cases where considerable relief was obtained by this method.

In cases where a patient is badly affected by spinal lesions or deformities, the bone condition is bound to be affected and considerable relief can be afforded by prescribing bone remedies. But steps should equally be taken to restore normal function to the spine. I am of the opinion that rectal symptoms are more often than not related to mal-adjustment of the lower spine. In cases of haemorrhoids, it is good practice to test remedies on 'deficiency of rectum' and 'haemorrhoids', and I have found that *Aesculus Hip.* and *Causticum* in the 3x potency are often very well indicated when tested on the latter rate. It may be advisable to give concurrently a rectal remedy in the 6c potency. With haemorrhoids the liver is invariably affected and *Aesculus Hip.* is a well-known liver remedy. It is not without significance that, according to its symptomatology, it is also closely related to the sacroiliac joint.

In considering the correction of osteopathic lesions, it is possible to condition the joint to be corrected beforehand by means of homoeopathic drugs. If this could be done, I believe that often osteopathic treatment would be more effective and satisfactory, and that less force would be required on the part of the osteopath in making the adjustment. Sometimes people can carry out adjustments on their own by utilizing certain quite simple movements,

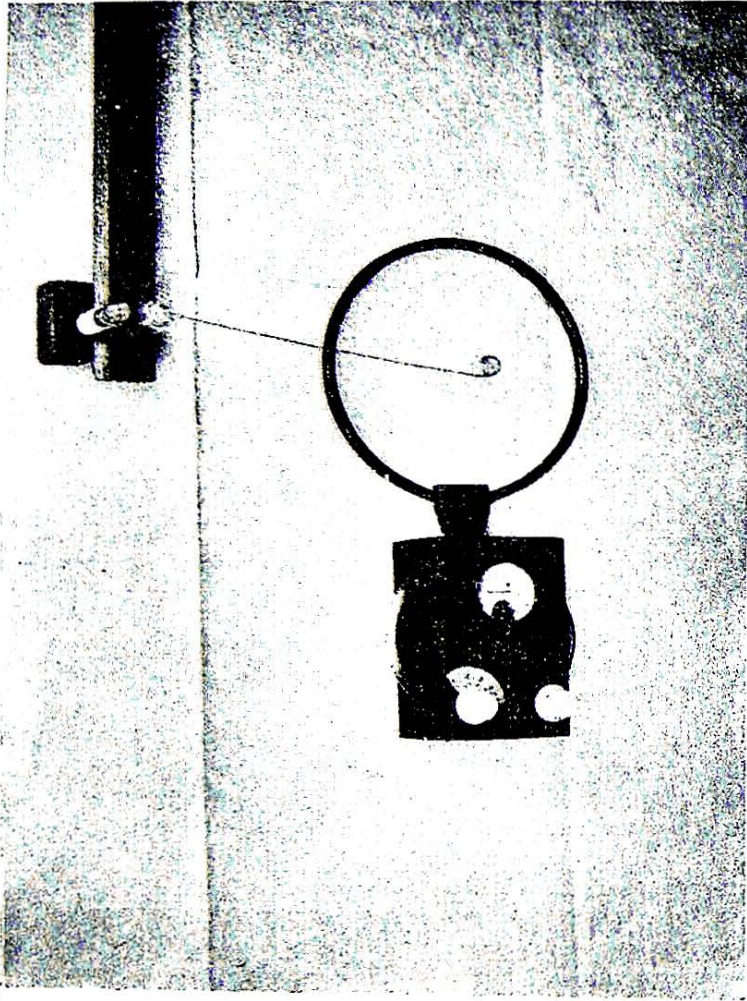


Fig. 9. Maury Compensator positioned to the right of the rule for finding the energy content of various substances (see pp. 59-61). A sample of liquid adrenalin is placed opposite the 100 cm. mark with a view to added precision in measurements

but relief is much more likely if the joint can be conditioned beforehand.

It so happens that I suffered for many years from a recurrent right sacroiliac strain and was often able to correct it myself without outside help. It was through the advice of the late Dr. Dudley d'Auvergne Wright that I found that I could do this. At times, when the right movement is made, the joint will almost 'fall into place' quite naturally. On one occasion quite recently, I had suffered several days from a good deal of discomfort and pain and had been unable to gain relief. My system was free from infection and it was difficult to find any rate on my radionic instrument through which I might test suitable remedies. It occurred to me that it might be worth testing on 'fibrositis of the sacroiliac joint', and I obtained a reading for this of 50 cm. I tested the twelve Schüssler remedies to find which of them, if any, would reduce this reading effectively. Two were selected and taken, and shortly afterwards I tried swinging one leg across the other while lying horizontally, and the joint went back into place quite easily with a loud crack. In my opinion it is much better to get an adjustment with the minimum of applied force whenever this is possible.

It is not unusual, when working with radionic instruments or appropriate witnesses, to obtain a reaction for 'parasites'. In fact high readings may be obtained for both parasites and worms, and it is often not easy to decide the exact condition one is treating. A reaction for worms does not necessarily mean that a gross condition of worms exists, but it may mean that there are some minute organisms present of a worm-like nature, or that the condition of the intestines is favourable to worms. There is indeed a field for investigation to determine to what extent radionic tests can be depended on as having a correspondence with actual clinical conditions. To obtain the waveform of a disease condition does not necessarily mean that the condition exists as a material fact. But it does indicate a condition that should be treated and that there is a diathesis towards that particular disease. Reactions for one or more of the worm conditions do signify an unhealthy intestinal tract and

Cina, the well-known worm remedy, can be very useful for treating it. One case of an elderly and very sick woman who complained of obstinate constipation, despite the taking of aperients, was greatly relieved by Cina. This was prescribed following a positive reaction for worms.

Skin diseases often prove to be intractable, but through radionics and radiesthesia we can generally find pointers on which to work. It is a good plan, in making an analysis of a skin case, to make a list of all rates for skin diseases and to test on these rates. Any rate giving a high reading should be useful for testing remedies. Rates are available, for instance, for acne, blepharitis, dermatitis, felon, lupus, pityriasis, pruritis, scabies, and so on. And incidentally, the practitioner should equally find it useful to make his own list of heart affections, conditions of the lungs, rheumatic conditions, worm conditions, etc., for treating cases to which these are applicable. In all skin affections 'inflammation of skin' is almost sure to give a positive reading. There are also rates for the different skin tissues, such as adipose tissue, corium, capillary vessels, Malpighian layer, pigment, sebaceous and sweat glands. Other rates deal with the lymphatic system.

In all skin cases tests should be made for parasitic infection, fungus and ringworm. These are often involved. The nosode Tuberculinum is a recognized remedy for treating ringworm, and one or other of the nosodes will often be indicated. Psychological factors often play a part in skin affections and in this connection Ignatia might be thought of, being both a skin and 'mental' remedy. To clear up a bad case of psoriasis is by no means easy, but alleviation of the accompanying irritation should soon follow the administration of appropriate remedies. It hardly needs saying that in such cases the practitioner should make sure that there is no aluminium absorption taking place. I recall reading of a bad case of psoriasis which cleared up by giving Alumina in high potency. Only recently I have seen a long-standing case for which various treatments, both allopathic and homoeopathic, had been tried without success, but which gave a high positive reaction for aluminium absorption. It was found on enquiry that aluminium

cooking utensils had always been employed where this person lived.

Most accident cases will require Arnica or Ruta in the course of treatment. Arnica is *the* shock remedy, while Ruta is indicated where injuries to bone or periosteum are concerned. Ruta is a great remedy for bruises. Arnica is a nerve remedy, as we already know, and it stimulates the sympathetic and parasympathetic nervous systems. Injuries to the brain may need Natrum Sulph., while Rhus Tox. is often useful in treating resulting sprains or damaged tendons. Where possible, the remedies should be tested before administration.

I have not infrequently obtained a reaction for poliomyelitis, and incline to the view that this virus is often present in normal healthy tissue. I have found that Sulphur will generally deal with this condition as indicated by instrumental tests. Lathyrus is a recognized remedy for this disease, and is useful as a prophylactic.

It is useful that we have a general rate for 'poisons'. It not infrequently happens that food poisoning gives a positive reaction, when all the other general rates are negative. Tests can be made for poisoning from food, aluminium or lead absorption, drugs, tobacco, polluted water, and so on. There are also rates for ptomaine poisoning and septic poisons, and if the latter is positive, it may be necessary to look for a focal source of this poisoning. In cases of food poisoning, tests can usefully be made for B. Gaertner and B. Typhimurium. Arsenic Alb. and Carbo Veg. are often useful in cases of poisoning, Nux Vom. also.

Coming to growths, cases have often been recorded in homoeopathic literature of cancer cures. In writing on this subject one is treading on delicate ground. But medical practitioners will, I think, agree that treatment of such cases with homoeopathic remedies, or by one or other of the radionic treatment techniques, is a hopeful procedure. Much will depend on the stage reached by the disease and the vitality of the patient. But it is essential as a beginning to treat the gross toxæmia which is all too often present in such cases. The rate for 'pus' may prove useful in this connection. Attention must, of course, be given to the

proper functioning of the digestive organs and of the endocrine glands.

In dealing with the actual tumour, a number of rates are provided for the various kinds of simple and malignant tumours, and rates giving high readings can be employed for finding low-potency drainage drugs to deal with them. Cysts and fibromas can be dealt with in a similar manner. Radiesthesia confirms that some of the intestinal parasites are productive of cysts.

The rheumatic diseases are often difficult to treat, especially as the condition may have been deteriorating over a considerable period of time. But there are a number of remedies which are particularly suited to rheumatic or arthritic conditions, and there are rates for such disease conditions as rheumatism, both chronic and acute, gonorrhoeal rheumatism, rheumatoid arthritis, osteo-arthritis, neuritis, fibrositis, neuralgia, and so on. Proper elimination is essential in all such cases, and attention must be paid to possible luxations in joints and spine. Inflammation of such items as bone, connective tissue, muscles, etc., can be checked.

Practitioners are often asked to advise about diet, and I think few find this an easy question. Rigorous systems of diet have their adherents and can produce good results, and schools of naturopathy have produced drastic systems whereby the diet is limited to just one particular food, such as fruit, milk, and even meat. But it is the everyday diet with which most practitioners are concerned, and it has to be realized that the ideal diet for one person may be very different from that for another, even if they are supposed to be suffering from similar complaints. Also, what suits a person at one time may be poison to him at another.

Personally I have no hard and fast opinions about diet, apart from what is obviously necessary in cases of diabetes, obesity and other physical states, for which it would be foolish not to observe recognized dietetic procedures. Where tissues have undergone gross pathological changes, it would appear only sensible to adopt a light diet, with little or no meat.

From the radiesthetic point of view, there are certain

general tests which may be made to see what suits a patient. I remember the late Dr. Ernest Martin referring to an obvious case of allergy. When attending a case of asthma, which had been going on for something like ten years, he found that cocoa upset all the patient's reactions. Dr. Martin had his own very special method of testing the magnetic field of his patients with his pendulum. When challenged with this, the patient admitted that she had always had a cup of cocoa last thing at night.

It is perhaps not quite so simple to test foodstuffs with the pendulum as potentized remedies, as the radiation of the remedies is very much stronger through the fact of their potentization. Nevertheless dependable tests on foodstuffs can, of course, be made. Probably tests on the R reading would have indicated that cocoa was unsuitable in the case mentioned, and tests could also have been made on the sympathetic nervous system, the respiratory system, and organs generally. One of the best general rule tests is that made on uric acid, while tests can also be made on the rate for 'improper diet'.

Where a specific disease condition exists, tests can be made to see what foods will reduce the condition in the same way that remedies are tested. In any case I would prefer tests on some specific condition, such as 'deficiency of stomach' in a gastric case, rather than a general non-rule pendulum test. For these the Turenne box of food witnesses is useful, but a practitioner can make his own test samples by putting a small quantity of the food in a glass vial and adding alcohol as a preservative. In the case of a duodenal ulcer, it can be easily ascertained as to what foods will add to the inflammation of the affected membranes, and what are particularly suited by actually reducing it on test. A restriction in diet to the latter should be a promising line to take, for the food in that case has a definite 'medicinal' value.

Deficiencies in vitamins, metals and mineral salts can also be checked. If calcium shows a deficiency, it may not necessarily be an actual shortage of calcium by weight that is indicated, but faulty metabolism. Such 'shortages' are often indicated where infection is present. Acute

catarrh can result in a deficiency (as shown on test) of most, if not all, vitamins, but once the catarrh has cleared up, the vitamin factor should soon return to normal, always provided that the diet is balanced. It appears that vitamin activity is suppressed by the infection and concomitant toxæmia. At the same time, a course of vitamins will often help the patient at such times.

It is not unusual under modern conditions, and taking into account the adulterated foods we eat, to find vitamin deficiencies which are in no way connected with infection. These deficiencies should be put right. Calcium in potency can quickly put right indications of calcium deficiency, for it enables the calcium in our food to be properly assimilated. A good indication for the administration of calcium is a low reading for parathyroid gland. Both the thyroid and parathyroid glands may be found giving low readings, which can generally be corrected by Calcium Carb. in potency. In cases of anæmia, tests can be made for iron and hæmoglobin. If salt shows a deficiency on test (or an excess), Natrum Mur. (common salt) in potency may put things right. Natrum Mur. is a known remedy for anæmia. It hardly needs adding that rates for blood, blood platelets, blood sugar, and so on, are provided.

CHAPTER 18

PSYCHISM IN RADIESTHESIA

It is generally accepted amongst radiesthetists that a psychic faculty can be invoked to acquire wanted information. We have seen how a Delawarr diagnostic instrument can be employed, whereby the cursor on the left-hand side of the instrument is slowly run over a printed sheet denoting, for example, possible causes of illness. With a specimen of a patient in the appropriate well and the rate for the disease, or state of the patient, set on the instrument, a stick is obtained by the operator whenever the cursor passes over a disease condition contributing to the disease. We must indeed assume that an intuitive faculty is at work when the instrument is used in this way.

At the same time it is possible to postulate that thought is a matter of vibration and that 'thought-forms' can be represented by waveforms as can be set on the dials, for we know that mental conditions have their own waveforms, and that rates for certain of these have been worked out. It has also been asserted by competent radiesthetists that the human eye is both a receiver and emitter of radiations of the dowsing type, and as the operator watches the names of the different possible causes of the illness passing under the cursor, the suggestion made by the printed word to the mind *via* the eye sets up the thought-form of it inside the brain, so that the resulting waveform resonates with the waveform of the same condition when it exists in the patient, and a stick is made.

This may be a very imperfect explanation of what happens in work of this kind, but simple methods of psychic dowsing are equally valid. Some practitioners can use a list of pathogenic microbes, organs, glands, or whatever it is desired to test, by holding their pendulum over a specimen of the patient and running a pointer, or the first finger of

the free hand, down the list. When the pointer comes to an item which should show a positive reaction, the pendulum will gyrate, or take on some other movement personal to the practitioner. He may indeed start his pendulum gyrating, and the gyration will stop to indicate a positive reaction. It is essential that the practitioner should give his whole mind to the test being made, at the same time ensuring that he has no preconceived idea of what the result will be, and that he is relying on the pendulum reaction. The concentration should not be forced in any way. Rather should the practitioner say to himself: "I am seeking information from somewhere entirely outside my conscious self, so I must leave the answer wholly to the pendulum".

Some people are very good at working on the psychic level, and a few have exceptional powers. Different explanations have been given as to what the psychic mechanism at work is. But it does seem that we have the power of reaching out beyond our conscious mind and ascertaining knowledge unknown to it, or indeed to our subconscious mind either. In his two books *The Secret Science Behind Miracles** and *Secret Science at Work†*, Mr. Max Freedom Long develops a theory, based on the ancient law of the kahunas as to the structure of human personality, which seeks to explain pendulum reactions of this nature. The kahunas, who can still be found in Hawaii as Polynesians of exceptional psychic powers, originally came from North Africa. According to them, the essence of Man comprises three spirits or 'selves', the lower-self, middle-self and higher-self. Memory and feeling are the attributes of the lower-self, reasoning that of the middle-self, while the higher-self is the link between Man and his Maker, or, as we might put it, the "Christ-in-you". The lower-self, under the guidance of the middle-self, can stretch out "aka threads" to any distance, whereby information required by the middle-self can be collected and transmitted to it—that is, to the person we recognize as our true self, or ego. In the same way the lower-self can be trained to indicate by predetermined movements of the pendulum information required by the

* Kosmon Press, Los Angeles, California.

† Huna Research Publications, U.S.A.

middle-self, the questions put generally requiring the answers 'Yes' or 'No'.

Those interested in theories relating to psychic data and the psychic mechanisms at work in our everyday activities will find these two books of considerable interest, and moreover it appears that the kahunas anticipated in certain respects modern psychological precepts and practices. But whether the reader can accept the ideas behind kahuna law or not, the books may help him to believe in certain dowsing practices which have no physical explanation now, nor is it likely that they will be explained as a purely physical phenomenon in the future. Nevertheless, their authenticity cannot be denied by anyone who has studied the subject.

Map dowsing is one of the most interesting phenomena entailing an undoubted psychic factor. A skilled dowser can take an ordnance map and trace with his pendulum the various underground streams which pass through the area represented by the map. He can also find the depth of each stream and give a good idea of the quantity of water passing per hour. A lucid account of map-dowsing is given by Captain Trinder in his book *Dowsing**, so I will say no more about it here. But professional water diviners, who are called upon to survey a district in order to decide the best place to sink a borehole for water, will first go over a map of the district with their pendulum. Having found where water is flowing freely underground, they will go on to the land itself and make a final check on the site. In this way much time and labour are saved, and a great deal of walking about.

Some radiesthetists interested in medicine restrict themselves almost entirely to the psychic method. Sometimes the method is used in conjunction with a diagram. The practitioner will ask various questions, such as which organs are affected, what infections are present, and so on, and he will get a positive pendulum reaction where the organ, or microbe thought of, is implicated. Work of this kind will not commend itself to everyone, but we would be foolish to deride it. Skilled practitioners working on the psychic level

* British Society of Dowzers.

may easily obtain information which others, restricting themselves to physical methods, may miss. There is the advantage that many tests can be quickly made in a comparatively short time, without tiring the practitioner. And reactions can be checked by using witnesses, or setting appropriate rates on a diagnostic instrument.

Sometimes practitioners will begin working on the physical level and then gradually turn over to the psychic. This is a good way of approaching the psychic way of working, because it means that the practitioner has obtained a thorough grounding in his work with—so to speak—both feet on the ground. I remember reading an account of where a foreign radiesthetist travelling in a train on the Continent was able to diagnose accurately what a fellow traveller was suffering from. He was only able to do this by visualizing a box of witnesses of the various microbial diseases he was ordinarily in the habit of using, and thinking of each infection in turn. Guyon Richards once told me that he could never have done what he did with the pendulum without acquiring so much knowledge previously by his more rigorous methods of testing.

On the Continent there is a sharp cleavage between those who practise psychic dowsing and those who prefer to work on a physical basis. Some dowzers believe that all dowsing is essentially psychic, or 'mental', i.e. that it is the mind of the operator which tunes in (as it were) to the information sought. Thus it has been suggested that where samples or witnesses are used, it is the *belief* of the operator that the witness will decide the reaction that actually produces it, and that a small bottle filled with sawdust would be just as good, provided that the operator believed that it was a true sample.

There may be some justification for this view, although I am sure it is a wrong one. An operator *can* get correct results without using a witness, and if he is using a wrong witness and does not know it, he may still get the correct answer. But often enough, he will not. I think it would be true to say that the mind of the dowser plays an essential part in all dowsing, but that the use of rates on instruments, or witnesses, provides a physical basis which may well

originate, confirm and strengthen the dowsing reaction. But the mind must play its part. There is room for much speculation as to the true character of the phenomenon of dowsing. It is widely agreed that a neuro-muscular reflex action takes place, following the appropriate dowsing stimulus. The subject is treated further in Chapter 15. Sometimes information is wanted about a patient which cannot be obtained by using witnesses, and then the psychic method can be resorted to with confidence. For there is a very definite purpose behind the mind of the operator. As a parlour game, psychic dowsing will often bring negligible results.

The question of dosage is one where the psychic method can prove useful. Dosage can, of course, be decided as a matter of experience and in terms of the general state of the patient, but where it is difficult to decide what the dosage should be, psychic dowsing may solve the problem. As to the exact method employed in psychic dowsing, I do not think this matters much. It is the psychic, or mental, control of the operator which will decide the success achieved. But often enough the written word will help the operator to concentrate on the question to be answered, and moreover it is widely contended (more particularly abroad) that a 'word-witness' will in time actually give off the radiation of whatever it represents, i.e. that it will eventually become a true radiesthetic witness.

Supposing that it has been decided to give a patient two remedies in the sixth potency made up in separate tablets, and that guidance is required as to dosage. One way is to put the remedies at the right-hand end of the rule with the patient's specimen at 0 cm., and place a plain postcard at the mid-point of the rule with "Once a day" printed on it by hand in Indian ink. The operator then holds the pendulum over the postcard and waits to see if the pendulum gyrates clockwise (or whatever is his personal reaction), indicating 'Yes'. If the pendulum gyrates anti-clockwise, a postcard with "Twice a day" printed on it can be placed on the rule, and so on. Similarly the number of days during which the tablets should be taken can be equally determined.

The radiesthetist can decide for himself how to go about

getting results by studying methods used by Dr. Tomlinson, as recorded in his book*. Dowsers with a special faculty for working on the psychic, or mental, plane seem able to obtain answers in a surprisingly wide field of experimentation. At the same time, the method should be used with some discretion, especially as regards delving into the future. If the object of the search is unworthy of the operator, the results are likely to be unreliable and misleading.

As to pendulum reactions, a friend of the author's, who is good at psychic dowsing, finds that her pendulum oscillates in front of her in the direction she is facing to indicate 'Yes', and across her from one side to the other to indicate 'No'. If she places a remedy on the table in front of her and holds her pendulum over it, it will oscillate towards and away from her if it suits, and across her if it is bad for her. On the other hand, if the pendulum gyrates clockwise, the remedy is moderately good for her, while if it gyrates anti-clockwise, it is not very good for her. Some practitioners may get reverse indications.

It is sometimes held against dowsing that the whole procedure is unscientific, because everyone has his own reactions and seldom do two people work exactly alike. Often enough dowsers develop their own methods and reactions, and different dowsers have different degrees of skill. At the same time people can be taught to use simple straightforward techniques, so that their reactions are often similar.

The reason why reactions differ in different individuals may be attributed to the fact that some mechanism of the mind is involved, and that this mechanism is not the same in any two persons. We have hardly begun as yet to understand the great potentialities and powers inherent in the mind of Man.

* *The Divination of Disease* (Health Science Press).

CHAPTER 14

HARMFUL EARTH RADIATIONS

IT is necessary at this stage to introduce a subject which some may think has no very important bearing on medical radiesthesia. That radiations of the dowsing type can emerge from under the ground and affect a person's health is indeed something which they would not readily believe, but there is so much written evidence as to the existence of these radiations, more especially in the Continental Press, that some reference must be made to them.

We know that water underground will affect the dowser's neuro-muscular system, and that therefore radiation of some kind is taking place. It is also known that faults and rock fissures will cause similar reactions. There is incontrovertible evidence to show that such reactions can affect health, but this is not necessarily so. So much depends on the combination of factors entering into the production of such radiations, such as the soil, for instance. Harmful earth radiations are often associated with clay. Where water is flowing freely and the soil is not waterlogged, people living above it may be in no way affected. But pockets of ironstone and radioactive material are sometimes found to be productive of the kind of radiations which affect health.

I have neither the knowledge or experience to discuss at any length these earth radiations, or earth rays (as they are often called), but as readers of my book *A Radiesthetic Approach to Health and Homoeopathy** will be aware, I was once badly affected myself by them, so much so that I was forced to leave the house where they occurred. And I could only conclude that they had been undermining my health for a long time.

It is a strange fact that, above an underground stream, dowsing reactions are obtained not only over the stream,

* British Society of Dowsers.

but along parallel lines on each side of the stream, so that the depth of the stream is approximately equal to the distance of either parallel to the centre of the stream. This is known as 'Bishop's Rule'. Actually, each parallel zone of influence has a certain width, and the distance should be taken from the inner side of the zone. These reactions are associated with ionization of the air, or the production of minute electrically charged particles, which may be either atoms or molecules. The degree of ionization taking place can be ascertained by an electrometer, and this instrument has been employed to find out whether a place is affected by inimical earth rays.

The Dutch geologist, Dr. S. W. Tromp, found through numerous experiments* that a normal electrocardiogram of a man standing on a harmful band cannot be recorded, and that at such places the electrical resistance of the skin may be reduced by as much as half. Dr. J. Kopp, a hydrologist of Ebikon, has referred to various experiments† carried out to see what effect, if any, radiations of the dowsing type could have on animals. He tells us that Dr. Jenny, of Aaru, observed a reduction in the breeding of mice and in the size of litters under such conditions, as well as a higher rate of mortality and the more frequent occurrence of cancer. Professor Lautenschlager, of Munich, produced similar results. Further experiments, undertaken in the Pathological Institute of the University of Graz by Professor Beitzke, proved that mice exposed to the harmful bands suffered fourfold greater mortality from cancer than did animals on neutral ground. Moreover, at the Congress of Geopathy held in 1958 at Eberlach on the Neckar, a review of the present position regarding the scientific investigation of the biological effect of "ground influences" was made by geologists, geophysicists and doctors, and a resolution was passed accepting as proved the existence of locality diseases.

Dr. Kopp goes on to describe cases he has attended of animals affected by earth rays, and mentions that in the

* S. W. Tromp: *Psychical Physics* (Elsevier Publishing Company Inc.), ch. 8, p. 328 ff.

† Dr. J. Kopp: "Geophysical Causes of Animal Diseases", *B.S.D.J.*, XII, 85, p. 22, 1954.

last few years he has had much experience of the pathological effects of harmful bands in connection with houses and stables. Horses appear to be singularly sensitive to harmful bands, and in several cases exposure to them has resulted in decomposition of the blood, or blindness, if the bands lie beneath the head. During a search for water for a farmer in Entlebuch, it turned out that a stream passed through the stable under the head of a horse, which shortly afterwards became blind. It is mentioned that when a baby's perambulator was standing over a harmful band, the child began to cry, but quietened down directly the perambulator was moved a metre or so to one side.

Apparatus has been devised to screen places affected by these harmful radiations, and it appears that results have sometimes been satisfactory. The apparatus may be of a type which itself gives out radiations, which interfere with the earth rays. I once had the opportunity of testing one of these apparatuses, and came to the conclusion that its own radiation could be inimical to normal human radiation. Experiments are going on to try and find some material of one kind or another which can be laid down over the floor of an affected room to act as a screen, and this would appear to be the most hopeful line of approach to a difficult subject. Various claims have been made for this or that material, but it would seem that a good deal would depend on the nature of the radiation. If a fairly large area is affected, and not simply a stream band, the problem is to that extent more difficult. Moreover, radiation effects harmful to human beings appear to derive from high-voltage overhead cables and other electrical equipment.

Dr. Kopp records a case where a number of cattle showed unmistakable signs of rheumatism in the joints. He examined the stable himself with a pendulum and detected five harmful bands caused by underground springs, which he marked with blue chalk. The farmer was able to confirm that four of the harmful bands coincided with the places where sickness occurred. A screening apparatus was tried, of a kind which is generally regarded as effective, but "apparently the water pressure was so strong that after a lapse of two months, no satisfactory neutralization of the

pathogenic effect of the harmful bands could be observed". A ditch was then dug and, at about 6 metres depth, a stratum of soft green sandstone was found on which several springs originated, yielding 20 to 35 litres per minute. The water obtained in this way provided a supply for week-end cottages, whereby the considerable cost of the excavation was partly covered. Dr. Kopp goes on: "An enquiry made after a few months revealed a clear improvement in the health of the animals in the stable, so that the removal of the harmful bands had been completely successful". This was confirmed by a veterinary surgeon, who had been treating the animals. It is interesting to note that cats, ants and bees are in no way adversely affected by these so-called harmful bands, and indeed a cat will often curl up over one. But dogs will avoid them whenever possible.

As a successful instance of screening, a case is recorded* of a house believed by its owner to have an extremely depressing and unhealthy effect on its inmates. It was in fact found that their health and spirits returned to normal directly they went away for a short time, even to a neighbouring house only a few hundred yards away, and situated on the same strata and at the same altitude. This I can well believe, for, when affected myself, I felt quite different when I went out to lunch from the house in which I was staying. Mr. J. Cecil Maby, a scientist and consultant on various kinds of dowsing problems, was called in and found that the neighbouring house, which was restful and healthy, was on 'neutral' ground, whereas an underground stream of some 200 g.p.h. of an apparently noxious, and probably radioactive, type ran north and south under one half of the house and the main bedroom, sitting-room and kitchen at a depth of 45 ft. He constructed a small electro-magnetic "neutralizer", which he carefully sited and orientated.

The results appeared to be highly satisfactory. Indeed the owner tested out a doctor friend who was inclined to be sceptical. However, he was persuaded to test his pulse in two positions in the lounge. With the apparatus disconnected, his pulse was 74 in "midstream" and 70 on the edge of the field, and later, with the apparatus working, his

* See *B.S.D.J.*, X, 74, p. 111, 1951.

pulse was 68 in both places. In the owner's letter to Mr. Maby, everyone was reported well.

I well remember the late Dr. Oscar Brunler telling me of the case of a young man in Sussex, who was stretched out stiff on his bed. His parents rang up Dr. Brunler, and it so happened that he had been attending a lecture of the British Society of Dowzers, with the result that he had the possible effects of earth rays very much in mind. He advised the parents to move their son into a room at the other end of the house. This was done, and the lad immediately became quite well. But later, when he returned to his own room, the symptoms returned. Dr. Brunler told me that he visited the house and (as far as I can remember) in company with a field dowser, and they found indications of a fast running stream of considerable flow passing under the son's room. I cannot remember the figure Dr. Brunler gave me as to the flow of water, but it must have been more like a river than a stream. He told me that the lad was a perfect physical specimen.

It is certain that people are not equally affected by these bands of influence. Some people are much more sensitive than others to outside influences. Where the nerves are affected, especially (as I think) where there is a history of spinal trouble, people are very much more likely to be aware that something is wrong. At the same time, if a person of non-sensitive type habitually sleeps, or spends a great part of the day, over a harmful radiation, he may develop one or other chronic complaint, and there is evidence to show that such radiations are often associated with cancer. But malignant disease may not show itself until the prospective victim has lived a good many years in one place.

A pioneer in cancer research from the point of view of radiations was George Lakhovsky, an engineer-physicist, who propounded the view that every living cell is essentially dependent on its nucleus, which is the centre of oscillations and gives off radiations. Through disturbance of the natural frequency of oscillation of the cells by some outside influence, the cells pass from a normal to a diseased state. And he demonstrated the cure of cancer in plants by

surrounding them with an open circuit of wire, thus correcting their external magnetic field, and so normalizing at the same time the oscillations of each individual cell in the plant. A full account of his work is given in *The Secret of Life**. He invented a machine which was known as a "Multiple Wave Oscillator", which was used in various hospitals in France and other countries for the treatment of various organic diseases, including cancer. Case histories of some of those treated are given in an appendix to his book.

From official statistics Lakhovsky concluded that the density of cancer incidence is closely connected with the geological nature of the soil, and he showed how cosmic radiation enters into the problem of harmful earth rays. He found that soils that are especially permeable to radiations such as sand, sandstone, gravel, etc., absorb external radiations to a great depth without giving any reaction on the surface, while soils that are impermeable to such rays, such as clay, marl, alluvial deposits, mineral ores, etc., give rise to secondary radiations, which modify the field of external radiations. It is these impermeable soils which are associated with the highest incidence of cancer.

The question arises as to what steps we can take to detect harmful zones of influence and, if possible, to screen them. Any diviner can detect dowsing zones with rod or pendulum, but it is not so easy to say whether a zone is harmful to animals, human or otherwise, and if so, to what extent. Recently I acquired a plot of land with the intention of building on it. The building line of the house next door was 100 ft. from the road, and I found that at this distance back on my plot the pendulum gave strong reactions, sometimes of a negative (anti-clockwise) type. Although I did not anticipate having to build on this line, I thought I would obtain the advice of two expert field dowzers on the subject before taking matters further. They both agreed that there was a strongly flowing stream crossing the site, where a house would stand if built on the 100 ft. line, but that it was in no way harmful. It flowed freely at a depth of about 40 ft. over a clay bed. The subsoil was sand and gravel and was quite dry.

* William Heinemann [Medical Books] Ltd.

Although I was relieved to have these reports, I was even more glad when permission was granted to build nearer the road and well away from the stream. For being ultra-sensitive to radiations myself, I preferred to avoid the stream altogether. Incidentally, I was interested to find, before the experts were called in, that by map dowsing over a sketch of the plot, I obtained reactions where the stream ran. While not suggesting in the above case that the anti-clockwise gyrations which I obtained with my pendulum indicated that the radiations were harmful (I fully accepted the experts' opinion on this point), I think they may have indicated that, as a personal test, I should be better away from them and on neutral ground. In general, I think that anti-clockwise gyrations do make the ground under test suspect. A good way of testing is to begin with a very short pendulum suspension length, and then gradually allow the cord to slip through the fingers until the pendulum takes up a gyratory motion, either clockwise or anti-clockwise. Over neutral ground the pendulum should *oscillate* with a normal suspension length of 4-6 in.

One would naturally like to have some more precise method of checking sites for building or other purposes, but in this respect I have nothing very definite to offer. Some expert field dowsers, such as my friend Mrs. Norah Millen, seem to know almost by instinct whether radiations are harmful or not. If a person is being affected adversely in a house by earth rays, his polarity will be affected. His polarity can be checked by the operator holding his pendulum over the subject's upturned thumb, with a suspension length of, say, 3-4 in. If the pendulum oscillates over the thumb, the polarity is normal. Another test is for the operator to place a specimen of the subject on the rule and find the R reading. Then the subject should be told to put a short coil of insulated wire in his right-hand side pocket. If the reading is much increased, it shows that the coil is correcting the subject's magnetic field and that he is badly depolarized. Debility of this sort can be caused through general ill-health and not by earth rays, but checking the subject after a suitable interval, first on the site and then away from it, may decide the point.

There is what is known as 'series testing', whereby the number of separate gyrations obtained will indicate whether there is water underground, or of what the subsoil is composed. Series testing is described in standard books on dowsing. Witnesses can equally be employed. If you take a small vial and place it at the zero end of your rule with neck downwards and place a small flat piece of lead on top of the vial, i.e. on its base, you will obtain an R reading. If this is repeated with the vial situated over a band of influence, the rule reading will be reduced. I have sometimes thought that a small instrument constructed on some such principle might be invented for testing these bands. As the radiations come up vertically from the ground, they impinge on the lead plate, which sets up interference inside the vial. This naturally affects the R reading. Tests of this nature are dealt with further in the next chapter.

It is strange to think what events might be due to these influence bands. Recently cases have been reported where motor-car accidents have been attributed to them. It has been said that a sensitive driver with both hands on the wheel may be likened to a dowser holding his divining rod. At the critical point he receives a shock which produces muscular cramp. The whole question has been raised in the German courts. It has also been asserted that meteorological conditions can accentuate such effects. Underground streams crossing each other at different levels are said to be productive of especially bad radiations, and it has been found that lightning will strike at places where strong earth rays exist. They also interfere with the growth of seeds, plants and shrubs.

Dr. Richards once told me that when he first went to live in Highgate, both he and Mrs. Richards had a bad winter with almost constant colds. He afterwards found that a stream passed under his house and directly under their bedroom. It is worth checking up for interferences of this kind, and it is particularly desirable to obtain the services of a competent dowser before building a house.

CHAPTER 15

NEW ASPECTS OF PHYSIOLOGY

IT is generally admitted that the dowsing phenomenon, whereby the divining rod dips or the pendulum gyrates, is caused by a neuro-muscular reaction. That seems a safe assertion. But we are still far from knowing what other factors are at work. In psychic dowsing there is evidently a mental function at work which, it would seem, sets in motion nerve impulses centring in the brain. It may well be, as has been previously stated, that some kind of mental control is implicit in all radiesthetic activities.

In an attempt to throw new light on the physical side of dowsing, Lt.-Colonel C. D. A. Fenwick developed a promising thesis in a lecture to the British Society of Dowsters*. His theory is based on the fact that muscles can be activated by an electric current. During the last ten years or so electro-physiological research has shown that muscular movement of any kind is effected by means of electrical impulses which travel along the nerves, *via* the appropriate nerve centres in the brain, to activate the muscles concerned. This self-generated current is very small, and Colonel Fenwick endeavoured to show that a dowser's muscular reaction can result from the effect on his nervous system of relatively small changes in the electrical potential of his surroundings.

According to an article in the *Electrical Review*†, some medical research teams discovered that the potential difference between the skin of the head and that of some lower part of the body fluctuates within the range of plus 18 millivolts to minus 7 millivolts for normally healthy people. Furthermore, this variation occurs in regular 14-day cycles, i.e. twenty-eight days from peak to peak, and is

* "Are a Dowser's Reactions Attributable to Changes in Potential", *B.S.D.J.*, XII, 85, p. 12, 1954.

† L. R. C. Haward, M.A., B.Sc.: "Bio-electric and Lunar Phenomena", *CLIII*, 5, July 31, 1953.

accompanied by observable changes in personality. When the potential difference is negative people are depressed, but they become correspondingly more cheerful and energetic as it rises towards the positive peak. This behaviour tends to become exaggerated should an individual's potential difference rise above or fall below his normal, giving rise to violent conduct and exhibitions of temper at the upper end of the scale, and sullen morose fits at the lower end. It was also found that mental patients had a much higher potential than that of normal people, from which it was implied that the wider the range of fluctuation, the more unstable the personality, and *vice versa*.

Colonel Fenwick went on to recall experiments carried out regarding changes in the skin potential of dowsters. Dr. S. W. Tromp has shown in his book *Psychical Physics** that changes occur in a dowser's skin potential, not only as he passes through a natural dowsing zone, but also as he passes through an artificial magnetic field. Other experiments to verify those of Dr. Tromp show that changes in skin potential of the order of 100 to 200 millivolts were recorded when a dowser experienced a reaction as he passed over a water vein. As Colonel Fenwick remarked: "When we compare this figure with the natural variation of about 25 millivolts spread over a period of 14 days, it is hardly surprising that the physiologist of the team should consider that such changes 'appear to indicate an extraordinary deviation from the usual' ". It seems reasonable to assume from this, as Colonel Fenwick stated, that if variations in skin potential of less than 25 millivolts can affect the nervous system sufficiently to give rise to observable changes in personality, then variations of upwards of 100 millivolts could affect the neuro-muscular portion sufficiently for a trained dowser to experience a reaction.

The lecturer went on to consider the process by which the necessary change in a dowser's skin potential is brought about. He realized that not only are there several possible causes of changes in skin potential, but that no two human beings are exactly alike, and dowsters do not all react in the same way.

* Elsevier Publishing Company Inc.

It is not possible to follow all the reasoning given by Colonel Fenwick in this stimulating lecture, but he sought to show that a change in a dowser's skin potential indicates a change in the atmospheric potential at that point. From this it follows that every dowsing zone is associated with a change in atmospheric potential, which may take the form of a potential gradient. Can we show that this in fact is the case?

If we consider the geological case, we can say that the difference in potential that exists between the air (positive) and the earth (negative) varies from place to place, and this variation may be due to changes in the underlying geological structure, among other causes. Anyone passing above, say, a mineral lode, etc., would therefore encounter a change in atmospheric potential, and in all probability would move through a potential gradient as he crossed the feature. Similarly, anyone passing through a magnetic field, as in Dr. Tromp's experiment, would be moving through a potential gradient.

According to Dr. Grey Walter, in his book *The Living Brain**, all living tissue generates small voltages, which change dramatically when the tissue is injured. And as Colonel Fenwick says, it seems a reasonable explanation that when the radiesthetist locates, say, the position of an internal tumour, he is registering the existence of a potential difference between the sound and injured tissue. Moreover the article in the *Electrical Review*† tends to corroborate the belief, widely held among dowsers, that certain types of dowsing zone affect all forms of life—human, animal and vegetable. According to the author, electrodes were attached to animals of various types, and also implanted into the trunks of healthy trees, in order to ascertain whether results could be obtained that were comparable with those found to exist in humans. This proved to be the case to the extent that readings taken between electrodes showed the same cyclic variations in potential difference as between those attaching to humans, and all records showed the same phase, i.e. all reached the peaks at the same time.

* Gerald Duckworth & Co.

† op. cit.

It was reading that all forms of life are liable to be adversely affected by abnormalities of skin potential that first attracted Colonel Fenwick's attention, having had personal experience of the effects on humans and trees of noxious earth rays. And speaking of experiments he made with plum trees, where noxious rays were involved, he says: "It does to my mind support the implication that any normal bio-electric state is liable to be disturbed when its natural surface potential differs from that of the surrounding air, and that the attempt to adjust itself to the change in electrical conditions tends to divert physiological functions from their normal process for maintaining life. Where the effort has to be sustained for too long at too great an intensity, a physiological breakdown seems inevitable, the weakest part of the system being the first to suffer".

His theory depends on two assumptions, the validity of which could be tested experimentally:—

1. That the boundary of every dowsing zone is defined by a change in the atmospheric potential.
2. That a change in the atmospheric potential can, given suitable conditions, stimulate the neuro-muscular system of a trained dowser sufficiently, and in such a manner, as to enable him to detect the change.

And he goes on: "Experiments have shown that a dowser's reaction is accompanied by a measurable change in his skin potential. I feel, therefore, that if this change can be related to a measurable change in the atmospheric potential at that point, we should at least be in a position to give a partial explanation that should prove acceptable to many of those who are inclined to be sceptical at present.

"Even if these two assumptions were proved to be correct, it would still be necessary to discover exactly what physiological changes take place. For instance, is the change in the dowser's skin potential cause or effect; does the current act directly on the muscles, or does it stimulate the motor nerve centre in the brain to activate them? Which muscles are affected; all or only those in actual use at the time? I fear a considerable amount of long-term research by a skilled electro-physiologist is required before questions such as these could be answered".

At the beginning, Colonel Fenwick confessed that he did not pretend to have discovered anything new. He had merely sifted the results of other people's work, and tried to set out in an orderly manner what appeared to him to be relevant to the problem. This he certainly succeeded in doing.

I have referred to these investigations at some length, because I think they put very clearly the kind of approach that is required in order to understand better the facts behind dowsing. Moreover they have a good deal of intrinsic interest.

I will now relate an experiment I made in a room where I have worked, across one part of which there is a narrow reaction band. I am of the opinion that there is a flow of water at this particular spot. I placed my rule across the band so that the zero end was well to the left of the band as I faced the rule. I placed upside down at 0 cm. on the rule a cylindrical glass vial approximately $3\frac{1}{2}$ in. long by $\frac{1}{2}$ in. wide. The neck of the vial was only slightly less than the width of the vial, say $\frac{11}{16}$ in., and was left open. On the base of the vial, which was uppermost, I placed a small circular lead plate, which just covered the base. The rule was supported on my table by $1\frac{1}{2}$ in.-high rubber blocks, and there was nothing between the zero point and the table. The reading I obtained on the rule was 48 cm. I then obtained polarity readings with my samples of S and P, which were both 41 cm. At the same time I found with what suspension length of cord a pendulum would begin to gyrate just in front of the rule's zero point. It was 6 in. I then moved the rule in stages to the right, so that the zero point passed across the stream band, and I took further polarity readings. The results were as follows:—

	Polarity readings		Pendulum suspension length in inches
	R	S/P	
1. First position, A.	48—41/41		6
2. $11\frac{1}{2}$ in. to right of A.	41—36/81		6
3. $17\frac{1}{2}$ in. " " "	32—26/22		$7\frac{1}{2}$

	Polarity readings		Pendulum suspension length in inches
	R	S/P	
4. $21\frac{1}{2}$ in. to right of A.	32—20/14		8
5. $24\frac{1}{2}$ in. " " "	40—33/32		$7\frac{1}{2}$
6. $28\frac{1}{2}$ in. " " "	38—38/38		$5\frac{1}{2}$
7. $32\frac{1}{2}$ in. " " "	40—40/40		$5\frac{1}{2}$
8. $36\frac{1}{2}$ in. " " "	40—40/40		$5\frac{1}{2}$

At the last position I obtained a rule reading of 40 cm. with the lead plate removed. As this was the same as the R readings for the last two positions with the plate in place, we can conclude that there was no interference caused by radiation effects at these points. The stream band was covered approximately by positions 3, 4 and 5, which showed the greatest ionization effects as judged by the difference between the R readings (with only the plate-covered vial on the rule) and the S and P polarity readings. It will be clear that these readings do indicate interference of some kind, and I think we may assume that ionization is taking place at these points. It will also be observed that in each case the S polarity reading is greater than the P. Possibly this is a pointer to the kind of ionization taking place.

At stage 1 the zero position on the rule was rather near an end wall. Some slight interference appears to have been taking place there. But as we move to the right of the stream band, interference gradually disappears. From the figures we can say that a comparatively long pendulum cord length to produce a gyration is an indication of radiation effects taking place. No great precision is claimed for this rather crude experiment, but it is suggested that the method does show where a dowsing zone exists. At the same time the pendulum readings on the rule depend on vertical radiations impinging on the plate, and should not be confused with ionization taking place in the atmosphere as a result, for instance, of an electric fire in the room.

Dr. Ernest Martin once demonstrated to me with his pendulum how an electric fire ionized the air in his con-

sulting room. His pendulum would then gyrate instead of oscillate—the reaction for neutral ground. He used to find in his consulting room that one half of the room was affected, bounded by two walls and the diagonal between two corners. This would no doubt be determined by the wiring of the room and the position of the fire. He used to open his window wide at intervals to let in fresh air. Otherwise the ionized air produced a tiring effect.

In our search for new light on dowsing, a word should be said on the varied gifts of psychics. A better understanding of the human psychic forces at work will be gained by a reading of *Man's Latent Power** by Phoebe Payne, a most gifted psychic. In this book the authoress speaks of the etheric, astral, mental and spiritual planes, all of which are very real, if non-material entities, and all may play some part in dowsing. Incidentally, she speaks in this book of what appeared to one sensitive as “the thin brilliant vitality of tin as compared with the dull lifenessness of aluminium”!

Clairsentience is mentioned as a psychic faculty equally with the better known gifts of clairvoyance and clair-audience, and it is said to consist in the subtler bodies registering contacts with that which is proceeding at their own levels so acutely that they record these contacts in the physical brain and nervous system, although only as faint generalized impressions. Psychometry is an increased power of sensing by touch, and the method of contact preferred by the psychometrist (according to the authoress) depends upon his present development and the use made in past lives of his psychic centres. She describes the art of water or metal divining as being a special form of psychometry, and goes on to say that most investigators of this faculty have come to the conclusion that “the movements of the rod are caused by unconscious contractions of the muscles of the diviner's hands and arms, rather than by any power acting directly upon the rod itself . . .” “A receptive and sensitized body will respond at once to the peculiar radiations of water by a change of tension, which is enough to affect the physical muscles”.

* Faber & Faber.

It is impossible to explain map dowsing from a purely physical point of view, and it may well be that the psychic may help us to unravel that and similar problems. For it is to be understood that the psychic non-material world is governed by laws, just as is the physical world. Very possibly a greater awareness of the interplay of psychic forces in our physical activities may open new doors to our understanding of dowsing.

CHAPTER 16

RADIESTHESIA AND ORTHODOX MEDICINE

It is perhaps inevitable that the majority of doctors should view radiesthesia with a good deal of scepticism, if not definite hostility. For it is so alien to everything that they have been taught in the medical schools. And it must indeed be difficult for a highly trained medical man to believe that any good can come out of 'swinging a pendulum', more especially as so many of those practising the cult are laymen! But the unprejudiced enquirer must admit that good results from a therapeutic point of view are often obtained by laymen with no great medical knowledge.

As has not infrequently happened in the past with medical 'inventions' or new therapeutic techniques, the development of the radiesthetic method and the spread of its knowledge has been left largely to laymen, although notable work has also been done by fully qualified medical men. There are two reasons for this. First, medical radiesthesia has grown largely because it can be used in conjunction with the administration of homoeopathic remedies. And homoeopathy is something which the intelligent layman can easily understand, requiring no specialized knowledge for its use in the ordinary run of minor ailments. And second, radiesthesia is a phenomenon in which anyone is capable of taking an interest, and there is much that can be done with it by way of experimentation without any elaborate equipment.

It is largely through the enthusiasm of laymen convinced of its efficacy that homoeopathy has not only held its own, but is spreading today, and the layman has seized on radiesthesia as a new means to better and still more effective prescribing. No one would deny the wonderful progress that has been made in medical science in the present century, and yet it needs no expert to enounce

that it has not found answers to all the diseases and afflictions to which Man is subject, and that treatment of many disease conditions leaves much to be desired. A complete understanding of all factors pertaining to health is the prerogative of no one person, and individuals have often been able to help themselves by adopting unorthodox methods of treatment. It is through radiesthesia that at least some people of indifferent health are managing to carry on with greater success today.

I agree very much with Mr. Cyril Scott who, besides being a composer of wide renown, has done so much to bring homoeopathy and other unorthodox treatments to the notice of the public, that homoeopathy should not be regarded in any way as antagonistic to allopathy and more orthodox methods of treatment. Rather should it be regarded as complementary. And I would say the same of radiesthesia and radionic techniques. But medical radiesthesia is not limited to homoeopathic prescribing, and I for one would like to see a doctor investigate fully its employment in allopathy.

The reader will be aware by now that the practice of radiesthesia varies very much from individual to individual, and that some people take to it more easily than others. A few insist that they can get no sort of dowsing reaction at all. So far, doctors taking up medical radiesthesia mostly employ homoeopathy in their practice, but there is no reason why more orthodox practitioners should not use radiesthesia in their work. At the same time it can often involve much time and trouble in testing for a single case.

It sometimes happens that the doctor's wife becomes proficient in radiesthetic methods, and that she and her husband together make a very good team. I know of several such cases, with the wife employing simple pendulum tests, or more advanced radionic procedures. It does seem that the sensitivity of women is very well suited to work of this kind, and that their powers of intuition can enable them to work well and effectively on the psychic level.

It would seem a natural and normal development if, in the course of time, lay radiesthetists of proved proficiency were admitted to a recognized body of medical auxiliaries,

who could assist doctors in the same way as physiotherapists do. The doctor would then be left free to give the maximum amount of time to clinical examination of his patients, and to fit in the necessary number of patients in his working hours.

A word must be said of diagnosis by radiesthetic or radionic methods vis-à-vis ordinary clinical diagnosis. Clinical diagnosis is often concerned with acute conditions and those which derive from the patient's symptoms. The radiesthetist will endeavour to discover lack of function in any part of the physical economy, however far divorced it appears to be from the symptoms in question. A patient is often said to suffer from a disease, because lack of function in any one direction has reached the stage where acute symptoms appear.

Thus a radiesthetic practitioner, in testing the specimen of an obvious case of myxoedema, should find deficiency in the secretion of the thyroid gland, but he might be more concerned with other imbalances in the system, such as the presence of pathogenic bowel organisms, a subnormal condition of the nervous system, a toxic condition of the liver, general endocrine deficiency, and so on. His tests might indeed show that the calcium metabolism was at fault, or that the iodine supply was inadequate. But if he knew nothing about the patient except what he could learn from his diagnosis, and failed to diagnose 'myxoedema', it might be said that his diagnosis was wrong. That would show a misunderstanding of the radiesthetic method. And it would certainly not mean that the radiesthetic practitioner was unfitted to treat the case. On the contrary, when aware of all the facts concerning the patient, it is more than likely that he would be able to treat him more effectively than if a radiesthetic analysis had never been made, for he would have a more intimate picture of the physiological imbalances in the patient's system as a whole. Underlying causes of the diseased state might be brought to light, treatment of which might be expected to return the endocrine system to normal function.

Dr. T. T. B. Watson, President of the Medical Society for the Study of Radiesthesia, put it very clearly when he

stated* that a medical diagnosis, with all its aids, leads to a diagnosis of a limited kind. It seeks to match a case of illness with the picture of a known disease or syndrome. On the other hand a radiesthetic diagnosis does not mean classifying and naming a case of illness in the usual way. It claims to disclose the underlying forces that are giving rise to the illness. And he continues: "Generally speaking, a radiesthetic diagnosis of a particular case can neither be proved or disproved. It can be judged as likely or unlikely, and its value must be assessed in conjunction with the clinical examination of the patient and all other aids to diagnosis". There is room for both methods of investigation, and they should be thought of as being complementary rather than alternative. Usually patients coming into the hands of those working on radiesthetic or radionic lines have previously undergone orthodox treatments in vain, and it is only when they realize that some more comprehensive form of investigation is required that they are ready to accept the services of unorthodox practitioners.

If we assume—and I think it is a safe assumption—that homoeopathy will never replace allopathy and that there is room for both systems of medicine, it is nevertheless regrettable that homoeopathy is not only *not* taught in the medical schools, but is entirely ignored, or even derided, by them. The advancement in medical science and production of so many new 'wonder drugs' has blinded them to the advantages of a system which is founded on an immutable principle, requiring no constant search for new and more powerful drugs (which are so often discarded after a time as useless, or to make way for something 'better'), and which employs remedies which are reasonable in price and free from toxic properties. It is indeed difficult to say what accumulated harm is done to the nation as a race by mass drugging with barbiturates, injections and other (so often) harmful agents, or what effect these will have upon their children yet to be born, and their children's children.

We have certainly found ways of prolonging life and should be thankful for it, but have we made the people

* T. T. B. Watson, M.D., B.Ch.: *Radiesthesia and Some Associated Phenomena* (Medical Society for the Study of Radiesthesia).

living it more healthy? I often wonder. If we can at times get away from the materialistic aspect of medicine, there is nothing that can purify the bloodstream and restore the natural functions of the body more effectively than a carefully prescribed course of homoeopathy. Moreover, such a course can affect the patient on the mental level by bringing psychosomatic forces of a deeply healing nature into play.

One major stumbling block to a true appraisalment by the medical profession of the homoeopathic school has always been the employment of the infinitesimal dose. It could not believe that the minute dose could have any worthwhile action, little realizing the value of potentization. After what has already been written, it is unnecessary to labour the falsity of its view, but researches of a highly advanced character carried out by Dr. W. E. Boyd at the Boyd Medical Research Trust Institute, Glasgow, should convince the most hardened medical sceptic of the wrongness of his attitude to homoeopathy. An account of recent work on the activity of high potencies was presented by Dr. Boyd to the Scottish Branch of the Faculty of Homoeopathy on March 16, 1954*.

Post-graduate courses in homoeopathy are available for qualified medical practitioners lasting at least one year, upon successful completion of which the candidate is admitted to membership of the Faculty of Homoeopathy. The chief teaching centre in Britain is the Royal London Homoeopathic Hospital. If all medical students were given a grounding in homoeopathy, however brief, they would be more likely to consider, later, qualification for the Faculty of Homoeopathy. It is to be hoped that the time will come when radiesthesia and radionics will find a place in the Faculty's curriculum.

While comparatively few medical students can be expected to go to the expense of adding another year to their training, a grounding in homoeopathy at the medical schools would enable them at least to take an intelligent

* W. E. Boyd, M.A., M.D., M.Brit.I.R.E.: "Biochemical and Biological Evidence of the Activity of High Potencies", *British Homoeopathic Journal*, XLIV, 1, January, 1954.

interest in it, which might develop into the employment of homoeopathy in their practice, even if to a limited extent. Some knowledge of radiesthesia would help them materially to make their homoeopathic prescribing effective, and to avoid in some of their cases entirely negative results, which are the inevitable stepping stones to competency for so many budding homoeopaths. To employ homoeopathy and radiesthesia in this way would not be easy, but it might prove very much worth while, and not least to their patients.

In a letter to the Press on July 28, 1954*, Mr. A. L. Wagland, chairman of the British Homoeopathic Association, mentioned that there were on the market no fewer than ninety-eight distinct brands of various barbiturates. And he pointed out that those in close touch with these matters reported that addiction to the barbiturate group is a growing problem, and that it is the mental changes accompanying barbiturate poisoning which really cause the greatest concern. "Despite all our modern drugs, gadgets, laboratories and techniques, the cost of the Health Service continues to mount. The hospitals are overcrowded. Sickness in one aspect or another provides an ever-growing drain on the national economy".

It is time indeed that homoeopathy were given the chance to restore the health and vitality of the people. Much is being attempted towards this end by the Faculty of Homoeopathy, and beside it may be mentioned the devoted work carried on by members of the Medical Society for the Study of Radiesthesia who, though small in numbers, make up for lack in numbers by their enthusiasm. Let us hope that their influence amongst their professional colleagues will be an ever widening one.

* *Daily Telegraph*.

CHAPTER 17

PRACTITIONER AND PATIENT

THE practitioner working on radiesthetic or radionic lines is at a disadvantage vis-à-vis his patients in that so often they are not familiar with the method employed, and more often than not they expect a resolution of their symptoms in a very short space of time. In orthodox treatments drugs are used which may ease pain and reduce symptoms without getting down to fundamental causes. The time may come when further amelioration does not occur and the case is diagnosed as incurable. If the symptoms do not clear up after the patient has undergone one or more 'standard', or conventional, treatments, he may be told that he is a chronic case and that nothing further can be done for him.

The orthodox practitioner has one great advantage over the unorthodox, which is that as a rule the patient has very much more confidence in him—at least at first—and is prepared to give his treatment a fairly long trial. If the treatment is unsuccessful, he may be induced to see what unorthodox treatment will do, but equally he may have little confidence in it, and may stop treatment before it can be seen whether it can produce either amelioration or cure.

As a rule patients who consult unorthodox practitioners do so in the first instance because they suffer from some illness which orthodox methods have failed to cure. After perhaps one or more years of ineffectual treatment, they are naturally despondent, and will grasp at any new treatment, rather as a drowning man will seize a lifebuoy that has come within his reach. But in their hearts they have little faith in the treatment, and are all too ready to refuse to give it a fair trial. This is equally unsatisfactory to practitioner and patient.

The endeavour of the radiesthetist, or radionic consultant, is to make such a full analysis of his patient that he will perceive, and be able to treat, basic disease con-

MEDICAL RADIESTHESIA AND RADIONICS 155

ons affecting the case. He realizes that to treat one part of the body without treating the whole is a fallacy, and that a return to the fullest possible health, all latent disease conditions must be eliminated. If the patient comes to him, he often does, only after he has been subjected to much dosage with barbiturates and other crude remedies, he realizes that in the endeavour to allay pain or alleviate symptoms, the disease conditions may well have been driven deeper into the system and have added to the prevailing aemia. It is in such cases that the radiesthetist will obtain indications for psoric diseases, i.e. attenuated disease conditions of an hereditary kind. These conditions require dealing equally with grosser conditions which have superimposed during the illness from which the patient is suffering. In a long-standing case with which the radiesthetist is faced upon to deal, he will make his analysis and draw his conclusions as to the primary factors in the case. He may obtain reactions for a number of disease conditions, some of which are of more importance than others. But as a beginning he will deal with obvious infections and aim at a reduction of toxæmia. And he will pay most attention to those reactions or disease conditions which give high readings. When these readings are reduced, strong reactions will be obtained for other diseases, which may be of a more fundamental kind as factors contributing to the illness. It will be seen therefore (as has previously been observed) that where one disease condition is active in the system, another also present is in a state of relative abeyance. As the upper layers, so to speak, of disease are dealt with, the lower layers will become more active, and aggravation may easily occur. The patient will then ask himself whether in fact there is any good going on with the treatment.

An interesting case of the sort of thing that can happen is that of acute psoriasis, which had persisted for ten years. The methods known to the patient, both orthodox and unorthodox, had been tried. He had in fact been told by practitioners that there was no cure. It was decided to make an analysis on the lines adumbrated in previous chapters of this book. At first the general disease rates gave low readings, but naturally the skin reactions were bad, inflamma-

tion coming out very positive. There was some toxæmia in the appendix area and the spleen. The general condition was quite good and gross toxæmia was not indicated. The patient had always enjoyed excellent health until he was operated on for appendicitis, which was followed by a second operation for rupture of the appendix area. He had also had his gall bladder removed. Vitamin B1 was found to be very deficient, its reading being reduced to something approaching zero.

For the first consultation the patient made a personal visit and tests were made for parasites and ringworm, but the reactions were only slightly positive, giving a reading of 50 instead of 45 cm. No special significance was attached to these readings at the time. Virus and bacterial infection gave strongly negative reactions. The patient was then asked if cooking in his home was carried out with aluminium utensils and the answer was in the affirmative. It was at once assumed that, whatever further tests showed, it was exceedingly unlikely that treatment of any kind would be of any use until cooking in aluminium was given up. In fact a high reading was obtained for aluminium poisoning, and it was obvious that this must be corrected before anything further could be done. The patient was at once given a dose of Aluminium 100, with some further tablets of Aluminium 30 to be taken when he got home. Vitamin B1 tablets and Bemax were also prescribed to correct the vitamin B factor.

The patient had some way to drive home, and he afterwards told me that such aggravation of the skin set in on the journey that he found it difficult to keep still in the driving seat. But he realized that aluminium was a major factor in his case, and carried on with the Aluminium 30 tablets. Not unnaturally the skin remained in a highly inflamed condition, but the scales were pouring off.

When the next test was made, strong reactions were obtained for streptococcal and staphylococcal infection and one or two infections of a psoric nature, while ringworm gave a reaction of 55 cm., worms 50, parasites 50, fungus 50, and influenza virus 55. Urea was 55 and uric acid 50. Aluminium was down to 5! The skin showed acute in-

flammation at 80. A reaction of 50 was obtained for caries, and as mineral imbalance gave a positive reaction, Silica was included in the prescription, which measured up well on test. Vitamin B1 had come up from about nothing to 46.

The prescription included five remedies to deal with the infections and psoric conditions and some Arsenic Alb. 5x tablets, and it covered a period of seven days. At the end of that period the patient reported continued acute inflammation of the skin, and he was obviously feeling miserable. But fortunately he had studied homoeopathy to some purpose and decided to carry on.

On test the reactions for general disease conditions were very much better and, perhaps somewhat strangely, the skin this time showed no inflammation, and it also showed normal condition as judged by its 'organ' reading. Psoriasis showed 5 cm. and parasites 10. Obviously there was some other disease factor present, and it was the practitioner's job to find out what it was. Tests were made for toxins, and positive reactions were obtained for measles at 80 cm. and ringworm at 50. The rate for 'ringworm-skin' gave 60. 'Itching of the skin', as differentiated from 'inflammation', gave 45 cm. Urea showed 25, uric acid 0 and caries 0. Vitamins B1 and B2 were 48. The polarity was 45-48/43, indicating a devitalized condition, but the autonomic nervous system was normal.

It was decided to go through rates for disease conditions of the skin, and pityriasis gave a reading of 60. It was evident by now that parasitical infection was present. Sepia 6 tablets were sent, and also Sepia ointment for local application. The next report was very favourable, as the skin condition had greatly improved and the intense itching had subsided.

I have reported this case at some length, as it demonstrates very well the radiesthetic method as I see it. In the event, it would be easy to insist that specific treatment should have been given for parasitical infection in the first place. In actual fact, this infection *was* suspected, but it was decided to work on a definite system, and treat only those disease conditions which came uppermost on test. It was also thought that the five-remedy prescription would

in fact deal with any parasitical infection present.

It is as well for the practitioner to point out to his patients in the first place that during the first two or three prescriptions aggravation may occur, although often enough it will not. It is rather disconcerting for the practitioner to receive a bad report when the reactions of his patient show improvement. When that happens, it means that while more superficial disease conditions have been dealt with, there is something more deep-seated which remains to be treated. Orthodox homoeopaths will often point out to new patients that treatment must go on for some time before any real improvement, or still more a cure, can take place. The patient is meanwhile left wondering whether in fact treatment is on the right lines and how far he should go on with it, if substantial improvement does not occur. Much will depend on the practitioner-patient relationship at that point, but it is important that the patient should understand the position from the homoeopathic point of view. In the case cited, it is strange that aluminium poisoning had never been diagnosed, especially as the patient had consulted homoeopaths and undergone treatment of the more advanced unorthodox kinds. One homoeopathic doctor treated him with Tuberculinum in potency, which produced a strong but short reaction.

It would seem in all probability that a T.B. infection had lowered the patient's resistance to the invasion of fungoid parasites, and that the lowered state of the patient at the time of his operations enabled the disease to become fully established, the whole condition being grossly aggravated by aluminium poisoning. Dr. C. E. Wheeler put it very clearly when he wrote*: "... those who require Sepia are very subject to invasions of the fungoid parasites that manifest in such diseases as pityriasis versicolor and ring-worm. There is no doubt that resistance to these invaders varies very much in different cases: Sepia patients have a resistance notably low to them". And he went on to observe that Dr. Burnett had drawn attention to the fact that

* Charles E. Wheeler, M.D., B.S., B.Sc. (Lond.): *An Introduction to the Principles and Practice of Homoeopathy* (William Heinemann [Medical Books] Ltd., 2nd ed.), p. 279.

pulmonary tuberculosis, or a tendency thereto, was often accompanied by a lowered resistance of the kind described.

'Patients' are not given that name for nothing. Patience and co-operation are required on their part if worthwhile results are to be expected. Assuming that the patient is convinced that the practitioner is doing his best for him, he should also bear in mind that work with radionic instruments is an exacting exercise, during all the time of which accurate measurements are being made with the pendulum. The practitioner has indeed to put his whole mind into his work and himself in sympathy with his patients. In that way psychic factors, of which we know comparatively little, may help him in deciding on the best course of treatment, in addition to helping in the analysis. If the results are not always highly rewarding financially to the practitioner, he can at least feel that he has in his hands the ability to lessen suffering, and the gratitude of those patients who do well under his treatment is a prize which no one can take from him.

Practitioners working on novel and unorthodox lines do, of course, have their failures, which should induce in them a proper feeling of humility. There is still much to be learnt as to the many factors contributing to illness and disease, but the radiesthetist or radionic consultant does at least know that the weapons in his hands are potent with life-giving and life-restoring power, if he can but find how best to use them. If the patient can see himself as an essentially vibrant being, instinct with life, he will respond better to the atomic forces contained in the homoeopathic remedy, and the cosmic forces transferred to his system by radionic instruments.

Most persons who consult the homoeopath, radiesthetist or radionic consultant, have come to realize that something more is necessary than the concepts of materialistic medicine, with its paraphernalia of ever more powerful drugs, and machines devised at vast expense to destroy pathogenic cells and viruses. An advantage of homoeopathy is that no other system employs such an economy of means. The method of potentizing remedies provides a curative force of great power, provided that the correct remedy in

the correct potency is chosen. A disadvantage is that the orthodox method of homoeopathic practice involves a good deal of time studying symptomatology for every patient, while radiesthetic techniques used in conjunction with the oral administration of homoeopathic remedies also take up much time for each patient. Nevertheless, these systems are comparatively inexpensive for the private patient, when he remembers that the treatment is intensely individual and accurately equated to his needs. Broadcast treatment can be equally effective, but as it involves much more attention and time on the part of the practitioner or his assistants, it is to that extent more costly to the patient. I have no doubt that a combination of oral administration of remedies and limited broadcast treatment can be highly effective in suitable cases.

CHAPTER 18

PSYCHOLOGY AND RADIESTHESIA

IN the last twenty-five years the science of psychology has shed new light on many diseases and illnesses. In fact the psychosomatic aspect of illness, whereby interaction between mind and body may play a predominant part in the etiology of a disease, is being accepted in ever wider medical circles. This mental aspect of disease should be of particular interest to radiesthetists.

There are certain kinds of neuroses and psychoneuroses which are within the obvious province of the psychotherapist. A London doctor had a rooted fear of travelling on the underground railways, which was a great disadvantage to his practice. He consulted a psychotherapist, and it was discovered that when a boy, he went for a walk and found himself in a blind alley. When he turned to retrace his steps, a large dog confronted him, and he was desperately afraid that the dog would attack him. In the event it did not, but the impression of fear was sufficiently strong to produce a permanent claustrophobic effect. Needless to say, the doctor had completely forgotten the incident. But when he was able to recall it, his neurosis was resolved. Psychiatric procedures of this kind are quite straightforward and require no comment. The neurosis is purely a mental one and needs only a psychotherapist to deal with it.

Only too often a psychological factor is present in physical disease. To take an obvious example, it is now recognized that psychological factors are often present in cases of gastric and duodenal ulcers. Emotional upset can increase the vascularity of the offending mucous membrane and increase acid secretion. But as radiesthetists know, a predisposing cause of stomach ulcers is aluminium absorption, and it is safe to say that in such cases both psychological and physical causes are present. As Dr. Leslie Weatherhead

has said* in discussing gastric and duodenal ulcers, "no doubt, a nutritional deficiency is a cause, but all modern teachers of medicine agree that psychogenic factors are not only initiatory causal, but are responsible for relapse and recurrence".

Not everyone whose food is cooked in aluminium utensils develops ulcers. But the employment of aluminium in cooking is widespread, and ulcer cases are steadily on the increase. What other factors in such cases can we assume? Worry is known to be a factor, and some people are very much more prone to worry than others. Heredity has its part to play, and I know one family who are peculiarly susceptible to gastric and ulcer trouble. In the case of one member, acute emotional disturbance is sufficient to cause a haemorrhage.

If, then, a person has an hereditary predisposition to gastric complaints, it is safe to assert that the probability of his developing an ulcer will be very much greater if he absorbs aluminium. Aluminium may well be the final element in the production of an ulcer. On the other hand, a person may consume his food cooked in aluminium quite happily until some special worry or emotional upset occurs, when an ulcer may appear. There must in fact be action and reaction between mind and body, and the functions of both are closely interwoven.

This psychosomatic relationship is well illustrated in radionic work. Supposing that we obtain a positive reaction for anxiety neurosis and, at the same time, certain physical disease conditions are present. If we find suitable remedies which will reduce the disease conditions, the reading for anxiety neurosis will be reduced also. On the other hand, if we select remedies well suited to the mental symptomatology of the patient and well indicated when tested on the rate for anxiety neurosis, it will be found that the physical disease factors will also be reduced. One can never entirely divorce physical and mental activities, and it is for this reason that the homoeopathic remedy has such a strong

* Leslie D. Weatherhead, M.A. (Manch.), Ph.D. (Lond.), Hon. D.D. (Edin.): *Psychology, Religion and Healing* (Hodder & Stoughton, 1951), p. 380.

claim to a place in our therapeutic armamentarium, for the vibrational activation of the homoeopathic remedy influences the patient at all points. Patients suffering from skin disease will tell you that the irritation is worse when they are worried, or upset. Psychiatrists know well that morbid changes in the skin can be the expression of a reaction to nervous strains and stresses.

What, it may be asked at this point, is the answer to the so-called psychosomatic diseases, such as asthma, ulcer, skin affections, coronary thrombosis and perhaps diabetes? I would say that the proper course would be to treat both the physical condition and the concomitant neurosis, where this can be established. If the basic factor is in the psyche, psychotherapeutic treatment will have a much better chance if all physical imbalances, including radiation of the nervous system and of the brain, are balanced up. This is a field where the medical radiesthetist can work in harmony, and to the best possible purpose, with the psychotherapist.

As a radiesthetist, it seems to the author that it would be a fallacy to postulate that all cases of neurosis spring initially from the mind. I know that the modern tendency is to assume, sometimes all too readily, that behind almost all physical illness there must be an all-pervading neurosis. Is it not equally possible that the neurosis, associated or not with physical symptoms, may have been 'touched off' by some obscure physical imbalance? We know that the illnesses of clinical psychotic cases can be due to deep organic disease, such as cerebral tumour, chronic infection or renal disease. May we not assert that the lesser cases of neurosis may find their explanation in lesser physical disease conditions, such as chronic debility, endocrine dysfunction, infection, or toxæmia? This would merely mean that the stress of physical disease would be reflected in mental stress, thus upsetting the delicate balance between the conscious and unconscious mind. At any rate it would seem sensible in all cases of mental imbalance, or stress, to ensure through radiesthesia that the physical health is as good as individualized treatment can make it.

When we come to mental disease, where the personality

of the patient is affected and his co-operation in psychological treatment is difficult or impossible to obtain, modern methods of treatment by insulin therapy, electro-convulsive therapy and various kinds of drug treatment, have met with a high degree of success. Even so, the treatment is largely empirical, and it would be interesting to see what radionic analysis of typical cases would show. The general treatment rate for imbalance of the psychological condition, which can be given by broadcast or direct ultrasonic treatment, alone might help in such cases. Moreover it is thought that such disease rates as 'mental imbalance', 'mental deficiency', 'anxiety neurosis', 'dual personality', 'paranoia' and 'split personality' should prove useful in diagnosis.

The time may come when a medical radiesthetist or radionic practitioner can work in co-operation with the staff of a mental hospital, when the value of the different radionic diagnostic and treatment techniques could be assessed. There is nothing of a violent nature in broadcast treatment, and it seems at least open to speculation as to whether it could not produce permanent modification of the mental condition in suitable cases of neurosis, psychoneurosis, and even deep psychosis.

It is suggested that, in cases of mental deficiency, a radionic analysis of the central nervous system might reveal imbalances and deficiencies, which could be treated successfully by broadcast therapy. Brain rates could be adjusted where necessary, and ductless glands known to be deficient (or overactive) irradiated with suitable rates. It may be a long time before treatment on these lines is approved in our hospitals and institutions, but the possibility is there, and it is thought necessary that reference to it should be made in this chapter. Similar and equally good effects could be achieved by the administration of drugs tested by radionic means.

CHAPTER 19

THE TRUE MEANING OF HEALTH

IN treating, with the assistance of radionic instruments, a patient suffering from some physical ailment or disease, it is good practice (as previously indicated) to take a measurement on the psychological rate. If the rate for psychological condition (a disease rate) is positive, it may be advisable to test for specific psychological states, such as fear, hatred, jealousy, etc. Much will depend on the case under consideration. Treatment by radiesthetic and radionic means can greatly assist the psychological condition and nervous state of the patient, more particularly if it is possible to point out to him that a change of attitude is necessary on his part if good results are to be expected. If the patient has full confidence in the practitioner, it may be possible to accomplish much without resorting to psychological treatment of a more exclusive kind. It may only be necessary to inform him as to where his attitude is wrong, so that he can develop a new outlook on his problems. We can say, therefore, that where the case is to all intents and purposes a physical one, the radiesthetic practitioner may be able to get better results than he would otherwise do by employing techniques which cover underlying psychological factors. In cases where a deep psychoneurosis is present, it may be necessary to arrange for the patient to consult a psychotherapist.

It will be obvious to the reader that the means available to the radiesthetic or radionic practitioner, in his legitimate function as such, is limited as far as the treatment of psychological cases is concerned. Broadcast treatment on the general psychological rate will lessen mental tension on the part of the patient and can be usefully employed by the practitioner, in addition to other psychological rates. Equally he can employ 'mental' remedies, which is fully justified by the fact that in the employment of homoeo-

pathic remedies, these cover both mental and physical symptoms, so that the whole person is treated rather than a part—which is the basis of homoeopathic philosophy. But whether the case is a physical or a psychological one, the mental attitude of the patient and his outlook on life is all-important.

Patients suffering from long-standing physical illness are apt to become obsessed by their disabilities, and to lose faith in the possibility of their recovery. That is quite natural and no one can blame them. But whatever their condition, it is important that as individuals they should try and develop a vision which carries them above the physical plane. Each one of them is a composite living being consisting of spirit, mind and body, and too often it is the case that the spirit has been starved.

Health means nothing more than 'wholeness', or 'holiness', whereby the mind and body exist as a co-ordinated entity, animated by the spirit. It is the spiritual force, the *élan vital*, the will to live actively and usefully, which is the decisive factor in the life of the individual. Whatever his problems, be they domestic, business or health, it is the spirit within him which can tip the scales in his efforts to overcome all stultifying obstacles. How is he to attain the vision and outlook through which his difficulties can be resolved?

Jung could not have given a more cogent answer to this problem than when he wrote*: "Among all my patients in the second half of life—that is to say, over thirty-five—there has not been one whose problem in the last resort was not that of finding a religious outlook on life. It is safe to say that every one of them fell ill because he had lost that which the living religions of every age have given to their followers, and none of them has been really healed who did not regain his religious outlook. This, of course, has nothing whatever to do with a particular creed or membership of a church". It was Jung who said sagely that during the first half of life we are learning to live, while in the second half we are learning to die.

* C. G. Jung: *Modern Man in Search of a Soul* (Routledge & Kegan Paul), p. 264.

There can be no doubt that there is something badly missing in a person entering the second half of life with no faith in a living God. In the first half of life a man is busy gaining confidence in himself. In the second half it is borne in upon him sooner or later that he is approaching the end of life on this earth, and that faith in himself is not enough. If the world and himself are just the product of natural forces, the world ceases to make sense.

It has always surprised me how some people could deny the existence of an all-pervading beneficent Being, and yet at the same time appear to be at peace with themselves. It is a horrifying thought that all the beauty and love, and the wonders of creation, are the products of a fortuitous alchemy of natural forces. If that were so, there could be no meaning to life.

A person without religion, facing a dire illness for the first time in his life, loses the only prop he has—faith in himself! He is indeed like a ship driven by the wind without a rudder, and with no port to make for. His animal spirits and physical zest have left him. Perhaps for the first time he asks himself the question, "What am I, why am I here, and what is this strange world around me that can deal me such a cruel blow?" Sooner or later every man and woman must face questions of this kind. And if he or she is sick, the sooner he searches for an answer, the better.

We have all known cases of men and women who have suddenly and unexpectedly departed this life, often to the amazement and sorrow of their friends. The managing editor of a great financial newspaper once told me of a bachelor member on his staff whose time came for retirement, when he left the newspaper office and was dead within a very short time. I forget the exact period. It may have been a month, or it may have been longer. But I am sure it was not more than six months. After giving up his work, there was nothing left for him to live for.

If there was one thing I liked best about my old public school, it was its motto, "*Spiritus intus alit*". The spirit nourishes within. As we grow older, we must find that zest for life from other things in the world than physical vitality and the pure fun of life. Illumination must come from some-

where outside our natural selves. That is to say, we must be born again of the spirit, the spirit of God living in us and all around us. Once we can glimpse the all-pervading power and love of a beneficent God, we can face the future, and whatever it holds for us, with confidence.

All this has a very real place in healing. To set no limits on what God can do for us and what Man can accomplish as the instrument of God, is to open the way to true healing, where not only the body is freed from its torment, but the spirit is enriched and the mind fortified. Radiesthesia should help the sick person to rise above bodily afflictions and the strains and stresses of his mind.

The Rev. J. A. C. Murray put it very well when speaking on *Science and Religion Open a New Chapter*:* "What is relevant to our present purpose, one department of science, experimenting with the new forces inherent in matter, and with certain powers of radiation which seem to function in a new dimension, independent of space and time, has evolved a healing method, so revolutionary in its premises as to threaten all the established ways of medicine, and so ethereal in its command of vibration and radiation as to knock at the gates of the spiritual. I refer, of course, to Radiesthesia, which seems to me to be the nearest thing yet discovered by merely human means, to the intimations of Eternity themselves.

"Coupled with the new concepts of matter already referred to, Radiesthesia reveals most clearly the fact that there is no hard and fast frontier between matter and spirit. The artificial divisions created by centuries of materialism, divisions taken as a matter of course till very recently, have been abolished. In their place, we begin dimly to see a continuum of vibration, of radiation, extending unbroken from the heart of so-called 'dead' matter, right up through the octaves of the rays of flesh and blood and the etheric processes of the mind, to a region beyond the human spectrum, in which powers from another Dimension begin to be apparent. It is therefore more than possible that just here, the long battles between science and

* Address given to the Medical Society for the Study of Radiesthesia, October 27, 1954.

religion will find their truce at last; and that the radiations, found and plotted out by man's intellect, will coalesce with and intermingle with those discerned by his spirit. We shall discover something of the secret of the Unity of creation, a Unity which is of the essence of its Creator, a Unity which must be reflected in His Works. We seem to be presented once again with that strange pattern of the ascending spiral, which emerges in so many aspects of creation,—a spiral which leads without a break from the heart of the stone to the heart of immortality". Poverty-stricken indeed are those who cannot marvel at the wonders of creation, and offer thanks to God for them with humility in their hearts.

In a scientific age, when Man has been adding so greatly to knowledge of the workings of the Universe and his control over natural forces, it has been fashionable to ignore, or try and explain away, the miracles of Christ as recorded in the New Testament. But through radiesthesia we are beginning to see, if only in a glass darkly, the magic force that permeates space and can bring healing through the ether, or through the touch of a man's hands. All matter, living or dead, is charged with radiating power, as indeed any pendulist can confirm. Whether we call it Od, Odyle or animal magnetism, we should know there is a force within each one of us which can be used for the alleviation of the sick.

If any of us as sick people seek healing through radiesthesia, or indeed through any other means, it is essential for our eternal good that we should seek it only that we may serve. When crossing the Pacific Ocean in 1925, I met a charming lady who had been bed-ridden in India for a considerable time—it was about two years. When that great Christian healer, the late James Moore Hickson, visited India and came to minister to her, she was healed. But afterwards she relapsed into her former state. She told me she then realized that she wanted healing only for her own satisfaction, and to enjoy life in her own way; that this was an unworthy object for which to seek God's help. Later on Mr. Hickson visited India again, and again ministered to her. This time her healing was permanent. She was healed "unto the Lord".

I believe the time is approaching when it will be more generally recognized that we are surrounded by many kinds of influences for good or evil, be they cosmic or earth radiations, psychic influences, or the interplay of personalities. There is evidence in support of the view that we can be affected by discarnate spirits, both good and evil, which may account for some of the dreadful crimes occurring in what we are pleased to call a civilized society. Mr. Hickson, who had a deep knowledge of these matters, told me that a drunkard, on passing out of the body, can satisfy his cravings through the indulgences of a person still inhabiting the earth. It is by no means unusual for a person to sense the presence of evil, and I remember a lady, the wife of a doctor, telling me that she once refused to shake hands with another woman at a tennis party, because she saw an evil apparition immediately in front of her. Her hostess was naturally upset, but confirmed afterwards that, as it turned out, she was quite right in her feeling of repulsion.

For those who are sceptical of experiences of this kind, it should be stated that descriptions can be found in psychic literature of how an evil entity can attach itself to the aura of a living person. A better understanding of the psychic forces which go on all around us can be obtained by reading books such as those by Dr. Laurence J. Bendit and his wife, Phoebe D. Payne, and Max Freedom Long—to mention only three authors. I myself once disturbed a not (as I think) unfriendly ghost in an old Irish castle!

This subject of psychic phenomena is one which cannot be pursued here, but if we accept the possibility of such influences, that is all the more reason why we should ally ourselves firmly and positively with all that is good, and live our lives with the aspiration of conducting ourselves in a manner worthy of our Creator. The so-called "possessions" we read about in the New Testament have their parallels in life as it is lived today.

What I have attempted to show in the foregoing is that not only must we try and help the sick on the physical and mental planes, but that they should be brought to an appreciation of themselves as living spirits, with all the potentialities and powers promised to every true servant of

God. Sometimes this revelation will come to the sufferer as a flash of enlightenment, as has happened when receiving Communion, or when he is brought to realize through psychological treatment how some deep-seated resentment has been blighting his very life. We are learning through science and radiesthesia that matter is energy, that life is radiation, and that there are conquests within reach of us undreamt of a decade or so ago.

In conclusion, let me again quote the Rev. J. A. C. Murray*: "On a hill-top near Caesarea Phillipi, He stood before His friends; and was suddenly transfused by a Divine alchemy of light so that not alone the cells and members of His human body shone and glowed, but even His raiment shared the texture of the other-worldly radiance. For a brief space He showed them what He was to be—and showed them too, how slender is the barrier between the vibrations of the Unseen World and those on earth. In a moment, without a movement, He entered that other plane while standing on the hill beside them, and spoke to the friends that met Him from that Other World with the very voice which the disciples knew so well". And in leading up to the greatest event the world has ever known, the Resurrection of Christ, he said: "To those who know that life and radiation are synonymous, it is easier to realize that death is but the withdrawal of that radiation to another plane; and that One Who could command all the octaves of radiation was therefore able to make what we call life, come and go as He willed".

Each one of us has his part to play in this affair of living. Whatever our religion, unless we believe in a Supreme Being of Love, life can have no true meaning or purpose for us. Without religion we cannot be truly healthy, vital or inspired.

* op. cit.

CHAPTER 20

A SUMMING-UP

ORTHODOX medicine is often concerned with the treatment of conditions where tissues have undergone gross pathological changes. But it has no answer as to why such changes have taken place. The medical radiesthetist and homoeopath knows that disease is often related to subtle influences of an hereditary or psoric nature, which have contaminated the system and impeded the life forces. Hahnemann referred to these taints as "miasms" and divided them into three main groups, viz. psora, syphilis and sycosis. The spheres of these miasms have been rather vaguely defined, but homoeopathic practice has established the fact of their importance, and that influences of this kind play an important part in disease.

It is not easy to say exactly what is involved in these miasms. It may be the toxins of the disease rather than the disease itself. Cancer is considered the final stage of disease by many homoeopaths, and they will tell you that before cancer can develop clinically, the patient has succumbed to the effects of the miasms of Hahnemann.

In deep-seated disease radiesthetic or radionic reactions will often be found for tuberculosis, as for other of the primary diseases, and the infection may affect the health of the patient persistently until dealt with by a tubercular nosode or equivalent remedy. As a medical friend put it to me, all too often, after ordinary clinical, biochemical and bacterial tests have proved negative, the patient is told that there is nothing the matter with him, or that, if there is, it must be psychological and that he had better see a psychiatrist. In a disquieting number of cases suffering from chronic ill-health, a purely somatic cause can be found radiesthetically, when the patient can be treated with complete success. Toxins, which may have influenced the patient's health for years, come to light. These toxins have

often been in the system since an attack, say, of measles or whooping cough in childhood, or as a result of vaccination—especially after repeated and unsuccessful attempts to make it 'take'. My friend went on to say that another common miasm which comes to light under radiesthetic analysis is that of tuberculosis. For example, tubercular glands have been present and have either subsided or been removed surgically, but the old tubercular toxin can still be found lurking throughout the whole lymphatic system and causing a variety of symptoms over many years. If the immunizing effects of illnesses or vaccination can last many years, the toxins can equally do so. But apparently it is only radiesthesia which can detect the latter. Radiesthesia and radionic analysis will often resolve cases of chronic ill-health.

I was once asked to make a test for a lady suffering from an attack of skin eruptions. I found several infections, and obtained a bad reaction for measles (80), and the toxins of the disease (90). When I told this patient what I had found, she wrote to say that she believed she nearly died of measles 60 years ago! Possibly a fresh infection had stirred up the latent measles toxins. This lady had never been able to take medicines, as they nearly always made her sick. I found that Ipecacuanha in potency neutralized the reaction for measles and measles toxins, but I never heard whether this was actually tried.

It may be useful at this point to say something more about tests for polarity and to summarize what has already been said. If the polarity is normal, i.e. if it is 42-42/42, an indicated remedy will increase the S polarity reading. If the vitality is low and the polarity comes out at some such figures as 42-37/37, a good remedy will increase both S and P polarity readings. Where the P polarity reading is high, as in a set of readings such as 42-37/55, it is an excellent item on which to test remedies, and should be reduced when tested with a suitable remedy from 55 cm. to below 10 cm. On the other hand, suitable remedies should increase the S polarity reading.

Lay persons employing homoeopathy for themselves and their families by prescribing recognized remedies for colds,

influenza, rheumatism, indigestion, and so on, based on some simple homoeopathic guide, will inevitably draw a blank at times, where no beneficial effect is experienced. Indeed, it can easily happen that such simple prescribing can produce aggravation of one kind or another, and upset the subject considerably. An advantage of the radiesthetic method is that, however simple the method of test, some benefit should be felt. Either the remedy will be chosen according to the way the pendulum gyrates or by some simple rule test without witnesses, or it will be selected by ascertaining whether it will reduce a disease condition as represented by a witness. Whichever method is used, the remedy can be taken with very good assurance that it will not upset the person taking it. To make this point plain, haemorrhoids have been caused before now by Sulphur when wrongly prescribed. Not being wanted to reduce a disease condition and not being properly tuned to the patient, it has produced the symptom which it would cure when rightly prescribed. It will thus be clear that if only samples of urea and uric acid are to hand, they can be useful for checking a remedy before it is taken, even if the remedy does not do all that is hoped of it.

Some people sensitive to aluminium are very much concerned by the fact that they are so easily affected by it when taking meals in hotels or restaurants, and one is sometimes asked how best they can protect themselves against this insidious metal. I think the answer is simple.

Provided the sensitive has a sample of pure aluminium, he can place this at one end of his rule, with his specimen at the other end. After finding the pendulum balance point, he can place some Aluminium 30 tablets close to his specimen. If the balance point moves down to a position close to the specimen, he can take two tablets (they are usually 2-grain) quite safely. But if the pendulum balances at the same position or only departs a short distance from it, Aluminium 6 tablets can be tested in the same way. If this causes the balance point to move close to the specimen, that is the potency to take.

If Aluminium in potency is taken when it is not wanted, it can upset the nervous system and may quite easily keep

one awake at night. But tested in this way, it can always be safely taken, whether the original balance point is above the half-way position on the rule or not. Alternatively the aluminium potencies can be tested on the R rule reading. While some other remedy might be more suitable according to the subject's symptomatology at the time, this procedure is quite satisfactory for ensuring that aluminium is not absorbed to any noticeable extent. It remains to be said that a person allergic to aluminium should avoid it in his food as much as possible. It does little good attempting to neutralize it by medicinal means where there is a constant intake of it. Zinc poisoning is also something to beware of. Recently I came across a case where health was affected by a newly laid fresh water supply pipe being made of galvanized zinc. It is, of course, well known that house painters can suffer from lead poisoning.

From my own correspondence I am aware that there are quite a number of keen lay radiesthetists who use the pendulum in their efforts to keep fit, and I have sometimes been able myself to suggest ways in which a person, familiar with homoeopathy, can carry out simple tests, the better to decide what remedy, or remedies, will help him most. Elderly people can sometimes use the pendulum effectively to keep their digestion in-working order and their activities at a satisfactory level by finding what remedies will increase their R reading, i.e. by first finding their R reading, which is the pendulum balance point on the rule arrived at with only their specimen on the rule at the zero point (which will be about 42 cm.), and testing to see what remedies will increase this reading to the maximum extent. For this purpose, it is only necessary for the remedies to be held in the free hand. I have one elderly duodenal case particularly in mind, who was able to help himself in this way. Some people will test a remedy by simply placing it in the palm of the free hand and holding their pendulum over it.

It is satisfactory to know that people can help themselves in this way, but for professional work it is necessary to employ more elaborate methods, whereby as full an analysis as possible can be made and as much learnt about

the patient as possible before treatment begins. In this way treatment will be directed to reducing readings for disease rates or conditions found to be high. The possibility or likelihood of factors in disease being missed is thereby very much reduced, and treatment can proceed with added confidence on the part of the practitioner.

The use of physical samples such as Turenne witnesses, animal organs, biological specimens, minerals, vitamins, etc., can give us a very good idea of the general condition of the patient and of microbial diseases which may have invaded the system, but in difficult cases instruments of the radionic type supply us with the means of greatly amplifying our knowledge of the physiological processes at work. Numerous rates are available for testing remedies. Where it is thought that nosodes might help in cases of the chronic type or of deep-seated disease, these can be tested on disease rates irrespective of whether the disease signified by the nosode has been diagnosed by straightforward radies-thetic or radionic tests.

Where treatment is required for a specific condition, such as metal poisoning or one of the skin diseases, it may be thought advisable to find low potency remedies which will deal with the condition, in addition to 30c or higher potencies. Low potency remedies tested for such conditions may provide a clue as to the reason why the disease condition in question has asserted itself.

The recognized treatment for aluminium poisoning is Aluminium, or Alumina, in potency, but I found in extensive testing in one case that Cina 1x, Dulcamara 3x, Stannum 6, Nat. Phos. 1x and Gelsemium 3x also reduced the intensity of aluminium. It might be suggested that in this case some form of parasitical infection (or tendency thereto) was a factor in the susceptibility to aluminium poisoning, which often produces erythema. It hardly needs saying that parasites have an affinity for the skin. There is room for investigation along such lines. The testing of supposedly unsuitable remedies on disease rates may shed new light on the nature of some of the more obscure diseases.

Some people new to homoeopathy find it difficult to believe that the homoeopathic remedy in potency can

affect the human economy throughout the system. And yet homoeopathic *Materia Medica* is full of detailed symptoms which appear to have little or no connection with each other. For instance, *Lycopodium*, in addition to its more general symptomatology, has the symptom 'one foot hot, the other cold'. *Apis* has 'inflammation of right ovary', while other remedies refer to the left. Under *Natrum Mur.* we find 'dreams of burglars', while *Lac Caninum* patients 'dream of snakes'! *Cina* has the two strange and seemingly unrelated symptoms of 'sudden inward jerking of fingers of right hand' and (less prominently indicated) 'left foot in constant spasmodic motion'.* *Hepar Sulph.* deals with 'crack in middle of lower lip', and we could go on indefinitely, mental and physical symptoms of almost any description being in relationship to one or other of the homoeopathic drugs.

The intimate relationship of the various parts of the body was realized far back in Chinese history through the discovery of acupuncture. Some people have claimed that acupuncture was discovered by the Emperor Hoang-Ti about 2687 B.C., but in any case it was a recognized system of medicine in the Tang dynasty of 618-692 A.D. Interest in acupuncture by European doctors only dates from the 17th century, when the first book on the subject was published in London by a Dutch surgeon, Wilhelm Then Rhyne.† The method had a considerable vogue in France and other European countries in the 19th century. It is employed to a limited extent today.

Through acupuncture twelve lines, or meridians, have been traced on the body, situated on each side and running up and down the body, these meridians being associated with different organs. Various points along these meridians have been mapped out, each associated with a particular organ or disease. Books have been published on the Continent containing finely drawn diagrams showing the various points and their associated areas. If it is desired to stimulate a particular organ, a needle is inserted in the skin at a

* William Boericke: *Homoeopathic Materia Medica* (Boericke & Runyon).

† F. Ferreyrolles: *Acupuncture Chinoise* (S.L.E.L., 91 bis rue Nationale, Lille), pp. 40, 41.

point determined by reference to the diagrams, the stimulus thus given being directed *via* the nervous system to the appropriate organ. Where a febrile condition exists, other points are punctured so as to drain off surplus energy.

The whole system of acupuncture is somewhat complicated, but it is of very definite interest to radiesthetists. For instance, it is possible to treat the bladder by inserting a needle in a predetermined point on the foot! The system suggests a correspondence to herbal hormone therapy as practised by doctors in London today. The late Dr. E. T. Jensen gave injections of herbal hormone at various points on the skin surface, as indicated by his pendulum, which had undoubted connections with the acupunctural points.

A gold needle is often used when stimulation of an organ is required, whereas a silver needle is employed for 'dispersion', or relaxing of an organism. An instrument known as the *Sonopuncteur* is used by some practitioners today, which avoids the necessity of pricking the skin of the patient with a needle.* The *Sonopuncteur* uses vibrations covering the three middle octaves of the piano. The vibrator is brought into contact with the points of the skin used in acupuncture. The lower vibrations provide relaxation to the organism, the middle range is neutral, and the higher octave corresponds to the gold needle and tones the organism up. The instrument is operated electrically and is connected to any lighting point. Some remarkable cures have been attributed to acupunctural therapy.

Acupuncture and homoeopathy are systems of medicine designed to provide 'tone', or function, to cell-groups in the body whose function is impaired. But while the homoeopathic remedy contains energy which is transferred to the cell-groups of the body, it would appear that the action of acupuncture depends on activation of nerve centres and releasing energy already in the body. The practitioner of acupuncture recognizes that in man there resides a life force which controls all our involuntary activities. It is the aim of the practitioner of acupuncture, as of homoeopathy, to amplify or reduce the action of this life force along

* See "Vibrations of Light and Sound in Relation to Life and Health", by Maryla de Chrapowicki, N.D., Psy., *B.S.D.J.*, XI, 88, p. 267.

M*

specified nerve channels, so as to maintain the whole system in a state of dynamic equilibrium. It will be seen that in acupuncture a stimulus of a highly selective type, as decided by the point of application, is given to the patient. Similarly the action of the homoeopathic remedy is equally selective and affects the patient at many points. The complexity of a London telephone exchange must be a simple affair compared to the network of the nervous system.

I have dealt in some detail in previous chapters with the psychosomatic aspect of disease from the point of view of radiesthetic and radionic therapy. In general terms we might say that, in many cases of disease, the disease condition is related in some way to the mental pattern of the patient, i.e. that the thoughts, temperament, fears and subconscious proclivities of the patient produce a tendency to a particular disease, which may be said to be in resonance with the integrated pattern of his mind. To put the matter in the simplest terms, if the mental pattern of a patient is susceptible to a particular microbial disease, and his system is exposed to that species of microbe, he will develop the disease. Other persons with different mental patterns will be more prone to develop diseases, or disease conditions, according to their own mental pattern.

The late Dr. Edward Bach, who carried out bacteriological research in University College Hospital and the London Homoeopathic Hospital, divided people under seven main headings according to their state of mind, and introduced thirty-eight remedies* to deal with the different temperaments found. These remedies are prepared from common flowers and plants found in the countryside. They are being used by doctors, homoeopaths and radionic practitioners to very good effect. The principle behind the employment of the remedies is to treat the personality of the patient rather than his disease, which has a close correspondence with homoeopathic philosophy.

It requires much study and experience to put patients into their correct group and to decide from case-taking

* Six books about Dr. Bach and his remedies are published by The C. W. Daniel Company.

alone which remedy will suit the patient best. Fortunately these remedies can be tested radiesthetically in the same way as other remedies can. Results arising from treatment with the Bach remedies have often been striking.

There is still much to be learnt as to the part the mind plays in health and disease, and radiesthesia may help us evaluate it. Health is a matter of balance of psychosomatic forces. If the lights and shades, the disturbing and healing influences, the tensions and relaxations in our minds can be held in balance, we shall have mental health, which we spread down into the physical. Likewise due attention must be paid to the external influences which affect our bodies, so that the natural healing forces within us—the *Vis Medicatrix Naturae*—can activate every cell unimpeded and maintain a proper balance on the physical plane. Then we shall have full health, provided always that our thoughts and energies are directed positively towards all that is good, so that we are in harmony with the life-giving power of Universal Good, which is God. Radiesthesia, radionics, homoeopathy and other forms of therapy designed to provide the right sort of stimulus in just the right places, should help us in the attainment of the health we all desire. Our endeavour must be to perfect the methods of healing which have been revealed to us.

INDEX

- A Radiesthetic Approach to Health and Homoeopathy*, 40, 132
 ABRAHAMS, Dr. ALBERT, 21, 74
 Accident cases, 123
 Acupuncture, 177-79
 Allergy, case of, in asthma, 124
 Aluminium poisoning, 90-3, 161, 162, 174-6
 Anaemia, 125
 Autonomic nervous system, 19, 21
- BACH, Dr. EDWARD, 179
 BAGNALL, OSCAR, 29
 BAINES, ARTHUR E., 30 f., 37
 Banana, polarity test on a, 37
 BEITZKE, Professor, 133
 BELL Colonel A. H., 14
 BENDIT, Dr. LAURENCE, J., 170
 Bishop's Rule, 133
 Blood Pressure, 100, 103-5
 Bone and nerves, 100
 BOVIS, A., 35
 BOVIS, Biometer, 35
 BOYD, Dr. W. E., 74, 152
 Boyd Medical Research Trust Institute, 152
 British Homoeopathic Association, 153
 British Society of Dowsters, 14, 136, 140
 Broadcast instruments, tuning, 84, 85
 BRUNLER Dr. OSCAR, 136
 BURNETT, Dr. J. C., 52, 158
- Calcium deficiency, 125
 Cancer and the soil, 137
Chain of Life, The, 21, 106
 Cholera epidemic of 1853, 47
 CLARKE, Dr. J. H., 47
 Colorscope instruments, 85
 Colour reactions, 34
 Complementary rates, 83
 Constipation, 118
 CULLEN, Dr., 45
- DAY, LANGSTON, 88
 Deafness, 117
 Debility, case of, 97
 Delawarr diagnostic instrument, 74-7
 Delawarr Laboratories, 74, 76, 82, 85
 Delawarr radionic camera, 85, 86, 88
 Diet, 123, 124
 Dosage, 130
 Dowsing, 128
 DROWN, Dr. RUTH, 74
 Duodenal ulcer, 124, 161, 162
- Electrical Review*, 140, 142
 Electro-convulsive therapy, 164
 Emanometer, 69, 106
Essentials of Homoeopathic Prescribing, 73
- Faculty of Homoeopathy, 152, 153, 154
 FARADAY, MICHAEL, 26
 FENWICK, Lt.-Colonel C. D. A. 140 f.
 Fibroma, uterine, 85, 99
 Food witnesses, 124
- GREGORY, Dr. WILLIAM, 33
 GREY, Dr. WALTER, 142
 Growths, 122, 123
- Hæmorrhoids, 119, 174
 HAHNEMANN, Dr. CHRISTIAN SAMUEL, 45, 47, 61, 64, 89, 172
 HICKSON, JAMES MOORE, 169, 170
 HOANG-TI, Emperor, 177
Homoeopathic Drug Pictures, 52
Homoeopathic World, The, 47
How to Douse, 181
 Hydrastis and bronchial asthma, 117
- Influenza, 116, 117
- JENNY, Dr., 133
 JENSEN, Dr. E. T., 178
 JOHNSON, Dr. RAYNOR C., 62
 JUNG, C. G., 166

182 MEDICAL RADIESTHESIA AND RADIONICS

- KILNER, Dr. W. J., 29, 30
 KOPP, Dr. J., 133-5
- LAKHOVSKY, G., 33, 136, 137, 138
 LAUTENSCHLAGER, Professor, 133
 Lead poisoning, 93
Letters on Od and Magnetism, 26
 LONG, MAX FREEDOM, 127, 170
- MABY, J. CECIL, 135
Man's Latent Power, 146
 Map dowsing, 128, 138, 147
 MARTIN, Dr. ERNEST, 33, 42-4, 124, 145
 Maury Compensator, 57-61
 Medical Society for the Study of Radiesthesia, 150, 153
 Mental patterns, 179
 Metal poisoning, 50
 MILLEN, Mrs. NORAH, 138
 Motor accidents, 139
 Multiple Wave Oscillator, 137
 MURRAY, the Rev. J. A. C. 168, 171
 MURTY, Sri K. R. K., 42
- National Health Service, 15
 Neurasthenia, 117
New Worlds Beyond the Atom, 87
- Organon of the Healing Art*, 61
 Osteopathic lesions, 119
- Parasites, 69, 120
 PAYNE, PHOEBE D., 146, 170
 Pendulums, 14
 Poisons, 122
 Polarity tests, human, 36
 Poliomyelitis, 122
Prescriber, The, 47
 'Provers', 51
 Psoriasis, 121
 Psoriasis, case of, 155 f.
Psychical Physics, 141
- 'R' readings, 36
 Radiesthesia, meaning of, 13
 REICHENBACH, Baron von, 26 f.
 Rheumatic diseases, 123
 RHYNE, WILHELM THEN, 177
- RICHARDS, Dr. W. GUYON, 21, 66, 67, 73, 106, 114, 115, 129, 139
 ROBERTS, Dr. HERBERT A., 61
 Royal London Homœopathic Hospital, 152
 Rule method of testing, 19
- 'S' and 'P' designations, 23
 SCOTT, CYRIL, 149
Secret of Life, The, 137
Secret Science at Work, 127
Secret Science Behind Miracles, The, 127
 'Series' testing, 139
 Sex indicators, 35
 Skin diseases, 121
 Skin potential, 140 f.
 Slipped discs, 118
Sonopuncteur, 178
 Spinal luxations, 100
Studies in Electro-Physiology, 31
- TOMLINSON, Dr. H., 67, 73, 91, 131
 Toxaemia, intestinal, 96, 97
 TRINDER, Captain W. H., 128
 TROMP, Dr. S. W., 133, 141, 142
 Tuberculosis, 172, 173
 Turenne witnesses, 65, 101, 102, 124, 176
 TYLER, Dr. M. L., 52
- Ultrasonic treatment, 82
 UPCHER, Canon ROLAND, 47
- Vaccinosis, 52
 'Vial connection', 57
 Vitamin deficiencies, 124, 125
- WAGLAND, A. L., 153
 WARR, GEORGE DE LA, 88
 WATSON, Dr. T. T. B., 150
 WEATHERHEAD, Dr. LESLIE, 161
 WHEELER, Dr. C. E., 158
 WOODS, Dr. H. FERGIE, 73
 WRIGHT, Dr. DUDLEY D'AUVERGNE, 120
- Zinc poisoning, 175