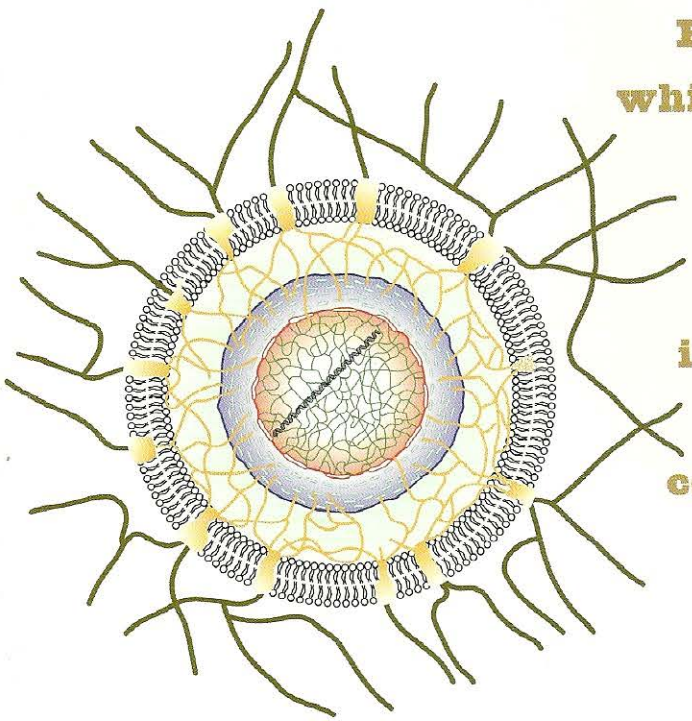
High Technology meets Ancient Medicine

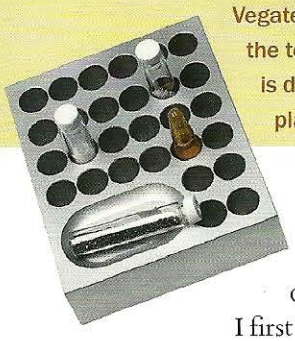


Electrodermal screening, which electronically measures the biological energies utilized in acupuncture and homeopathy, is an indispensable tool that no physician in the 21st century should be without.

A quarter century of intense research in the field of medicine has convinced me of the importance of electrodermal screening. I believe that it can and should be used to help recognize a patient's organ dysfunctions even before physiological symptoms manifest themselves. It can identify pathogens and toxins that are making the patient sick, and ascertain what medicines, supplements and other remedies are helpful—or harmful—to the patient. It can even determine the dosages that should be administered for maximum effect. It does all this quickly, inexpensively and noninvasively.

First developed 50 years ago in Germany, electrodermal screening (EDS) has been continually improved and refined, and is now estimated to be used by more than 100,000 medical doctors and healthcare practitioners around the world. There is still considerable resistance to EDS in mainstream medicine in the United States because it is based on principles of quantum physics and traditions of energy medicine.

There are several manufacturers of electrodermal screening equipment. These photos show a German Vegatest device being used to screen a young subject. The boy is holding an electrode in one hand, while the technician uses a stylus to measure the electrical resistance on a point on the boy's finger. A reading is displayed on a gauge on the machine. Different substances are placed in circuit (in the honeycomb platform), and the readings will change according to the boy's negative or positive response to them.



neither of which is understood or taught in our medical schools.

I first became aware of EDS soon after I began studying alternative medicine. It sounded like hocus-pocus to me, and I said so to a doctor acquaintance I respected, Joseph McGovern, M.D. "Don't laugh at it," he said, "it cured one of my failures."

Dr. McGovern related how he had a farmer in the hospital, dying, and no one could figure out why. A doctor there used EDS to determine that the farmer was ill from the effects of exposure to a particular pesticide, and was also able to identify what remedies would neutralize the toxin and expel it from the body. The farmer made a full recovery.

I was later able to witness the efficacy of EDS firsthand. Harold Whitcomb, M.D., my family's primary care physician in Aspen, Colorado, was suffering from a number of severe allergies. Finally, he spent two weeks and $3,000 to go through painstaking allergy skin testing. Shortly thereafter we visited the clinic of Fuller Royal, M.D., in Las Vegas, Nevada, where Leonard Haines, M.D., tested Dr. Whitcomb using EDS. In 20 minutes Dr. Haines came up with exactly the same results that had taken two weeks to determine using traditional means.

Years later I took my son, Blake, to Dr. Whitcomb for testing before his first vaccination. Now a convert, and well-trained in using EDS, the doctor determined that the first shot was safe but would cause a mild negative reaction. Further, he used EDS to identify homeopathic remedies we could use to counter these side effects. Sure enough, 24 hours after we gave Blake his vaccination he began to act uncharacteristically cranky. We administered the remedies and he soon returned to his usual cheerful self.

When it came time for Blake's DPT shot, Dr. Whitcomb tested Blake again and saw that a full-strength shot would cause a severe adverse reaction, but that a half-strength shot would be tolerated. We went ahead and gave Blake the reduced dose with no ill effects, and afterward used a homeopathic remedy to pull out the vaccination residue.

I have witnessed hundreds of successful diagnoses and treatments with physicians using EDS. It has revealed undetected gum infections causing chronic fatigue; mercury toxicity causing paralysis; parasites underlying immune disorders; and the hidden causes of many other health conditions that had eluded conventional physicians.

I am an instrument-rated pilot, and to use the vernacular, I consider any physician not using EDS as "flying blind." Anyone who is taking supplements, especially individuals with health problems, should have their vitamins,

minerals, herbs, etc. tested to make sure that they are actually necessary and doing good. If someone needs to undergo surgery, then the type of anesthesia to be used should be tested. The list goes on and on.

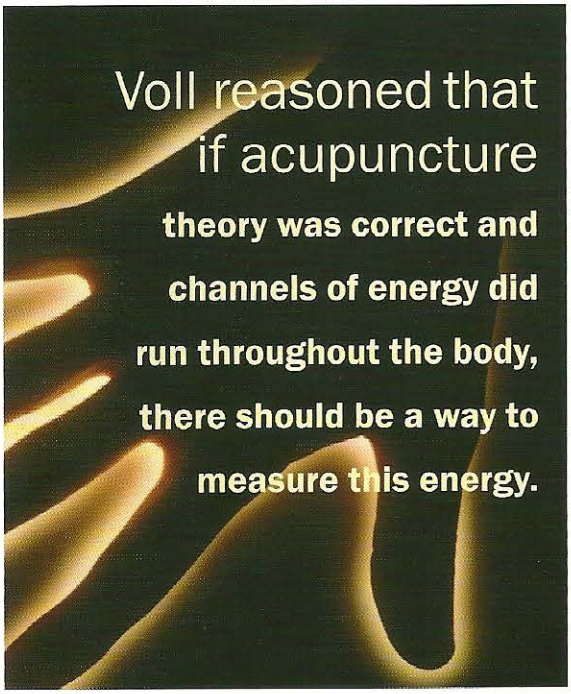
In this article, our editor-in-chief, Tom Klaber, interviews Scott Moyer, an internationally acknowledged expert in the field, discussing the development, use and scientific basis for EDS. It is my hope that this will help take the mystery out of EDS for doctors and patients alike, and that physicians will become adept in and utilize this marvelous modality as commonly as they now use their stethoscopes. —BG

Tom Klaber: First of all, Scott, just what is electrodermal screening?

Scott Moyer: Electrodermal screening is an overall term for instrument-based methods that provide information about the health of the body via electrical measurements of the skin at various points on the hands and feet.

TK: Is this a new technique?

SM: Not at all. Electrodermal screening, or EDS, unites 20th century technology with the ancient healing arts of homeopathy and acupuncture. It was first developed around 50 years ago in Germany. It has been continually improved since then. The technique was originally and still is sometimes called "Electro-Acupuncture according to Voll," or EAV.



TK: Voll was a person?

SM: Reinhard Voll was a German medical doctor. In the late 1940s he was studying the Chinese acupuncture meridian system when he had an interesting idea. He reasoned that if acupuncture theory was correct and channels of energy did run throughout the body—coming to the skin's surface at various "points" along the way—there should be a way to measure this energy. So Dr. Voll constructed a device to measure the electrical conductivity of acupuncture points on the skin using a stylus-shaped electrode made of brass. It was basically an ohmmeter.


German doctor Reinhard Voll studied acupuncture in the 1940s.

TK: And he found he was able to actually measure this energy?

SM: He didn't measure the energy itself, but rather the body's ability to conduct this energy. And in so doing he made two important discoveries.

First, Dr. Voll compared the acupuncture point measurements of healthy patients to those of patients who had conventionally diagnosed diseases. He found that the electrical conductivity of healthy acupuncture points measured within a given "normal" range, while readings outside of this range revealed disturbances in the tissues and organs traditionally associated with these points. In addition, he also noticed that major disturbances in the body produced a downward drop, or steady decay, of the conductivity indicator as the point was being measured. This became known as the "indicator drop."

Second, he discovered that medicines placed in the proximity of the patient could change acupuncture point readings. He discovered this by chance. Let me read to you how this happened, in his own words: "I diagnosed one colleague as having chronic prostatitis and advised him to take a homeopathic preparation called Echinaceae 4x. He replied that he had this medication in his office and went to get it. When he returned with the bottle of Echinaceae in his hand, I tested the prostate measurement point again and made the discovery that the point reading, which was up to 90, had decreased to 64, an enormous improvement of the prostate value. I had the colleague put the bottle aside the previous measurement value returned. After holding

CASE HISTORIES

Robin S., a 32-year-old entrepreneur, had just remarried. She already had one child from her previous marriage, but wanted to have more children with her new husband. After several months had passed without her becoming pregnant, she went to see a fertility specialist who thoroughly examined both her and her husband. When no significant findings were discovered, the doctor prescribed fertility drugs for Robin.

A half year later she still wasn't pregnant. With nothing to lose, she made an appointment with a practitioner who evaluated her using EDS. He quickly found a subclinical infection in her fallopian tubes and prescribed a short course of antibiotics.

Robin was absolutely thrilled when she became pregnant less than 30 days later. After a normal pregnancy she gave birth to a healthy boy. Subclinical infections can be difficult to confirm. Did EDS help to solve this case?

Terry H., a professional musician, was 43 years old when he began experiencing violent epileptic-like seizures. The seizures occurred without warning, making him a danger to his friends and family. He could no longer risk sleeping with his wife since he would often thrash about unpredictably during the night. Sometimes he was found nearly choking in the sheets that had become wrapped around his neck while he slept.

Terry spent six months working with neurologists and underwent exhaustive testing without success. There was no clear consensus among the doctors for the diagnosis, much less a treatment plan. The seizures continued daily.

At that point, nearly out of money and medical alternatives, he visited a naturopath who evaluated him using an EDS device. In about 30 minutes the practitioner had traced the problem to the mercury-amalgam fillings in his mouth. The seizures stopped 48 hours after the fillings were removed. Months later he remained seizure-free. Was the EDS practitioner correct? There may be no way to definitively prove these findings, but the patient was certainly happy.

the medication in his hand the measurement value went down to 64 again, and this pattern repeated itself as often as desired."

This became known as the "medication test."

TK: So, it sounds like EDS can help pinpoint both health problems and possible remedies.

SM: Yes. EAV started a revolution in medicine. Doctors now had a noninvasive method that allowed them to evaluate their patients at the core energetic level. EAV also helped practitioners prescribe the best medicines for each patient by testing them first "in circuit" to confirm their effectiveness.

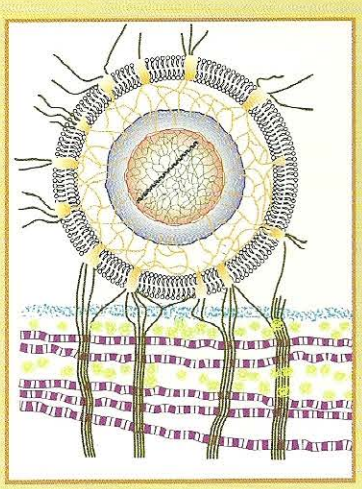
TK: Has the correlation between "normal" and "abnormal" readings of acupuncture points been confirmed by researchers outside of this field?

SM: Oh yes. Remember that using electrical measurements for evaluation purposes is not unique to EDS. Conventional medical devices that use electrical current for patient evaluation include the commonly used electrocardiograph (ECG), to measure heart rhythms, and electroencephalograph (EEG). The biofeedback instruments commonly used by contemporary psychologists are based on galvanic skin response (GSR) circuitry—that is a change in the electrical resistance of the skin in response to a change of emotional state. From a technical viewpoint, EDS machines are essentially biofeedback instruments, since both use a GSR circuit with visual and/or auditory displays to signal a change in the patient's state.

TK: What about research specifically using EDS?

SM: There have been many studies. For instance, in 1985, S.G. Sullivan and her colleagues at the UCLA School of Medicine reported in the *American Journal of Acupuncture* that patients with lung disease—confirmed by chest X-rays—had 30% lower electrical conductivity readings at lung points. I also have research papers on studies

performed in the late '90s that supply the cellular basis for this finding. [See list of resources at end of this article.] Acute diseases such as viral and bacterial infections, as well as chronic diseases such as cancer, affect the electrical charge and water content of the cell and the pH of extracellular fluids, thereby influencing cell membrane potentials and tissue conductivity. Also, Julia J. Tsuei, M.D., Fred K. Lam, M.D., and their colleagues at the University of Hawaii must have two dozen papers published establishing the correspondence of EAV readings with physiological disturbances.



The body electric: Cellular biology explains that all cells have two types of antenna-like receptors on their surface. While the first type of receptor is designed to detect biochemical substances such as nutrients or hormones in the body, the second type of receptor is designed specifically to receive electromagnetic signals from the surrounding environment.

For example, a study of theirs published in 1990 in the *American Journal of Acupuncture* looked specifically at the treatment of diabetes. It showed how the bioenergetic measurement of acupuncture points was a beneficial adjunct to the physician in determining the proper dosages of medicines to the patient. It helped determine the correct dosages of both allopathic medicines such as glyburide and insulin as well as homeopathic remedies and nosodes.

TK: You've said that that the changes in the skin's electrical conductivity, registered by EDS can also measure what the body's response to a remedy will be, before it is administered. Does anyone understand the mechanism whereby an organ dysfunction affects the electrical conductivity of certain points on the skin in a consistent way? Or how simply holding a substance would indicate how the body would respond to it if ingested? Frankly, I can understand why many people would be skeptical.

SM: There is no single theory as to why simply holding a substance—or putting it in circuit—can stimulate the body in such a way as to change its electrical resistance. However, a look at modern physics and cellular biology suggests a probable mechanism.

All matter vibrates at a specific and unique frequency as a result of the electric charges of the particles at the atomic level. These vibrating, electrically charged particles emit electromagnetic waves. This means that every medicine (or any other substance) produces its own unique electromagnetic signature. This fact can be demonstrated through the science of spectroscopy, which can identify substances by the energy fields they produce.

At the same time, cellular biology explains that all cells have two types of antenna-like receptors on their surface. While the first type of receptor is designed to detect biochemical substances such as nutrients or hormones in the body, the second type of receptor is designed specifically to receive electromagnetic signals from the surrounding environment. Leading cell biology researcher Bruce Lipton, Ph.D., who lectures extensively on the electronic nature of the cell, cites experiments that show cells are actually a hundred times more sensitive to electromagnetic signals than chemical signals.

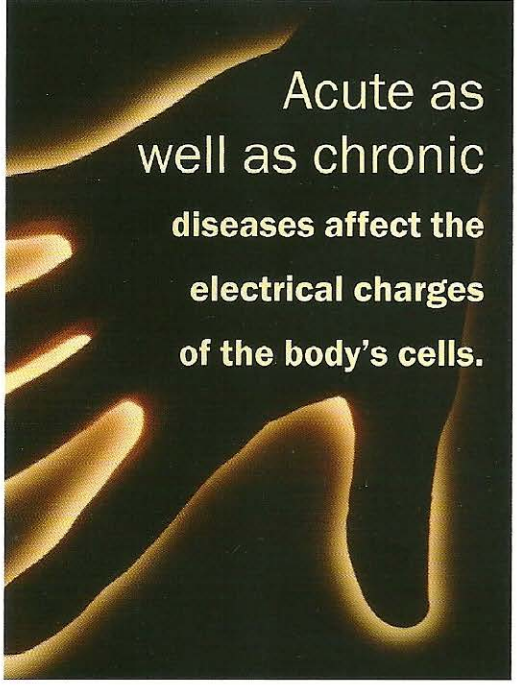
TK: You seem to be talking about cellular communication via an energy, a medium, that conventional medicine does not recognize.

SM: That's right. Conventional medicine is still based on the outdated mechanistic physics of the 19th century, as if the body works like a machine. It still holds the foundational belief that life processes can be described and understood on a chemical level. While quantum theory in the 1920s represented a revolution in science, its biological implications have yet to be integrated into biological science, although undercurrents have been recognized by many important scientists. For example, a famous Nobel Laureate in physics, Dr. Werner Heisenberg, said, "The opinion that living processes can be ex-

plained only by the methods of physics and chemistry and that there are no biological forces is not in congruence with quantum theory."

These ideas suggest not only that living systems can recognize electromagnetic fields, but that they also play an essential role in the body's survival.

It makes sense that intelligent living systems would include a way for every cell to receive information on the activities taking place in every other part of the body. Although the movement of chemicals from place to place in the body is one important means of communication, it is too slow to account for the rapid transfer of information that takes place.



Research that proves organized electromagnetic fields (or "biofields") extend from our body and intelligently interact with the environment has been performed worldwide by distinguished scientists such as German biophysicist Fritz Popp, Ph.D., Stanford professor William Tiller, Ph.D., UCLA professor Valerie Hunt, Ph.D., and former NIH adviser and founder of Temple University's Center for Frontier Sciences, Beverly Rubik, Ph.D. Each of these researchers has written books or articles about the nature of the human biofield and how it reacts to energy and information in its environment. [See list of resources at the end of this article.]

TK: Much of what you've been saying seems to indicate that the energetic level is primary to the physical, or biochemical, level.

SM: Exactly. Every function in the body depends on the correct energy. All disease initially begins as a functional disturbance that only becomes a clinically recognizable disease over time. This is one reason why so many patients have symptoms that cannot be diagnosed using conventional methods. If there are no telltale morphological findings, conventional medicine is often at a loss to explain the problem. This primacy of energy over the material has been known since ancient times. For example, traditional Chinese medicine clearly states this important principle as "blood follows qi." This means that the material aspect of the body is subordinate to the energetic, not the reverse. Nobel Laureate in Medicine Albert Szent-Györgyi noted over 40 years ago that "in every culture and medical tradition before ours, healing was accomplished by moving energy."

TK: So, EDS can be used to help pinpoint problems no matter what part of the body they occur in? Can it help with musculoskeletal problems? Hormone imbalances?

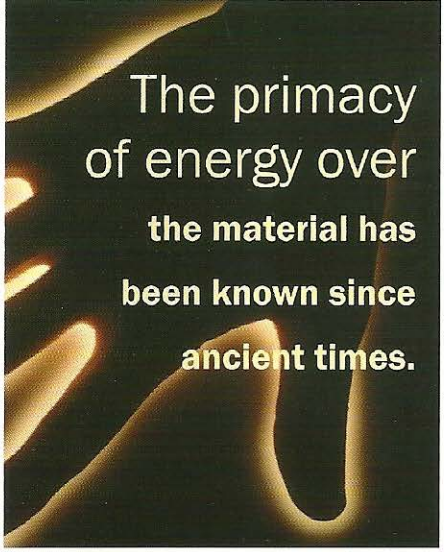
SM: Yes, with proper training, the versatility of EDS makes it a valuable adjunct to any type of practice. An acupuncturist can use EDS to discover the most disturbed meridian and then select an herbal formula that will balance it. A chiropractor may use it to find spinal subluxations and choose the best supplements to support the physical adjustments. Naturopathic physicians can detect a patient's food allergies using EDS and then select the best homeopathic remedies to help eliminate them. Medical doctors can employ EDS as a prescreen or follow-up for expensive lab tests, as well as using it to select the medication that will produce the least side effects for the patient. Many dentists find EDS indispensable in selecting the most compatible dental materials to use for each patient.

TK: As you've described the use of EDS, it sounds so simple and mechanical. Is it really as easy as hooking up a patient and having a machine tell you what's wrong and how to fix it?

SM: Absolutely not! It's important to emphasize the fact that EDS is only a tool. EDS machines do not produce automatic answers for medical problems with the push of a button. There is no "black box" effect at work, no secret circuitry or artificial intelligence contained inside these machines. It is the practitioner who is doing the testing with the aid of the instrument—the instrument itself is not doing the testing!

Every medical device produces some type of informa-

tion about the patient that must be interpreted by the practitioner. In this regard, EDS machines are no different than other medical tools such as an EEG, X-ray machine or even a stethoscope. Each of these tools require a trained practitioner who has the learning and experience to effectively interpret the results they produce. The mere act of owning an EDS device doesn't make one a medical practitioner any more than owning a musical instrument makes one a musician.



In the hands of a skilled practitioner, EDS machines are powerful tools that can directly access the body's sophisticated communication and control network. In this way, EDS devices can help practitioners diagnose medical conditions that are beyond the reach of conventional medicine because they provide a way to evaluate the patient at the energetic level–where all disease begins and ends.

Contact:

Scott Moyer has been teaching biological medicine and EDS to practitioners in the United States, Canada and Germany for more than ten years. He is currently president of the American Association of Living Systems Information Practitioners. AALSIP provides education and support for health professionals who are interested in EDS and energy medicine. Practitioners can learn more about EDS and the work of AASLSIP by contacting them at 800-888-9789.

Resources:

Energy Medicine: The Scientific Basis, *by James L. Oschman. Churchill Livingstone/Harcourt Publishers Limited, 2000.*

Life at the Edge of Science, *by Beverly Rubik. The Institute for Frontier Science, 1996. Website: www.healthy.net/frontierscience.*

The Body Electric: Electromagnetism and the Foundation of Life, *by Robert O. Becker, M.D., and Gary Selden. William Morrow and Company Inc., New York, New York, 1985.*

Science and Human Transformation: Subtle Energies, Intentionality and Consciousness, *by William A. Tiller, Ph.D., Pavior Publishing, Walnut Creek, California.*

Functional Medicine, *by Helmut W. Schimmel/Victor Penzer, Karl F. Haug Verlag GmbH, Heidelberg, 1996.*

The Bridge Between Acupuncture and Modern Bio-Energetic Medicine,
by Stuart J. Zoll, English edition 1993. Editions Haug International, s.p.r.l., Brussels, Belgium.

Valerie Hunt, Ph.D. Website: www.bioenergyfields.org.

Fritz-Albert Popp, Ph.D. Website: www.temple.edu/CFS/poppbib2.htm

International Institute of Biophysics. Website: www.datadiwan.de/iib/ib_000e_.htm

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