

EFFICACY OF CLARUS QLINK WITH MUSCLE WEAKNESS (S) ATTRIBUTED TO EMF EMISSIONS

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ABSTRACT

Twenty patients undergoing Applied Kinesiology treatment were chosen on the basis of presenting with recurrent muscle(s) weakness related to acupuncture system and symptoms which were obvious or exacerbated by contact with various levels and sources of electromagnetic fields (EMF). The emission levels were, where possible measured using a trifield meter and the various levels recorded. Patients were tested whilst in contact with these EMF and screened for specific muscle weakness namely unilateral or bilateral mid deltoid and retested wearing the CLARUS Q link to see whether this negated the weakness. The QLink is a device manufactured by CLARUS Products International Corp. worn around the neck, which the manufacturer purports to activate an omnidirectional protective field around the body protecting from the harmful effects of EMF. Muscle testing procedures were in accordance with methods outlined in Synopsis by David Walther. The initial screening test was performed with both a control and a bona fide QLink. Eighteen subjects (90%) showed no recurrence of acupuncture system weakness over the period of the trial (4 months). 60% of subjects had a significant improvement to one or more of long term symptom(s) and previously chronically weak muscle(s). 20% of subjects showed significant improvements in at least one symptom, which had not previously responded to treatment and 20% of subjects had no significant change in their symptoms but had improvement with chronic acupuncture system related muscle weakness.

PATIENT SELECTION

Patients were selected in-groups of various sizes according to the type of EMF sensitivity and in line with their daily activities. The groups were divided as follows:

EMF generated by,

Computers (more than 3 hours per day exposure)

Hairdryers (industrial type as found in hairdressing salons)

High tension powerlines

Mobile and or cell phones

General (T.V, microwaves, cars, geopathic grid lines)

All subjects but two selected were existing patients of the clinic that had been receiving treatment from time to time over various periods from six to twenty four months and exhibited a variety of symptoms from including:

Headache, muscle tension of the neck and the shoulders, recurrent low back pain, loss of coordination, light headedness, dizziness, depressive and emotional changes, allergies and digestive disturbances. Further, subjects had shown recurring muscle weakness relating to the acupuncture system found by standard AK methods, namely TL to the pulse points.

Two patients were accepted on the trial (husband and wife) on referral from a medical practitioner who uses the Vega method of diagnosis and had been treating these two people for the effects of environmental stress which was thought to be coming from high tension lines running almost directly over their house. These subjects displayed strong symptoms of immunosuppression with a variety of allergies and neurological deficit such as short-term memory loss and generally a feeling of vagueness.

All twenty patients were screened where possible for,

General random muscle weakness as evaluated by AK testing procedures.

Muscle weakness associated with the Meridian system (TL of pulse points).

Exhibition of mid deltoid muscle weakness, unilaterally or bilaterally with exposure to the source of EMF.

Interestingly, all twenty subjects exhibited bilateral mid deltoid weakness on exposure to the various sources of EMF including two on referral when tested in front of the office computer.

The subjects were identified and sub grouped were tested using two CIARUS QLinks, one a control and a bona fide pendant. Both were placed in separate black string tie bags And handled by a third party so that neither subjected nor examiner knew which was which, for:

Negation of the mid deltoid weakness while exposed to specific sources of EMF.

Change in the strength of muscles found weak that were associated with the meridian system.

Change in strength of the muscles found weak randomly.

The two subjects on referral for suspected sensitivity to high tension power line traveled three hours from a country area for their consultation and consequently were unable to be tested in situ, but both showed a marked mid deltoid weakness when tested sitting in front of our office computer.

Of the twenty subjects selected seventeen showed a marked muscle change (strength) when tested while exposed to a source of EMF and with contact with the bona fide pendant but not to the control. One subject showed change with the control pendant only and two to both pendant.

Interestingly, the subject that strengthened with the control pendant was later diagnosed as being neurological disorganized (switched).

All subjects were treated as previously had been the case using standard AK protocols and Chiropractic techniques. The muscle weakness found associated with the meridian system was treated using normal tapping techniques and acuaid on the tonification points of the deficient meridian(s). All subjects were instructed to wear the CLARUS QLink during the day as described by the manufacturers and with the option of wearing or removing the pendant at bedtime.

All subjects were monitored over a period of 4 months with initial weekly visits and a gradual decrease in frequency to three to four weeks to determine whether,

The initial muscle weakness associated with the meridian system recurred and/or other meridian system weakness.

Changes in the subject's symptom base.

The subjects overall impression as to their well being.

As all but two subjects were existing patients and had been for some time, they're past history and health status in particular to recurrent findings and progress, was well known. This historical information was used as a control or baseline to ascertain any changes and or progress with both treatment and wearing the QLink pendant. The two patients who had not previously been patients were monitored by both myself and the referring practitioner using Vega testing, as had previously been the case. Hypothetically then, as the treatment procedure(s) remained constant, progression or regression may be attributed to the QLink or some other unknown factor(s).

Table1. Classification of subjects according to varying sources of EMF

<u>Source of EMF</u>	<u>Number of Subjects</u>
Computers	10 (7 Female 3 Male)
Industrial Hairdryers	3 (2 Female 1 Male)
Mobile Phones	3 (all Male)
High Tension Power Lines	2 (1 Female 1 Male)
General (microwave oven, TV, car, hairdryers)	2 (all Female)

Table2. Description of change in findings and symptom base.

<u>Rating</u>	<u>Description</u>
++	Marked improvement of one or more of the long term symptoms and normalization of a previously weak muscle.
+	Improvement in at least on symptom which had previously not responded fully to treatment.
0	No improvement in symptoms and or lack of other progress
Z	Worsening of existing symptom base or new symptoms(s) foreign to the subjects base.

RESULTS

Each subject was examined, evaluated and findings treated on each subsequent visit as per normal procedure. Particular attention was paid to the meridian system for general muscle screening as well as for the muscles found to be weak on the initial screening exam. Eighteen of the twenty subjects showed no acupuncture pulse TL on all subsequent visits over the full four months of the trial. One subject, the one which strengthened to the control pendant, was stable for one month using the control pendant and then elicited a myriad of alternating weakness associated with multiple meridians. One showed acupuncture system related weakness on three occasions after the initial two months with muscles not previously identified as being weak.

Two subjects reported a marked improvement in long term subjects and four experienced improvements in at least one chronic symptom. Four subjects reported no discernable change in their previous symptoms but with no exacerbation of symptoms and no new symptoms.

TABLE 3

<u>Rating</u>	<u>No. Patients</u>	<u>Description</u>
++	12	Marked improvement of one or more long term symptom(s) and normalization of previously chronically weak muscle.
+	4	Improvement to at least one symptom which had previously not responded fully to treatment.
0	4	No improvement in symptoms and or lack of other progress
Z	0	Worsening of existing symptom base or new symptoms(s) foreign to the subjects base.

DISCUSSION

Interestingly, all subjects including the four that reported no obvious change in the symptoms, reported that they felt emotionally more stable and the ability to concentrate better and for longer periods of time since wearing the QLink pendant. Dr Robert Blaich also reported this in a similar study of 12 subjects. One subject who practices transcendental meditation reported feeling more focussed and able to enter a deeper state of meditation.

It was seen that based on the information gathered that the CLARUS QLink based on AK testing in a greater percentage of subjects tested is able to:

1. Negate weaknesses of muscles related to the acupuncture system.

2. Negate a specific mid deltoid muscle weakness created by exposure to varying sources of EMF.
3. In some way not entirely obvious enhances the healing process.