

Informational Biofeedback: EPFX / SCIO / QXCI and LIFE System

Introduction

The purpose of this paper is to present a short review of the history of Biofeedback technology and a summary of the advancements made during the development of the EPFX/SCIO/QXCI System and the Life System.

Informational Biofeedback is a recent development from the classical form of Biofeedback. By definition, Biofeedback is the response of a living system to a physical stimulus. As an example, consider Ivan Pavlov's (1849-1936) research where he developed a conditioned response, in a dog, to a physical stimulus. By providing a snack every time a bell was rung, the conditioned response of saliva production, in anticipation of food, was produced when the bell rang even though food was not provided.

Positive Biofeedback, as described in the Pavlov example above, results from providing a reward whenever a specific behavior is exhibited in response to a specific stimulus. Thus Positive Biofeedback provides a mechanism to reinforce a desired action.

Negative Biofeedback elicits a change in behavior or stops a behavior by providing a punishment whenever that behavioral pattern is attempted, thus discouraging the repetition of the activity.

Ancient Roots

Biofeedback is as old as medicine itself. Consider that the ancient masters of Chinese and Ayurvedic medicine monitored pulses as a feedback mechanism. In Chinese Medicine the pulses are monitored using the index (distal position), middle and ring (proximal position) fingers in the radial pulse area along the lung acupuncture channel. Three different depths or pressures are used: light, medium and deep. By monitoring the pace, shape and quality of the pulse, much information is gleaned about the patient. The pulses are related to meridians and thus to organs. Depending on the system being used, either six or 12 organs are evaluated. The most common system uses six organs that correspond with the yin or "Zang" organs. If the 12 organ system is used, then the light pressure pulse relates to the yang or "Fu" organs that are normally coupled to the "Zang" organs.¹

After an initial pulse analysis, combined with other diagnostic procedures such as tongue diagnosis, a therapeutic approach was determined and applied: acupuncture, moxa, herbs, etc. Biofeedback, i.e. post therapy pulse analysis, would determine the success of the specific therapies used.

The reading of pulses is an art form, mandating a great deal of skill on the part of the practitioner: many years of study and practice are required.

The Western Approach

Instead of looking at the patient from a holistic point of view presenting with systemic syndromes of imbalance in yin, yang, cold, hot, dry, damp, wind, etc., the Western researchers took the reductionistic approach of simplification to find what organ or part of organ was diseased and then what organism or chemical imbalance was causing the disease. This approach of specialization and specificity took the art out of health care. It resulted in a medical approach that had great effect on specific symptoms or conditions without paying attention to what other bodily systems contributed to, or were affected by, the condition. Likewise, the long-term effects the treatment might have on the rest of the body were disregarded. In an effort to reach a middle ground of ease of learning/using and looking at the bigger causal picture, homeopaths took a different approach.

Homeopathic Approach

Instead of looking at a few symptoms and finding a physical medication to suppress them, the homeopathic approach looks at the totality of symptoms in relationship to all systems of the body and then picks an energetic remedy that most closely temporarily produces that same symptom picture in a healthy person. There may be several remedies that approximate the symptom picture. So a trial is made of the most likely remedy. When the best remedy is selected the condition begins to resolve as the body, mind and consciousness are made aware the situation exists and are stimulated to reduce the causes. Picking the most correct remedy is still somewhat of a trial and error proposition. To help with quicker selection of the best remedy, the German Homeopath Dr. Reinhold Voll (1909-1989) developed the field of Electroacupuncture.

Electroacupuncture according to Voll ²

With the advent of modern electronics, Reinhold Voll, M.D. found he could measure the resistance of the meridians at their end points on the fingers and toes. By calibrating the resistance meter (ohm meter) so a reading of 50 was the norm, he could measure the condition of the meridians as too yin or deficient if a reading of less than 40 was recorded, or too yang or excess if a reading of 60 or higher was recorded.

Many systems of evaluating the measurements were developed. According to Charles H. McWilliams, Ph.D., the following detailed kinds of information could be gleaned from the point measurements:³

| Meter Reading | Interpretation |
|----------------------|--|
| 90-100 | Total Inflammation |
| 81-90 | Partial or Circumscribed Inflammation |
| 66-80 | Cumulative Irritation leading to premonitory situations; the tissue has a low threshold |
| 52-65 | Irritations in the physiological range due to chemical or psychological causes |
| 40-48 | Incipient degeneration, partial sclerosis and precancerous situations |
| 30-39 | Advanced degeneration or sclerosis and beginning cancer. The physician has 4 to 6 months to reverse this situation |
| 20-29 | Considerable degeneration which can be confirmed with the usual diagnostic methods e.g. x-rays. |
| 10-19 | Death ensuing shortly |

By individually introducing each of the most likely homeopathic remedies into the electronic circuit and re-measuring the stressed meridians, the best remedy would be isolated to the one that normalized the readings for the most meridians. This technique was called medication testing. One explanation for why introducing a substance into the circuit (into the energy field of the patient) resulted in a change in the resistance reading is based upon Hans Selye's (1907-1982) stress model.⁴ When the body is first exposed to a microorganism the immune system moves into the alarm phase where it is displaying symptoms and attempting to marshal its resources to defeat the infection. If unsuccessful, the adaptation phase is entered in which the body is using any means at its disposal to contain the invaders. A successful adaptation may not win the battle but does control the situation. An unsuccessful adaptation leads to the stage of Exhaustion and to the immune system being overrun. During this process, especially the initial alarm phase, the immune system is in a heightened state of alert and its electrical reactivity is hypersensitive to any stimulus. Putting a pathological vial in the circuit similar to the invading organism would illicit an electrical reaction away from normal, thereby helping to identify the microorganism. Putting a remedy in the circuit that might help resolve the situation would result in an electrical reaction towards normal, helping to choose the optimum remedy for successful resolution.

Voll's research found more meridians than the classical 12 in the Chinese system. He found two meridians on each finger and toe for a total of 20, plus the Central and Governing meridians running on the midline of the body.

Additionally, because the acupuncture points had higher conductivity, he could follow the sequence of points along a meridian and found that the points of a given meridian could be associated with specific tissues of the corresponding organ. For example, the large intestine meridian has points relating to sigmoid and transverse colon, descending colon and hepatic flexure, ascending colon and splenic flexure, transverse colon and cecum, etc. By ensuring that the chosen remedy normalizes all the abnormal points on all meridians, the most comprehensive results are obtained.

The downside to the Voll system was learning the location and meaning of the many individual points – a nontrivial task. Dr. Helmut Schimmel developed another system to reduce the learning curve and speed the clinical process.

Electroacupuncture according to Schimmel⁵ (initially Vega then PRT or Photon Resonance Test)

Dr. Schimmel (1929-2003) found that he could measure one point on the body and still get similar diagnostic information as that obtained from measuring all the Voll points by introducing filters into the circuit in the form of homeopathic vials that contained the energetic signatures of the different organs, individual tissues of organs, blood and its components, acupuncture meridians, nutritional, homeopathic or herbal remedies, hormones, neurotransmitters, etc. He could, for example, start with a vial representing the Most Stressed Organ that would produce a change in the reading. Then, adding organ vials one at a time to the Most Stressed Organ vial until the reading again changed back to what it had been, would identify the organ. Next, testing the different tissues of the identified organ would find a specific tissue producing another reading change. The circuit would now have three vials. This process was repeated looking for specific stressors that were involved such as microorganisms, poisons, chemicals, heavy metals, etc. Finally, remedies would be tested to find the optimum combination that would provide the best balance.

The difficulty with the Schimmel and the Voll techniques is the point test itself. It depends on the operator's skill and mental neutrality. Many hours of practice are needed to become proficient.

MORA Therapy

Franz Morell, MD developed the theoretic basis for MORA therapy. He conceptualized that, from the point of view of physics or biophysics, everything is characterized by a frequency pattern – all organs, tissues and biological chemicals like hormones, neurotransmitters and nutrients. Additionally, all abnormalities, diseases and microorganisms have frequency signatures. These disruptive signals use up and may overwhelm the body's innate capacity to heal. Since the goal of Homeopathy is to find a remedy whose frequency is the same or approximates that of the condition, why not use the exact frequency pattern by using the energies of the patient in an inverted form. If the disruptive patterns can be inverted or phase shifted by 180 degrees and fed back to the patient four dimensionally – to the three special dimensions of the location where they originate, and at the time they are present – then the negative waveforms are cancelled out and the immune system's burden is relieved resulting in much greater capacity to proceed with healing.

In June 1977, Franz Morell, MD teamed with electronic engineer Erich Rasche, owner of Med-Tronik Company, to develop an instrument that did not put the patient in the circuit, like all previous devices, and consequently no extraneous signals were introduced into

the treatment process. This was a large step forward for clearing and normalizing the more superficial meridian blockages and speeding the therapeutic process.

However, point testing was still used to identify the remaining more chronic meridian blocks, what pathologies were present and to recommend remedies for ongoing therapy. In addition, when the body has adapted to and compensated for an injury it cannot repair, it stops emitting frequency of injury and consequently chronic adaptive situations are not always addressed adequately by inversion of the body pathological field.⁶

Electronic Medicine according to Nelson^{7 8 9}

Along comes Bill Nelson with a unique perspective. Combining his engineering and medical background, he reexamined the basic tenets of the electroacupuncture systems:

- Possible measurement inaccuracy
 - Problem:
 - While it was obvious that individual practitioners, after many years of practice, were accurate and precise, it was also true that the measurement depended upon the skill of the operators, their neutrality and objectiveness and how they were feeling or being distracted at the time of measurement. Use of the point probe had to be consistent each time. The result of a measurement could be changed consciously or subconsciously by varying the speed of the measurement, the pressure, the angle and the position.
 - Accurate measurement was even more difficult because so many points had to be learned and tested in order to differentiate abnormal readings to specific areas.
 - Nelson's Solution:
 - Adapt the Schimmel technique of using filters to obtain the differential information and eliminate the need for multiple point measurements.
 - Remove the operator from the test by using computerized biofeedback technology to automate the test and the sequencing of the filters and to record the patient response.
 - This makes the whole diagnostic process double blind – neither patient nor practitioner knows what is being tested and therefore the results are not influenced.
- Reduce session time
 - Problem:

- Obtaining great accuracy from the test required measurement times on the order of seconds. This meant very long sessions or greatly reduced number of items to test, which would limit the likelihood of finding the optimum solution.
 - Nelson's Solution:
 - Research was conducted to discover the optimum tradeoff of speed vs. accuracy. Too fast a test would lead to large inaccuracies and slower tests created excessively long sessions. The optimum tradeoff seemed to be recording the reactivity of items tested at biological ionic exchange speeds of 1/100th of a second per item. This test was named the Xrroid Test and provided around 85% accuracy.
 - Perform a calibration prior to the test to establish an "Electronic Handshake" with the patient by measuring their response time and characteristics.
 - Instead of manually or mechanically placing or switching the filter vials into the circuit, a cubic structure was made housing a miniscule sample of each filter. The computer could then electronically switch each filter into the patient circuit, stimulate the filter to emit photons carrying the energetic signature to the patient and measure the response. This technique was based upon physicist Fritz Albert Popp's research into cellular communication by means of photon emission.
 - Provide a longer test capability for individual items to more accurately measure the resonance of specific items of interest.
- Provide a more holistic response to each item tested
 - Problem:
 - Electroacupuncture measures one electrical parameter, resistance, of one point on a meridian. This provides a very focused view of one piece of information along one meridian pathway. A slightly larger perspective is obtained by measuring multiple points on multiple meridians.
 - Nelson's Solution:
 - Look at a coherent overall body response by using conductive electrode straps around the extremities, wrists and ankles as well as a head strap, thus getting a more global response and allowing the software to perform a statistical analysis to improve the accuracy of the test data.

- Instead of measuring a single parameter of resistance at one point, utilize the 3 dimensional Trivector approach based on Ohm's law (voltage = amperage x resistance) and measure these factors on multiple channels, at the extremities and head showing the response of the body as a whole.
- The initial versions of the EPFX had 12 channels of information: direct electrical measurement of four voltage channels and four amperage channels; four calculated channels of resistance.
- Later versions of the equipment incorporated many additional channels of information by calculating reactance, susceptance, capacitance, inductance, etc.
 - Channels measured included:

| | | | |
|----|---|----|---|
| 1 | Voltage lower left quadrant | 29 | Reactance 5 Changes in volts, amps, Kohms |
| 2 | Voltage lower right quadrant | 30 | Reactance 6 Changes in volts, amps, Kohms |
| 3 | Voltage upper left quadrant | 31 | Reactance 7 Changes in volts, amps, Kohms |
| 4 | Voltage upper right quadrant | 32 | Reactance 8 Changes in volts, amps, Kohms |
| 5 | Resistance lower left quadrant | 33 | Susceptance 1 Inverse of total reactance |
| 6 | Resistance lower right quadrant | 34 | Susceptance 2 Inverse of total reactance |
| 7 | Resistance upper left quadrant | 35 | Susceptance 3 Inverse of total reactance |
| 8 | Resistance upper right quadrant | 36 | Susceptance 4 Inverse of total reactance |
| 9 | Amperage head pole 1 Brainwave | 37 | Capacitance 1 Changes in amps |
| 10 | Amperage head pole 2 Brainwave | 38 | Capacitance 2 Changes in amps |
| 11 | Amperage head pole 3 Brainwave | 39 | Capacitance 3 Changes in amps |
| 12 | Amperage head pole 4 Brainwave | 40 | Capacitance 4 Changes in amps |
| 13 | Amperage head pole 5 Brainwave | 41 | Capacitance 5 Changes in amps |
| 14 | Amperage head pole 6 Brainwave | 42 | Capacitance 6 Changes in amps |
| 15 | Amperage head pole 7 Brainwave | 43 | Capacitance 7 Changes in amps |
| 16 | Amperage head pole 8 Brainwave | 44 | Capacitance 8 Changes in amps |
| 17 | Frequency 1 lower left quadrant | 45 | Inductance 1 Changes in voltage |
| 18 | Frequency 2 lower right quadrant | 46 | Inductance 2 Changes in voltage |
| 19 | Frequency 3 upper right quadrant | 47 | Inductance 3 Changes in voltage |
| 20 | Frequency 4 upper left quadrant | 48 | Inductance 4 Changes in voltage |
| 21 | Frequency 5 Brainwave | 49 | Inductance 5 Changes in voltage |
| 22 | Frequency 6 Brainwave | 50 | Inductance 6 Changes in voltage |
| 23 | Frequency 7 Brainwave | 51 | Inductance 7 Changes in voltage |
| 24 | Frequency 8 Brainwave | 52 | Inductance 8 Changes in voltage |
| 25 | Reactance 1 Changes in volts, amps, Kohms | 53 | Hydration |
| 26 | Reactance 2 Changes in volts, amps, Kohms | 54 | Oxidation |
| 27 | Reactance 3 Changes in volts, amps, Kohms | 55 | Proton and Electron pressure |
| 28 | Reactance 4 Changes in volts, amps, Kohms | | Reactance 5 Changes in volts, amps, Kohms |

- Develop practitioner-independent remedy recommendations and therapies
 - Problem:
 - All electroacupuncture systems, including the early versions of the Nelson technology such as the Ecllosion, Natrix, etc., relied on point testing to identify remedies to be given.
 - Nelson Solution:
 - The multichannel approach allows bioresonance testing of thousands of substances (body tissues, vertebrae, acupuncture points, organ tissues, hormones, nutrients, herbs, homeopathics, microorganisms, etc.). The computer presents the results by ranking of the body's reactions from the most to the least.
 - Chaos theory, Fourier analysis and other advanced nonlinear systems of mathematical analysis of millions of bits of data allows the equipment to recommend the most beneficial treatments.
 - Autofocus technology allows the equipment to deliver electronic versions of therapies and automatically change the delivered therapy based upon the body's responses. This could include providing the information the body needs to move a vertebrae out of subluxation, patterns to balance acupuncture points, homeopathic energetics, nutritional patterns, etc.
 - Autofocus also allows the equipment to notify the practitioner when the therapy itself is too strong or too quick so that it becomes a source of stress for the patient. The therapy can then be stopped so the patient has time to assimilate the changes.

- Incorporate radionic capability to test the energetic blueprint or subtle bodies
 - Problem:
 - A truly holistic device tests the subtle fields or blueprint of the patient as well as the physiology. This allows detection of energetic aberrations before they are manifested as problems in the physical body – resulting in a new paradigm of wellness consulting. Early detection of aberrations in the auric fields opens the doors to true prevention – balance the blueprint and possibly prevent the physical problem from ever manifesting in physical form.
 - Nelson Solution:
 - Develop software code that utilizes the computer central processing unit (CPU) and electronic circuits to create a Quantum

Indeterminacy Field (QIF) that allows scalar informational bioresonance testing of the auric fields, subtle bodies, chakras and subconscious.

- Develop the technology to replace a linear analog frequency representation of the items in the test matrix (homeopathics, nutrients, microorganisms, tissues, emotions, acupuncture points, spine, color, chakras, subtle bodies, etc.) with a 22 by 22 digital matrix representing the three dimensional form of the trivector pattern of the substance (resistance, inductance, reactance). Examples of these 3 dimensional representations are at the end of this paper.

EPFX / QXCI / SCIO

The Early versions of this equipment were developed in Denver, Colorado. The speed of testing was researched in 1980 when it was determined that biological speeds of 1/100th of a second was most appropriate. The first software for the automated testing, called Xrroid, was developed in 1982. The trivector three dimensional representation of substances was developed in 1985. The EPFX, Electro Physiological Feedback Xrroid, test was registered with the FDA in 1989 as a method of rapid computer testing of patient physiological reactions to remedies. It was commercially available as the Ecllosion, which was registered as a medical biofeedback device. The Ecllosion and many of its derivatives in the USA (Natrix, Body Scan, etc.) still required the use of point testing to identify suitable remedies. Because the FDA rejected registration of a combined testing and therapy unit, the Ecllosion company moved first to Ireland and finally to its current home in Budapest, Hungary.

The QXCI (Quantum Xrroid Consciousness Interface) combines the EPFX computerized testing with computerized therapy. This included the Autofocus capability of changing the therapy provided based upon the measured response of the patient.

The present version of the equipment is called the SCIO, meaning “to know”. It has the same capabilities as the QXCI but advanced the technology by adding a CPU, computer processing unit, into the interface box. This reduces the load factor on the computer CPU and allows automated therapies to be run totally in the background while the practitioner provides more specific therapy in the foreground.

Both the QXCI and the SCIO are registered in the European Union.

A very interesting development occurred during the creation of this equipment. In the early days, it appeared that good programming practices were not followed. As various programmers came and went, the code was kluged together, added in anywhere convenient in a haphazard manner as new tests and therapies were incorporated. This led to a complex user interface and a steep learning curve. However, after many years of using the equipment and working with very sensitive people who can see and feel the

effects of the system, it appears that the chaotic nature of the code serendipitously led to the apparent ability of the program to access totally unforeseen and deeply buried issues underneath the displaying imbalances of the patient. In other words, the chaotic code somehow resonates with the chaotic causal factors underlying the patient's condition. Energy-sensitive people observing and feeling the effects of the equipment say the energetic interplay between their energy and the device seems to progress in spiraling and circling patterns without limitations – the equipment seems to follow wherever the subconscious leads.

Types of energetic balancing available in the SCIO include:

| | | | |
|----|---|----|---|
| 1 | Electro-acupuncture meridian therapy | 52 | Addiction release therapy |
| 2 | Rife technique | 53 | Super-learning programs |
| 3 | Color and music therapy | 54 | Degeneration/cancer therapies |
| 4 | Trivector or Mora like therapy | 55 | Hormonal/metabolic repair |
| 5 | Scalar therapy | 56 | Neurological repair |
| 6 | Allergy testing & desensitization therapy | 57 | Relaxation and sleep treatments |
| 7 | Homeopathic activation therapy | 58 | Digestive system therapy |
| 8 | Spinal alignment therapy | 59 | Serotonin metabolism stimulation |
| 9 | TENS therapy for pain relief | 60 | Skin aging treatments |
| 10 | Dental and TMJ analysis and balance | 61 | Overall immune stimulation |
| 11 | Adipose tissue control | 62 | Chronic fatigue syndrome therapy |
| 12 | Brainwave pattern therapy | 63 | Bad behavior in children treatments |
| 13 | Phobia control therapy | 64 | Anti-inflammation therapy |
| 14 | Null field harmonizing therapy | 65 | Electro-chelation circulation therapy |
| 15 | Schuman wave therapy | 66 | Fibrocyte treatment |
| 16 | Addition control therapy | 67 | Psychic abilities stimulation |
| 17 | Spinal energetic therapy | 68 | Blood sugar disorder corrections |
| 18 | Anti-aging therapy | 69 | Pathogen zap therapy |
| 19 | Animal testing and therapies | 70 | Imprinting/duplication of imponderables |
| 20 | Inanimate object testing and therapies | 71 | Electro-hypnosis and de-hypnosis |
| 21 | Geopathic stress corrections | 72 | Voice test analysis and therapy |
| 22 | DNA and RNA treatments | 73 | Brain wave pattern therapy |
| 23 | Chromosome/gene treatments | 74 | ADD/ADHD therapy |
| 24 | Mental NLP interface | 75 | Brain fatigue therapy |
| 25 | Allergy treatments | 76 | Subspace morphic transference |
| 26 | Adipose tissue treatments | 77 | Lower, upper and middle charka therapy |
| 27 | EEG, ECG therapies | 78 | Phase aberration therapy |
| 28 | Trivector resonance of back muscles | 79 | Wound/injury repair therapy |
| 29 | Autonomic nervous system balance | 80 | Homotoxicology protocol |
| 30 | Vagus nerve stimulation | 81 | Hertz resonance therapy |
| 31 | Anti-aging therapy | 82 | Neuro-emotional complex therapy |
| 32 | Phobia release therapy | 83 | Cranial-sacral therapy |
| 33 | Hip regeneration treatments | 84 | Dental therapy |
| 34 | Autism and dyslexia repair | 85 | Karma dissipation |

| | | | |
|----|---------------------------------------|-----|--|
| 35 | Corpus collosum stabilization | 86 | Higher purpose alignment |
| 36 | Artery and vein repair | 87 | Emotional growth stimulation |
| 37 | Oxygen stimulation | 88 | Body scan and face therapy |
| 38 | Hydration stimulation | 89 | Reflexology treatments |
| 39 | Sarcode balancing therapy | 90 | Sarcode/organ stimulation |
| 40 | Constitutional homeopathic therapy | 91 | Stabilization of heart rhythm |
| 41 | Overall rectification treatments | 92 | Spiritual attack or oppression release |
| 42 | Insight stimulation | 93 | Body to soul connection therapy |
| 43 | Open mind therapy | 94 | Learning disability therapy |
| 44 | Creativity stimulation therapy | 95 | Mental causes and affirmation therapy |
| 45 | Neuro-peptide balance and stimulation | 96 | Biorhythms synchronization |
| 46 | Neural-net stabilization | 97 | Eye stimulation therapy |
| 47 | Memory stimulation | 98 | Auditory repair |
| 48 | Intelligence stimulation | 99 | Bipolar depression therapy |
| 49 | Brain scan therapy | 100 | Emotional trauma/shock therapy |
| 50 | Vivid dream stimulation | 101 | Adrenal stimulation |
| 51 | Classical and quantum biofeedback | 102 | Bach and California flower stimulation |

In summary, the technological advancements of the EPFX / QXCI / SCIO are:

1. Electronic handshake = calibration to patient to determine individualized parameters and speed of testing
2. Xrroid test = rapid computerized testing of patient reactions to remedies
3. Automatic recommendation of optimal therapies
4. Automatic delivery of therapy
5. Autofocus = monitor patient response to therapy and modify the therapy based upon the observed response = biofeedback
6. Eliminate influence of practitioner on testing by eliminating the point probe
7. Quantum Indeterminacy Field, QIF, to include scalar or subspace testing/therapy to correct the blueprint, the subconscious, subtle bodies, chakras
8. Trivector representation of substances for more accurate testing
9. More accurate testing by using many channels of information, both direct and virtual. There are now over 100 channels.

The downside of the EPFX / QXCI / SCIO is several fold:

- Complexity of the user interface

- Steep learning curve
- Not always putting out the signals through the electrodes that are expected. This may be related to the interactive artificial intelligence component that changes the interaction with the patient depending upon real time responses of the patient
- Non repeatability of test results, sometimes called adaptable fractal. This presents a cognitive difficulty for many conventional practitioners. However, from the perspective of quantum physics, the very act of observing (testing) a system results in an energetic interaction that changes the system – the Heisenberg Principle. The body reacts as a fractal system according to the mathematic concepts of Chaos Theory – fractal systems have two underlying principles: 1) things never repeat and 2) small stimuli or changes create large results or effects on the system.
- Many glitches in the code when new updates are released leading to frustrated users. The code was originally developed in MSDOS and then migrated through, and added to, in all the various versions of Windows. This created very complex compatibility issues.
- Interpretation of the test results – see the Caution at the end of this paper.

L.I.F.E. System

The L.I.F.E. System, Living Information Forms Energy System, was developed from the frustrations of one of the largest QXCI distributors in the USA. There were continuous miscommunications, financial misunderstandings, software bugs leading to inordinate support issues, complicated user interface and steep learning curve requiring massive training and manpower to support the QXCI users in the field.

The decision was made to create a new system that had many of the same capabilities as the QXCI but that would attempt to eliminate many of the downsides listed above:

- The software was coded completely from scratch for the Windows XP platform to eliminate software bugs.
- Fractals were used to represent the informational patterns of the more than 7,000 items in the test matrix instead of the trivector approach of the SCIO.

The benefits of this approach are significant:

- Software glitches and bugs are greatly reduced, since all code was developed for the Windows XP platform.

- A standard user interface is used as much as possible making the learning curve significantly shorter.
- When specific signals and waveforms are said to be delivered, they can be measured with an oscilloscope at the output signal.

These benefits appeal to left brain personality types and clinicians who have busy practices, limited time and who want to be able to send an assistant for a two day training and then have them able to operate the equipment the next day.

When using the LIFE System with highly sensitive people, they describe the session as being very linear in nature. The LIFE seems to set up a rectangular energetic boundary around the individual and then do its analysis and balancing in a very linear and analytical way from top to bottom.

Types of energetic balancing in the LIFE include:

| | | | |
|-----|-----------------------------------|-----|-------------------------------------|
| 1. | Spinal profile | 22. | Nerve profile |
| 2. | Dermatome profile | 23. | Bone profile |
| 3. | Color profile | 24. | Lymph profile |
| 4. | Chakra profile | 25. | Ear & Eye profile |
| 5. | Neuro-emotional profile | 26. | Sinus profile |
| 6. | Meridian profile | 27. | Sport, Injury and Trauma profile |
| 7. | Organ Assess and feedback profile | 28. | Dental profile |
| 8. | Chromosome and Gene profile | 29. | Allergy profile |
| 9. | Cell-Com profile | 30. | Homeopathic profile |
| 10. | Organ Specific sarcodes | 31. | Nutritional profile |
| 11. | Muscles, Cartilage and ligaments | 32. | Emotional Transformation & Timeline |
| 12. | Circulatory and Heart profile | 33. | Hormone profile |
| 13. | Respiratory profile | 34. | Brain profile |
| 14. | Digestive profile | 35. | Cosmetic profile |
| 15. | Nerve profile | 36. | Detox & Multiple Stress profile |
| 16. | Bone profile | 37. | Miasm profile |
| 17. | Lymph profile | 38. | Anti-Aging profile |
| 18. | Digestive profile | 39. | Pets/Animals profile |
| 19. | Timed, Bio-specific profiles | 40. | Dimensional Transformation profile |
| 20. | Iridology profile | 41. | Past Life profile |
| 21. | Bio-Feedback profile | | |

Downsides to the LIFE from some viewpoints:

- Uses a very structured and linear approach instead of the SCIO approach of spiraling cycles that are unbounded. This may be a positive for some people.

- Does not yet include all the modalities of the SCIO due to the shorter developmental cycle.
- Does not provide as much guidance for which modalities to use based upon the client's responses.
 - Many areas require the practitioner to decide what areas to balance rather than testing and making suggestions.
- Does not test for when the client enters an Alarm phase of stress due to excessive amounts of therapy.
- Not as many channels of information are used.
- Interpretation of data - see Caution in next section.

Caution

The interpretation of the data from the SCIO or the LIFE System is misunderstood and can lead to discouragement with the equipment or even to legal ramifications. Many practitioners still approach the interpretation from the reductionistic medical point of view – they want to know the diagnosis, the name of the problem, and the prescription: the treatment or supplement that will cure the problem.

These devices are not designed to find the disease or put a label on the symptoms. They simply measure the physiological and energetic reaction to the thousands of items tested, and rank them from the most reactive to the least. Every client reacts to all items. This does not mean they will get or actually have every disease or that they need every nutrient or therapy. In order to determine the significance of any item, even of the highest reacting one, a longer test needs to be done to determine the resonance of the energetic stimulus. Even if there is a high resonance, the information cannot be interpreted as a diagnosis or prescription, because there are many reasons the reaction may have occurred and all possibilities need to be evaluated:

- The person may just not like the energy – for example, if leprosy is reacted to they may just not like that stimulus rather than having the condition or ever being likely to get the condition.
- The person may really like the energy – i.e. they may react to coffee or chocolate because they would really like some at that moment.
- The person may have a genetic predisposition for the condition.
- The person may have had an exposure to an infectious condition that has been eliminated or suppressed on the physical level but still has an energetic presence in the body.

- The condition may not be present in the physical body nor diagnosable by medical tests but still may be detectable in the energy field.
- The condition may actually be present in the physical body.

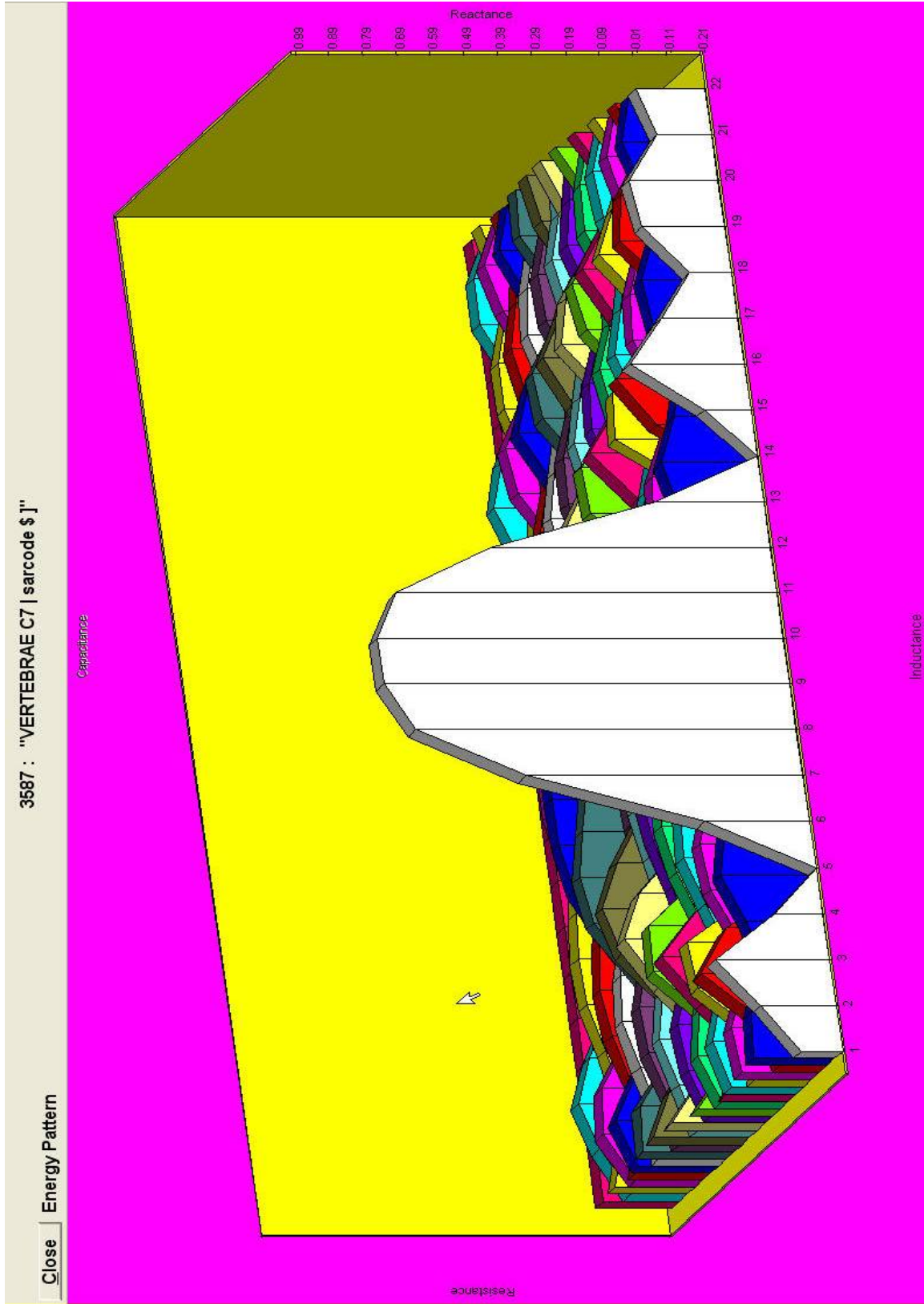
Consequently, interpretation of the data is important and can possibly be more easily done by looking for systemic patterns – that is, multiple pointers to one system being more out of balance than any others. Then the session can be focused on balancing the various aspects of wellness for that system.

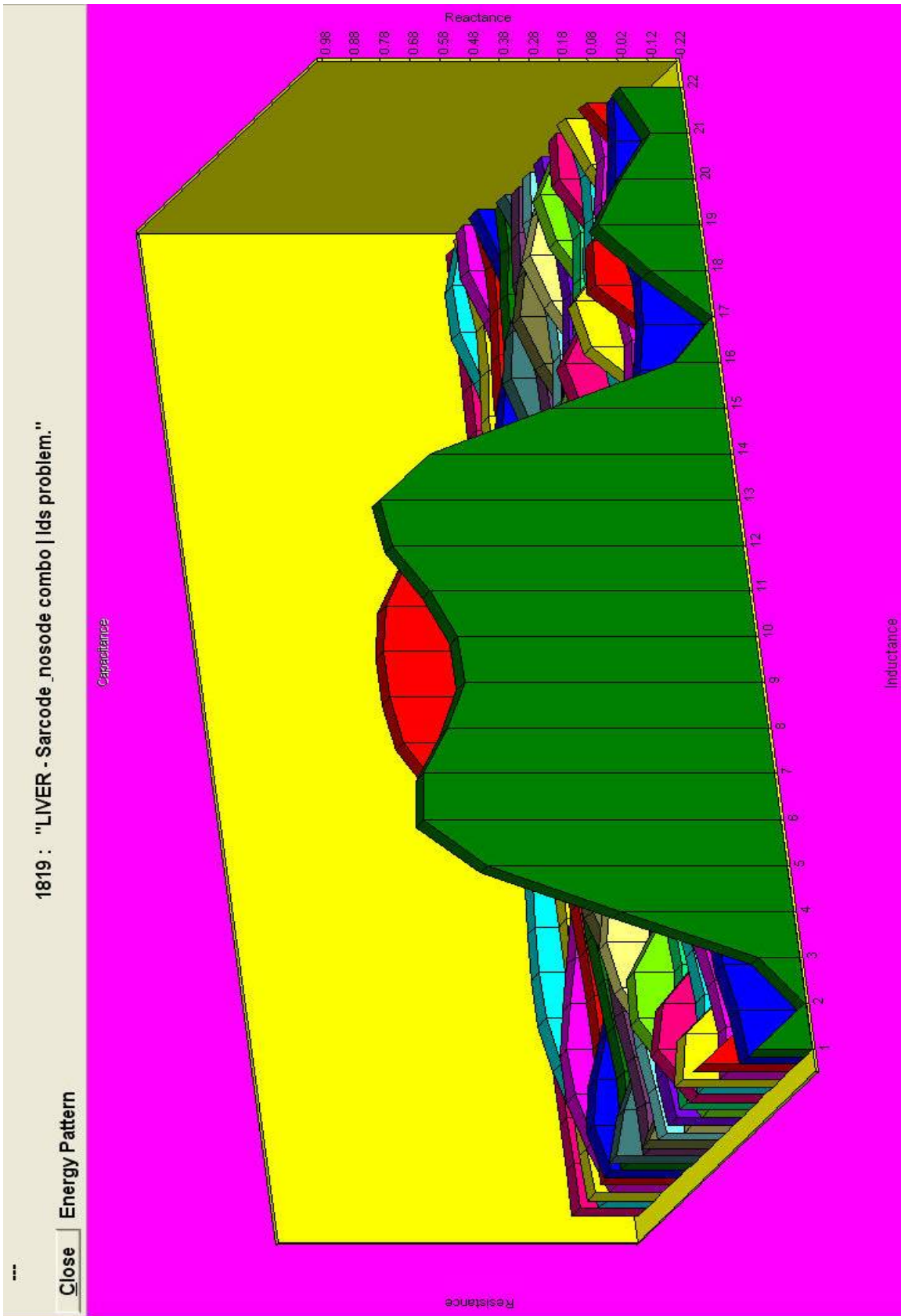
Another confounding characteristic, for both practioners and clients, of these devices is when the client has a medically diagnosed condition that does not show up in the high reactive items in the test matrix. The assumption is that the device does not work. There are a couple of reasons for this type of result:

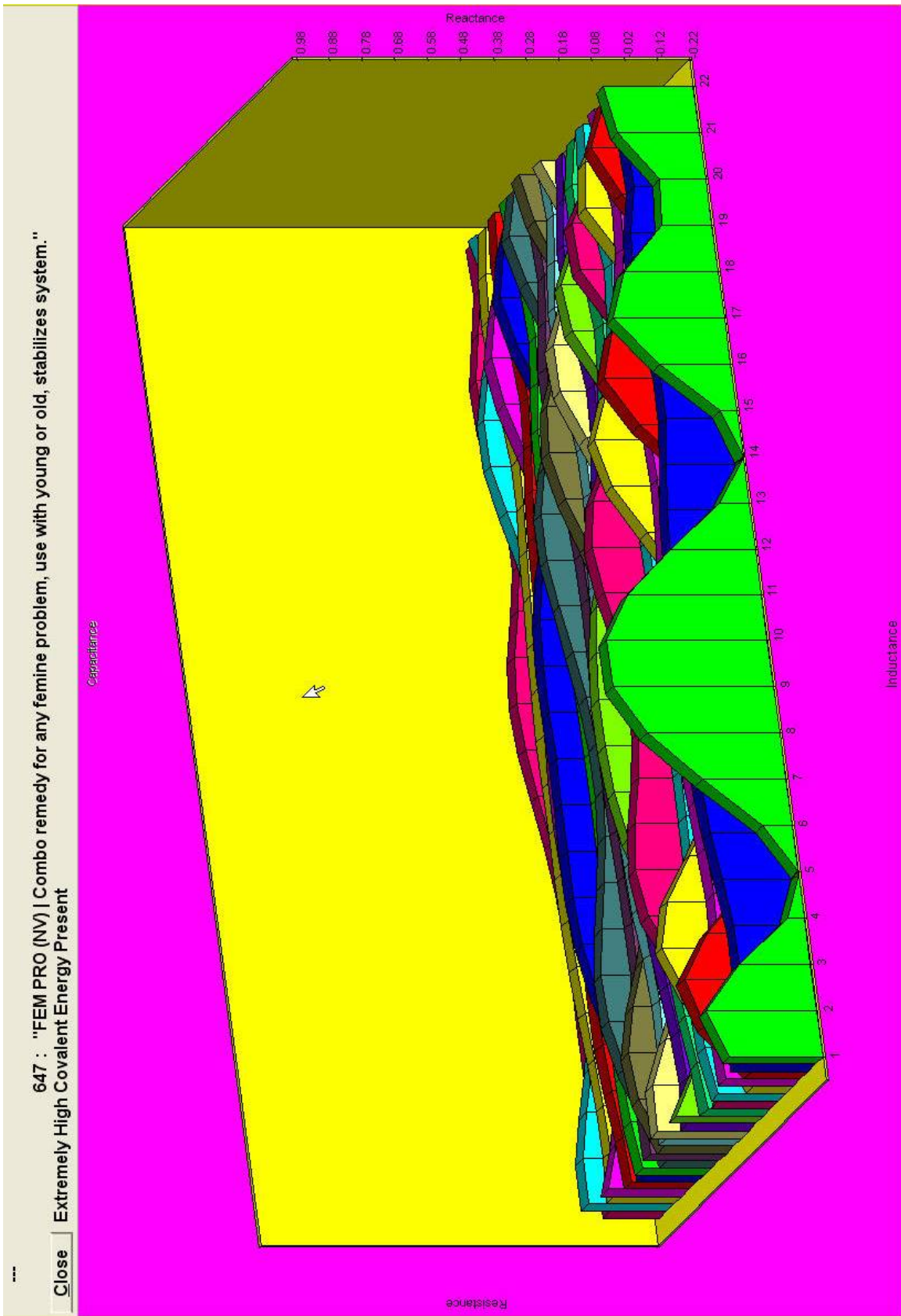
- The consciousness of the client is aware of the condition and is working on it so the test signal is not a surprise. A big reaction does not occur and the item is buried in the midrange of reactions.
- The subconscious of the client is not ready to work on that condition specifically until other preliminary areas are addressed or until more trust is developed between the practioner and the client.

The beauty of these types of devices is they are designed to find the many underlying stresses in the internal milieu that set individuals up to be susceptible to the complaints they come in with. If people come in for wellness checks or preventive maintenance, then imbalances, found in their energy fields before they manifest in the physical body, can be balanced and the physical ailment may possibly be prevented entirely.

Appendix A: Homeopathic Remedy Chart Examples







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- ¹ O'Connor, J.; and Bensky, D. "Acupuncture A Comprehensive Text" Shanghai College of Traditional Medicine. Seattle: Eastland Press 1981
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- ³ McWilliams, C. H. Ph.D "Treatise of Acupuncture, Volume I, Electroacupuncture" Miami: Health Sciences Research 1980
- ⁴ Selye H. MD "The Stress of Life" New York: McGraw-Hill 1956
- ⁵ Fehrenbach J., Noll H., Nolte H. G., Schimmel H. W. "Short Manual of the VEGATEST-method" Schiltach, Schwarzwald: Bio-energetic regulatory techniques (B.E.R.) VEGA Grieshaber GmbH & Co
- ⁶ Morell, F. MD "The Mora Concept Patients' Own and Coloured Light Oscillations Theory and Practice" Heidelberg: Karl F. Haug 1990
- ⁷ Kelsey, J. PhD. "The Quantum Xrroid Consciousness Interface, Functional User Guide" Solihull, UK: John Kelsey 2000
- ⁸ Nelson, W. "Promorpheus An Advanced Treatise on the Subspace and Quantum Aspects of Biology" Budapest, Hungary: Academy Press 1996
- ⁹ Nelson, W. C. "The International Journal of the Medical science of Homeopathy" Volume 1 through 4, Budapest, Hungary: Homeo Diagnostic Press