

JILL'S STORY OVERCOMING FIBROMYALGIA

Case Summary

A 54 year old woman (who will be referred to as Jill) presented with [fibromyalgia](#), [TMJ disorder](#), and severe food [allergies](#). Allopathic protocol medicine had been unsuccessful alleviating her symptoms, despite the prescription of four drugs, including 400 mg of antidepressants.

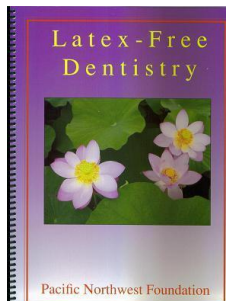
Her pain excruciating and her energy non-existent, Jill sought out [nonprotocol medicine](#). She located a health care provider (who will be referred to as Jack) who provided [Neural Kinesiology testing \(NK\)](#). Initial testing revealed that she was positive for [toxic](#) chemicals and heavy metals. She was also suffering structural misalignment due to severe problems with her bite. Her teeth had been ground down earlier in her life in an unsuccessful attempt to treat her TMJ disorder (and left her teeth in a state of [malocclusion](#)). She was wearing a [dental appliance](#) that was further causing her bite to be off. Jill tested to start on remedies to stimulate cellular [detoxification](#). She also tested that she should discontinue using her dental appliance until it was adjusted to make her bite line up properly.

As her body detoxed and her [immune system](#) rebuilt, testing revealed other oral complications. Testing further indicated that the material used in fillings in all four quadrants of her mouth was incompatible with her. She was also suffering from several [cavitations](#) in both her [mandible](#) and [maxilla](#). These complications tested as being additional underlying causes to her condition. Jill began working with a very skilled dentist who replaced the incompatible materials in her teeth and adjusted her [dental appliance](#) to correct her bite.

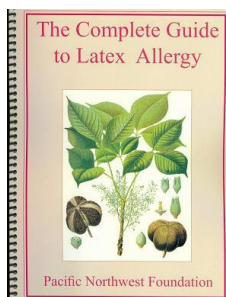
Within a month of working with Jack, Jill was still suffering muscle pain but was no longer experiencing fatigue. After a month and a half, all of Jill's [fibromyalgia](#) symptoms were subsiding. On June 9, 2003, she reported having had the best week she'd had in many years. While she still had occasional sporadic muscle pain, the constant throb which had been with



[Latex Allergy Resource Guide](#)



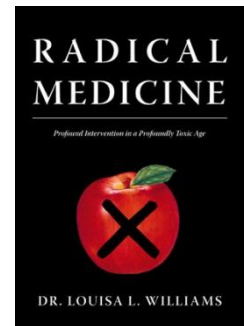
[Latex-Free Dentistry](#)



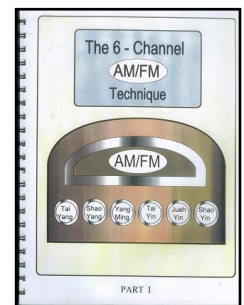
[Complete Guide to Latex Allergy](#)



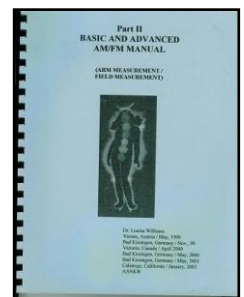
[Latex-Free First Aid Kit](#)



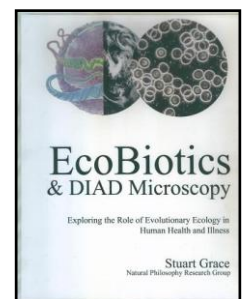
[Radical Medicine](#)



[The 6-Channel AM/FM Technique](#)



[Basic and Advanced AM/FM Manual](#)

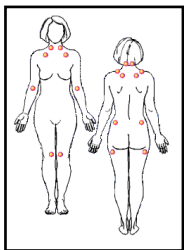


[EcoBiotics](#)

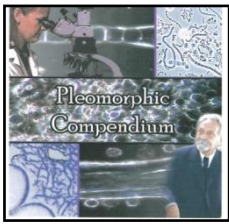
PACIFIC NORTHWEST FOUNDATION



[Chelita: A Cancer Survivor' Story](#)



[Overcoming Fibromyalgia](#)



[Pleomorphic Compendium](#)



[T-shirt](#)

her every waking moment was now gone. Soon after, she reported that she was enjoying an unbelievable amount of energy.

Jill tested for [homeopathic](#) remedies to handle the muscle pain when it arose, and continued on a [detoxification](#) regimen to rid her body of solvents. She also continued to work with the dentist.

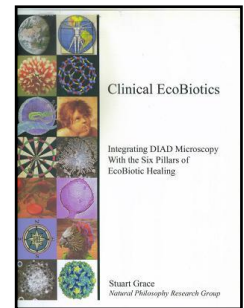
After two months of working with Jack, Jill was feeling a significant change in the kind of lifestyle she was able to enjoy. Her food [allergies](#) were also now beginning to subside, and she was able to eat grains and dairy products with no ill effects.

On June 30, 2003, Jill decided that she wanted to wean herself off of her antidepressants. She completed the process on July 20, 2003.

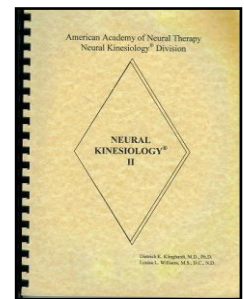
By the end of August 2003, Jill was no longer experiencing [fibromyalgia](#). She was jogging regularly, camping in the woods, and taking cross country backpacking trips – enjoying an active lifestyle that would have been inconceivable the previous spring. Her food sensitivities had also been entirely eliminated. Pizza – which was a cocktail of the food substances Jill had been allergic to – was now consumed without any adverse affects.

Over the next three years, Jill continued to get periodic NK testing with Jack as she worked to resolve her dental issues. Her [TMJ disorder](#) occasionally flared up, but in a much milder version than what she had been afflicted with since her 20's. She continued seeing her dentist to adjust her bite, both modifying the actual teeth themselves and the appliance.

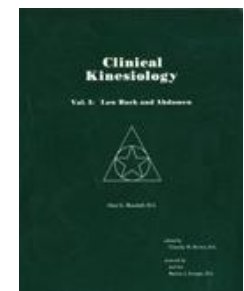
Jill's story is a remarkable testament to the ability to cure conditions which have been deemed "untreatable" by allopathic protocol medicine. The only thing more remarkable than her recovery was the time frame in which it happened – after just two months her symptoms had drastically reduced, and in six months she was living an entirely new life. She went from being on disability to leading a lifestyle that was more active than it had been before the onset of her medical crisis.



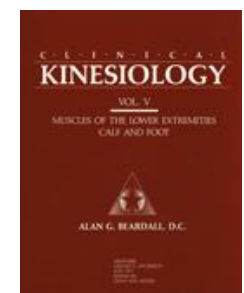
[Clinical EcoBiotics](#)



[Neural Kinesiology \(aka A.R.T\)](#)



[Muscles of the Lower Back & Abdomen](#)



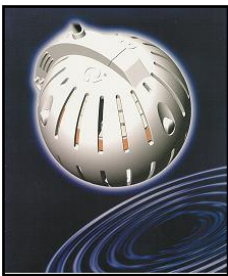
[Muscles of the Lower Extremities](#)



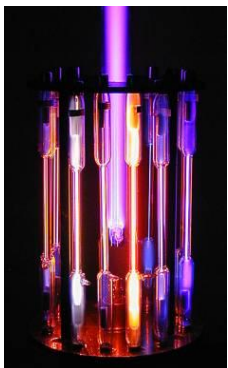
[Coffee: To Drink, or Not to Drink?](#)



[Genetically Engineered Food](#)



[Q2 B.E.F.E.](#)



[Multiwave Oscillator](#)

Detailed Case History

Case Introduction

In April of 2003, a fifty-four year old woman (who will be referred to as “Jill”) was suffering from a variety of symptoms including food sensitivities, seasonal [allergies](#), [TMJ disorder](#), and crippling [fibromyalgia](#). The pain and fatigue she suffered from the fibromyalgia was so severe that, despite numerous prescription pain killers, she was basically bedridden. It took all her energy to vacuum a single room of her house, and the exertion would send her to bed for the rest of the day.

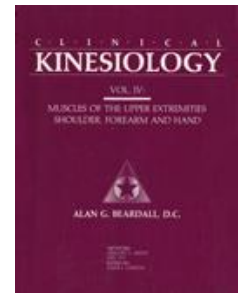
Jill had suffered [TMJ disorder](#) from the age of twenty-nine, and fibromyalgia from the age of 36. Having found no results with allopathic protocol medicine, Jill pursued nonprotocol medicine with simple ambitions: she wanted more energy and less pain.

Surgical History

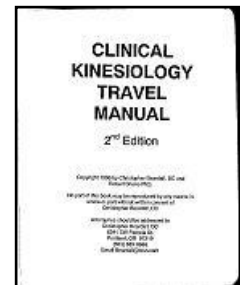
Jill’s medical history included a number of surgeries, the first of which was the removal of her tonsils and adenoids at the age of eight. At the age of 40, she had a benign mass removed from her left breast. Four years later, she had surgery to treat a hernia. Three years following, Jill had laparoscopic surgery to remove large benign growths near her ovaries. Three years after that, she had two surgeries within two months – the first was to fuse vertebral discs in her neck, the second was to remove bone spurs. One year after these surgeries, both of Jill’s ovaries and her uterus were removed in a hysterectomy.

Dental History

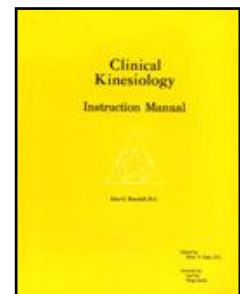
Jill had numerous dental interventions over the course of her life. She wore upper braces as a child, and as a teenager she wore a full set. In her early thirties, Jill had her teeth reshaped to help combat her [TMJ disorder](#) (the result of which left them ground down and in a state of [malocclusion](#)). She had additional TMJ work done ten years later, which included both cranial-sacral work and orthotics. At the age of 50, Jill had her mercury fillings removed.



[Clinical Kinesiology: Muscles of the Upper Extremities](#)



[Clinical Kinesiology Travel Manual](#)



[Clinical Kinesiology Instruction Manual](#)



[Clinical Kinesiology TMJ & Hyoid Muscles](#)

Prescription Drug History

By 2003 Jill was taking two different antidepressants – Amitriptyline (at a dose of 250 mg) and Effexor (at a dose of 150 mg). She was also taking two different types of hormone therapy – Prometrium (in 100 mg doses) and Estradiol (in 1 mg doses). Despite this drug intervention, Jill’s symptoms had remained severe.

April 23, 2003 – First NK Testing

In April of 2003, Jill’s exploration into nonprotocol medicine led her to try [Neural Kinesiology testing \(NK\)](#).

At her first NK session, she was in crash mode, testing positive for toxic chemicals and heavy metals.

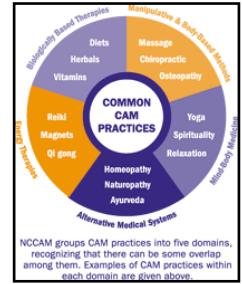
Testing revealed a hierarchy of five priorities. The number one priority dealt with her urinary system, specifically her urethra. The remaining four priorities dealt with dental interferences. She tested allergic to the material in her [dental appliance](#) and allergic to latex. She tested that her dental appliance was causing numerous distortions in her cranial sacral bones, as well as her spine. Her bite was wasn’t lining up either in the front or in the back.

To address the toxicity and urinary system, Jill tested for a seven day regimen of My AminoPlex and NeproTec I and II.

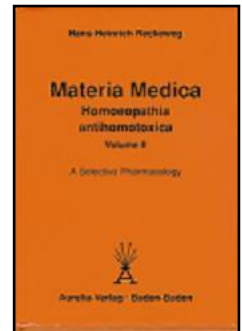
To address the dental interferences, Jill tested to have her [dental appliance](#) adjusted so that her occlusion would improve, and to discontinue using her dental appliance until this was done.

May 5, 2003 – Second NK Testing

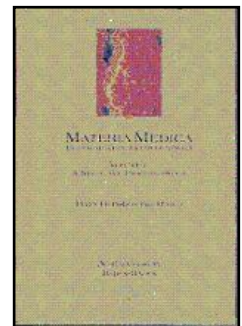
Jill went for her second Neural Kinesiology testing two weeks later in May 2003. She had followed the My AminoPlex and NeproTec regimen, but was still wearing her dental appliance, and had not yet had it adjusted. Jill was still in crash mode, though this time because of dental interference; her [dental appliance](#) was causing her brain to oscillate (meaning signals were getting mixed up between the right and left hemispheres



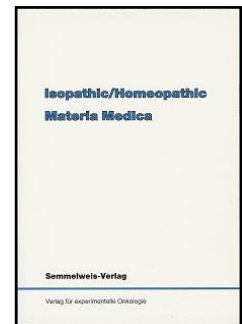
[NCCAM](#)



[Homotoxicology
Materia Medica I](#)



[Homotoxicology
Materia Medica II](#)



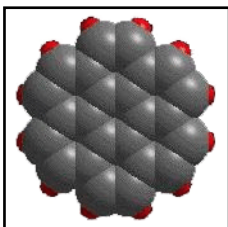
[Isopathic/
Homeopathic
Materia Medica](#)



[Biomodulator](#)



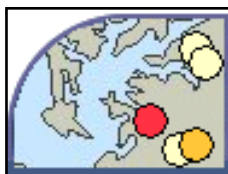
[SCENAR](#)



[Toxicity Study](#)



[Our Toxic Times](#)



[TOXMAP](#)

of the brain).

Jill presented with symptoms of occasional pain. She had gone to the emergency room the previous weekend because of abdominal pain, but the ER had not found anything wrong with her.

Testing revealed a hierarchy of three priorities: respiratory, lymph and immune, and dental interferences.

Her respiratory system was experiencing [detoxification](#), particularly her bronchi. To aid the detox, she tested for a ten day regimen of My AminoPlex and NeproTec I and II.

Her lymph and [immune system](#) tested problems with her Peyer's Patches. To remedy this, she tested for a regimen of Rebas, to be taken in four doses every third day.

Her dental interference tested to be resulting in cranial lateral compression; she again tested a need to have the appliance adjusted to fix her bite. Jill also tested to avoid plastic.

May 19, 2003 – Third NK Testing

Jill went for her third testing two weeks later. She reported only fatigue, not pain. She was again in crash mode, this time due to toxic chemicals.

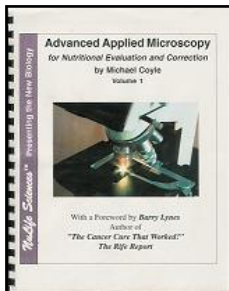
Testing revealed a hierarchy of four priorities: cardiovascular, cells and tissue, integumentary, and special senses/teeth.

Jill's cardiovascular priority dealt with her capillaries. She tested to use Kallium Sulfuricum, one of the twelve biochemical salts of Dr. Wilhelm Schuessler.

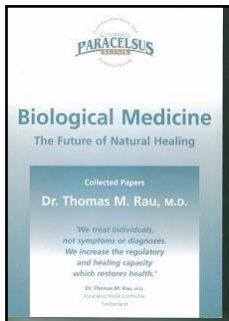
Jill's cell and tissue priority dealt with her bite, mouth, and teeth. She tested for cavitations to be removed near four of her teeth (#1, 2, 15, and 16). She tested for laser therapy to address problems with teeth #17 and 32. Jill also tested for the removal of the splint in her mouth, as well as the removal of several incompatible fillings. She tested allergic to materials which were used in fillings in all four quadrants of her mouth.



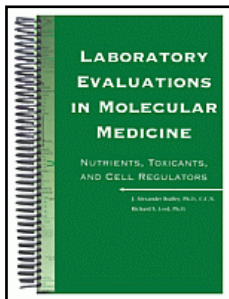
[My AminoPlex](#)



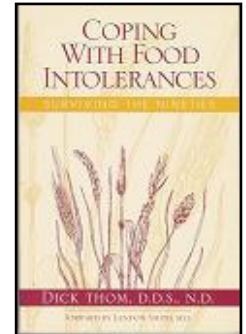
[Advanced Applied Microscopy](#)



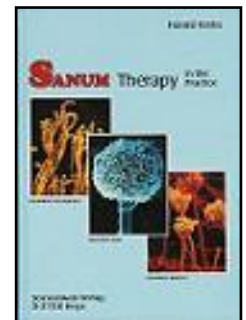
[Biological Medicine](#)



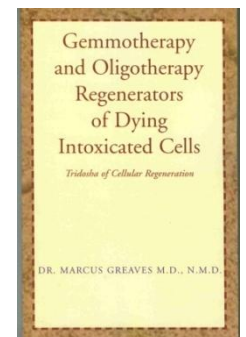
[Laboratory Evaluations in Molecular Medicine](#)



[Coping with Food Intolerances](#)



[Sanum Therapy](#)



[Gemmotherapy and Oligotherapy Regenerators of Dying Intoxicated Cells](#)

To address Jill's integumentary system, she tested for a five day regimen of Ubichinon Compositom.

Jill's special senses were a reflection of what was uncovered in the previous two testings – that she needed her [dental appliance](#) adjusted to fix her anterior and posterior stops.

May 22, 2003 – Fourth NK Testing

At Jill's fourth Neural Kinesiology testing, she reported feeling much better. For the first time, she did not test in crash mode.

Jill tested that she should discontinue the use of Flonase to address her seasonal [allergies](#), and instead switch to BHI Allergy tablets, to be taken as needed. She also tested to discontinue use of Ibuprofen.

Jill tested to start a regimen of My AminoPlex and NeproTec I for 21 days (one cycle of the [immune system](#)).

She also tested to treat her upper cavitation sites with the laser, in the same manner she'd been treating the lower.

June 9, 2003 – Fifth NK Testing

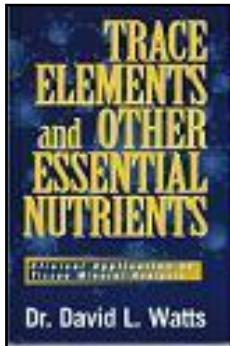
At Jill's fifth Neural Kinesiology testing, she was again not in crash mode. She reported that the previous week had been the best one she'd had in years. She was still experiencing some muscle pain, but only sporadically.

Jill tested a hierarchy of three priorities: brain and nervous system, [allergies](#), and structural.

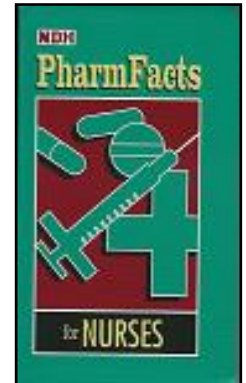
Her brain and nervous system priority dealt with her medulla, which was trying to detox. To help, she tested to take a spagyric – specifically the Pekana remedy Apo Plum, which was to be taken with meals for ten days.

For her [allergies](#), she tested to use BHI Allergy tablets as needed.

Her structural priority dealt with her mandible. Her coronoid process (the front part of the jaw hinge) was operating



[Trace Elements and Other Essential Nutrients](#)



[PharmFacts for Nurses](#)



bilaterally (moving from side to side rather than finding the correct bite). She tested for the same remedies she had previously, in regard to correcting her bite.

To address sporadic muscle pain, Jill tested to use BHI Spasm/Pain tablets as needed.

June 19, 2003 – Sixth NK Testing

At her sixth Neural Kinesiology testing, Jill reported a remarkable change in her condition. She said she was experiencing “unbelievable energy,” and cited that the night before she had been up until 2:00 in the morning with no problems and no pain. Again, she was no longer in crash mode.

She tested two priorities: special senses/sinuses and urinary system.

Her special senses/sinuses priority dealt with her mouth, and she tested for the remedy Chrys, one ampule of which was to be taken sublingually for six minutes at bedtime every third day for three doses.

Her urinary priority dealt with her kidneys. She tested to take one tablet of Kallium Sulfuricum (one of the twelve biochemical salts of Dr. Wilhelm Schuessler) each morning and another at bedtime for 21 days.

June 30, 2003 – Seventh NK Testing

Jill reported feeling “so much better” at her seventh testing. She noted a significant change in the kind of lifestyle she was able to enjoy. She had just returned from a week long vacation at a cabin in the woods, and was tolerating grains and dairy foods. At this point, she decided that she wanted to try and wean herself off of antidepressants.

Jill tested for one priority: endocrine and reproductive system. To address this, she tested to take a ten day regimen of My AminoPlex and NeproTec I and II.

Jill was experiencing seasonal [allergies](#), and tested to use BHI Allergy tablets as needed to address those symptoms.



In regards to her desire to wean herself off of the antidepressants, Jill tested to lower the dosage of Effexor from 150 mg to 75 mg, and Amitriptyline from 250 mg to 100 mg.

July 16, 2003 – Eighth NK Testing

At her eighth testing, Jill reported symptoms of dizziness and nausea which accompanied weaning herself off the antidepressants.

She tested for a hierarchy of two priorities – digestive system and circulatory system.

Her digestive priority dealt with her pancreas. She tested for a seven day protocol of Protease.

Her circulatory priority dealt with her capillaries. She tested for a fourteen day protocol of CoQ 10.

In her efforts to wean herself off of the antidepressants, she tested to wean the 100 mg doses of Amitriptyline to every third day, and the 75 mg doses of Effexor to every third night.

Jill was also testing that her [dental appliance](#) (which had been modified) was now needed.

July 29, 2003 – Ninth NK Testing

Jill had successfully weaned herself off of all her prescription drugs on Sunday, July 20, 2003. At her testing on July 29, she was experiencing dizziness, nausea, chills, and sweats. She also reported symptoms of back pain, urinary irritation, nausea, loose bowels, and dental pain.

Testing revealed a hierarchy of two priorities: special senses and sinuses, and cardiovascular system.

Jill's special senses and sinuses priority again had to do with her mouth; she tested to have the crown on her #18 tooth replaced.

Her cardiovascular priority dealt with her blood; it was struggling to expunge toxins that had been pulled into the



blood stream during detox. To remedy this, she tested for a ten day regimen of My AminoPlex and NeproTec I and II.

Her urinary irritation, nausea, and loose bowels all tested as being caused by detoxing solvents.

Jill's back pain tested as being the result of her structural realignment, which was taking place because of her modified [dental appliance](#).

Testing her dental pain that she needed to have her dental appliance adjusted again, as it related to teeth 18 through 20 and 28 through 31. To relieve dental pain, she tested to take Arnica as needed.

August 28, 2003 – Tenth NK Testing

At her tenth testing, Jill reported a urinary tract infection, pain and popping sounds in her jaw, inner ear disturbance, and dizziness.

Jill tested a hierarchy of four priorities: urinary, lymph and immune, respiratory, and structure.

In regards to her urinary system, she tested stress to her kidneys, bladder, ureter, and urethra, as related to the [detoxification](#) of solvents and fungi. To remedy this, she tested to use Oregacyn for ten days.

In regards to her lymph and [immune system](#), she tested that her Peyer's Patches needed support. To help rebuild them, she tested to take seven 1 ampule doses of Rebas.

In regard to her respiratory system, she tested problems with her trachea. The Oregacyn tested for her urinary system would also remedy these issues.

Her structural priorities dealt with her cranial bones and spine. The cranial issues again flagged the coronoid process of her jaw. These issues were to be dealt with through cranio sacral massage and continuing adjustment of her dental appliance.



September 2003 – September 2006.

By the end of the summer of 2003, Jill was no longer experiencing [fibromyalgia](#). She was jogging regularly, camping in the woods, and taking cross-country backpacking trips – enjoying an active lifestyle that would have been inconceivable the previous spring. Her food sensitivities had also been entirely eliminated. Pizza – which between the dough, cheese, and tomato sauce was the perfect cocktail of all the food substances she'd been allergic too – was now consumed without any adverse affects.

Jill continued to get periodic NK testing for the next three years, as she worked to resolve her dental issues. Her [TMJ disorder](#) occasionally flared up, but in a much milder version than what she had been afflicted with since her 20's. She continued dental care to adjust her bite, both modifying the actual teeth themselves and the appliance.

Conclusion

Jill's story is a remarkable testament to the cure-ability of conditions which have been deemed "untreatable" by allopathic protocol medicine. The only thing more remarkable than her recovery was the time frame in which it happened – after just two months her symptoms had drastically reduced, and in six months she was living an entirely new life. She went from being on disability to leading a lifestyle that was more active than it was even before the onset of her medical crisis.