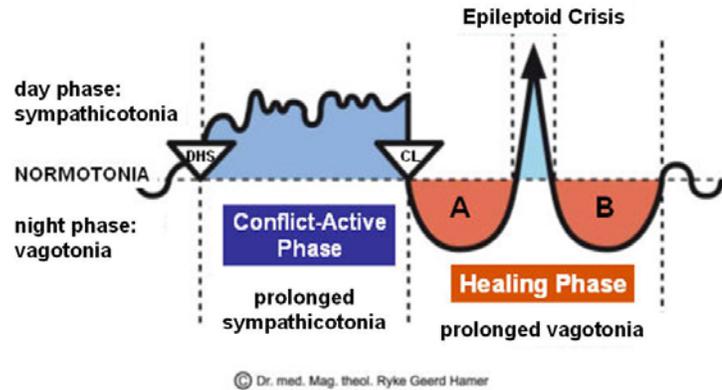




CASE STUDY 65

DATE: October, 2017



PATIENT: 38 year-old right-handed female

Subjective Complaint: The patient is knowledgeable about GNM and has had success with overcoming past symptoms. She wanted to learn the GNM perspective of a **right facial twitching** that started about 18 months ago after the birth of her second child. She forwarded me the recent MRI results that indicated the following findings:

“A prominent asymmetrical vascular loop is noted at the right cerebellopontine angle intimately related to the 7th cranial nerve adjacent to the pons. This vessel appears to arise as a branch of the right vertebral artery. The appearance is consistent with facial nerve compression in the basal cistern as the underlying cause for the patients right hemifacial spasm.....No other significant intracranial abnormality detected.”

The client indicates that her doctor told her that they may need to do surgery in order to relieve the pressure on the facial nerve. However, she reported that they were not sure why she only began to present with symptoms recently as the compression may have been there for some time. She states that she has an appointment with a neurologist next month in order to discuss the potential surgery.

In the meantime, the client indicates that her symptoms seem to be getting worse. She reports that the facial twitching often gets worse at work which makes her very self-conscious when dealing with people. The symptoms also seem to occur randomly when at home, while nursing her child or when she is generally stressed.

The client indicates that she thought she figured out her conflict (DHS) but is not sure why the symptoms have persisted.

Observation: During our online consult, her facial twitching was only mildly visible at first. However, as we continued to speak, her right eye would slowly start to blink and the facial twitching would become more noticeable.

Organs Affected: Facial Muscles:

Embryonic Germ Layer: new mesoderm

Brain Control Centre: muscle contraction is controlled from the motor cortex

Facial muscles are innervated from the 7th Cranial nerve (Facial nerve)

GNM Explanation: The **facial muscles** are related to a conflict of “**having lost face**”, experienced as “**feeling humiliated, ashamed, ridiculed or foolish**”. This Biological Special Program (SBS) involves weakness or paralysis of the facial muscles during the **Conflict Active Phase** and muscle spasm during the **Epileptoid Crisis**. Constant facial twitching indicates that she is in a **Hanging Healing**, specifically in a hanging Epileptoid Crisis. The fact that only the right side of her face is affected indicates that she experienced the conflict in relation to a partner, anyone other than her mother/child (because she is right-handed). Her original conflict (DHS) must be identified and brought to her awareness in order for the Biological Program to be completed.

GNM Understanding: As previously mentioned, the client is familiar with GNM and actually thought she knew what her original conflict was, but she was surprised that there was no change in her symptoms. She reported that during her labour with her second child she was told that she would require an emergency Caesarean section. However, she indicated to the obstetrician that she did not want to take the antibiotics prior to the C-section. Being a chiropractor and natural health practitioner, she was very knowledgeable and prepared regarding how she wanted the birth of her child to go. She stated that she was very shocked when her obstetrician told her that if she did not take the antibiotics, she would not perform the C-section (**her DHS**). The client was appalled at the doctor's insistence and eventually succumbed to the pressure, but admits she was in tears and very upset about the process. She reports that everything else went well, but that she was very upset at the doctor.

She states that her right eyebrow started to twitch within one week of the incident. Within one month of her child's birth, the right side of her face was twitching and in spasm. She indicates that it was a constant twitching, almost every 5 minutes. But when it was really bad, or when she was under stress, the facial twitching was every 30 seconds and her right eye would be almost completely shut.

The client was confused as to why the symptoms persisted after she made the connection that her conflict was related to the obstetrician. She states that she no longer has to deal with the hospital or that person, and was wondering why her symptoms continue to linger. She was also unsure of why her symptoms would appear even when she is at work and not thinking about the incident at all, or when she is nursing her child.

I explained to the client the concept of a “**conflict track**” or an “extension” of the conflict, which is often related to a meaning or a “feeling” that she associated with the original conflict. Therefore, the next time she experienced this similar “feeling”, even without any direct reminders of the original DHS, her body responds to it as a trigger.

She went on to explain that the way the doctor treated her made her feel humiliated and embarrassed. The client claims that she felt like someone who did not know what she was talking about and was “intellectually incompetent”, especially since she is a chiropractor and fellow health practitioner.

The client then began to realize that whenever she gets into a discussion with her spouse about their children's health, she starts to feel the same way - “intellectually incompetent”, which could explain

why her facial twitching seems to get worse when she is under stress at home in relation to her spouse.

She also realized that she feels a lot of anxiety regarding her facial twitching when she goes to work. She reports feeling embarrassed that she is trying to help her patients to feel better and yet she is the one with a facial spasm and health condition. Again, she admits that this makes her worry about how competent she appears to her patients.

Finally, she acknowledged that perhaps nursing her son is a track because the first time she nursed him at the hospital she was still not in a good frame of mind and she was still upset at how the doctor treated her during the entire birthing process. Perhaps feeling embarrassed that in some way she failed her son.

She was asked to be conscious of these “conflict tracks” related to how she feels during certain moments of her day and then to work on changing her perspective of the entire incident. She needed to remind herself that everything worked out fine and that her role as an intelligent and competent person is not going to be defined by any one incident. I asked her to watch for any changes in her symptoms within the next week and for her to get back to me for a follow-up visit within two weeks.

Results: The client sent me a message 9 days later, stating that she has noticed a 90% improvement in her facial twitching and spasms. She stated that *“I’ve now gone 3 days without any full facial spasms. I still have a few small muscle spasms. This is such a dramatic change. I am so grateful for these changes”*.

She was then kind enough to send me the following videos of her facial spasms which highlight the significant changes in her symptoms:

Video 1: taken 2 months prior to our consultation

Video 2: taken 5 days after our consultation

Video 3: taken 8 days after our consultation

Video 4: taken 5 weeks after our consultation

Click on this link to watch all four videos <https://www.screencast.com/t/gvDC4Lcg7YE>

The client sent me another message about 5 weeks after our consultation stating that she was almost 100% spasm free. She indicated that she had just seen the neurologist who said to her “wow, you don’t look like someone who has this condition.” When he asked what she had done, the client explained about GNM, which the neurologist had not heard of, but was open to hearing about. She states that the neurologist said that, “we do know this condition is related to stress so it makes sense that GNM can help.” Overall, the client was pleased with the visit and her ability to close the biological program. Her last message read, “I can smile again.”

For clarification of specific terms, please visit the glossary or site search feature in our GNM website

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