

# Case study by Dr. Alvin De Leon



**CASE: 31**

**DATE:** August 2011

**CLIENT:** 30 year old right-handed female



**Subjective Complaint: Right knee pain.** The client reports that she experienced sharp right knee pain today after coming home from shopping. She indicates that she was shopping for a few hours without any knee pain. However, after arriving home and dropping off her shopping bags, she immediately felt sharp right knee pain. She reports no prior history of right knee pain and does not recall doing anything that may have caused an injury.

**Observation:** The client presented with a slight limp favouring her right knee. The knee was observed to be slightly swollen, with limited flexion and pain at end range. Orthopaedic tests performed were unremarkable and indicated no significant structural damage. However, the muscles and ligaments around the right knee were tender to palpation.

**Organs Affected: Right knee muscles, ligaments**

**Embryonic germ layer:** new mesoderm

**Brain control center:** cerebral medulla

**GNM Explanation: Knee pain: self-devaluation conflict regarding physical performance** causing necrosis of striated muscles on the right knee during the **Conflict-Active Phase**. The biological purpose of this Biological Special Program (BSP) is to strengthen the muscles to improve performance. The client is currently in the **Healing Phase** which involves tissue restoration with accompanying swelling and pain. Her original conflict must be identified and brought to her awareness in order to avoid relapses with a subsequent chronic knee condition, and for the Biological Special Program to be completed.

**GNM Understanding:** The client recognized that her conflict must be related to an incident that happened this afternoon on the way home from the shopping centre. While driving home, she was stopped at a red light and was fumbling around in her purse, when her right foot came off the brakes and she almost hit the car in front of her (**her DHS**). She admits that she was shocked at her near accident and was nervous for a few seconds. Within a few minutes, she regained her composure and forgot about the incident by the time she arrived home, which is when her knee pain presented. The reason the right knee was affected was because it was the knee that was in charge of “performing” the function of keeping her foot on the brake.

**Results:** The client understood the SBS program and the fact that she was already in the Healing Phase. She was encouraged to make the emotional connection and to avoid any other potential self-devaluation of her knee because of the pain itself or because of her current inability to walk without limping. Manual soft tissue therapy and mobilization was performed on the right knee and she was recommended to use some ice and to elevate the knee if the swelling persisted and became uncomfortable.

In a follow up visit one week later, the client reported the knee started to feel better by that evening and that the next day she had complete relief and was pain free.

*For clarification of specific terms, please consult the English "Five Biological Laws" document*

**Source:** [www.LearningGNM.com](http://www.LearningGNM.com)