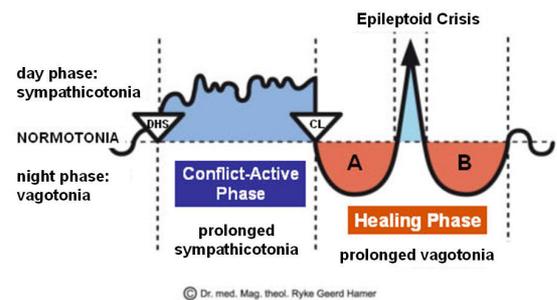




CASE STUDY 85

DATE: October 2017

CLIENT: 58 year old right-handed female



Subjective Complaint: The client presents with **right hip pain** for the past 7 months. She indicates that her hip pain would often come and go, but that it can get very severe. She admits that getting up from sitting can really aggravate it and that it seems to be worse first thing in the morning when she first wakes up. She also states that the pain sometimes wakes her up at night. She rates the pain as a 4 out of 10 normally, but that it can be a 10 out of 10 when it is really intense (on a scale of 1-10 with 10 being severe pain). She reports that she did not do anything to injure her hip. The client indicates that she had x-rays taken that showed mild to moderate degenerative joint disease in her right hip. She admits that she has been receiving chiropractic and acupuncture treatments for her hip and other complaints, but that they only provide her with temporary relief.

Observation: The client was able to walk with a normal gait. She presented with full lumbar and hip range of motion with no pain. All other orthopaedic tests were negative with the exception of FABERE's test which was positive for pain in her right hip. Chiropractic evaluation and palpation revealed multiple joint restrictions in her lumbar spine and sacro-iliac joints. Mild trigger points were also noted in the right gluteus medius muscles.

Organs Affected: Right hip joint and muscles:

Embryonic Germ Layer: new mesoderm

Brain Control Centre: cerebral medulla

GNM Explanation: Right hip joint and muscles: a moderate self-devaluation conflict experienced as “**this is too much to carry**”, “**I can’t manage anymore**”, or “**I can’t get through this**”, in relation to a partner. This Biological Special Program (SBS) causes muscle tissue loss (necrosis) of the striated musculature in the hips during the **Conflict Active Phase**. During the **Healing Phase** the tissue loss is replenished leading to inflammation and pain. The biological purpose of this Biological Special Program (SBS) is to strengthen the hip joint musculature so it can be strong enough to “carry more weight” in the future. The client is currently in a **Hanging Healing** with **tracks** and triggers, as the pain intensity fluctuates regularly. The original conflict and her **tracks** must be identified and brought to her awareness in order to complete the healing.

GNM Understanding: The client understood the explanation and we originally thought her hip pain was somehow related to a work-related issue. However, during her follow-up visit one week later, she did not have significant improvement in her hip pain, which prompted us to look for another conflict. But, during this visit she wanted us to address her foot pain instead and we did not have enough time to spend on her hip pain. It took 2 more visits for her foot pain to be completely resolved. It was on her fourth visit that she finally wanted us to really focus on her hip pain. She realized that perhaps her

conflict might be related to her spouse's obsessive compulsive behaviour when it comes to the number "666". She reported that she was aware of his compulsiveness to avoid seeing this number anywhere, but that she didn't really realize how much it bothered her until they were married. She was shocked and embarrassed at his insistence that she return items she purchased if the receipt total amount had "666" anywhere on it, or when they had to leave a theatre or show because he would see those numbers somewhere on their ticket (**her DHS**). She now realized that it was starting to be such an inconvenience in her life and that it was "too much to bear", as she didn't really understand her spouse's behaviour. She indicates that she has tried to speak to him about it so she can help him to overcome the compulsion, but her spouse is not willing to discuss it and instead will say he will work on it on his own.

She was asked to connect her hip pain to her spouse's obsessive compulsive behaviour regarding the number 666. I took the time to explain obsessive compulsive behaviors from a GNM perspective so she understood the calming effect it actually has on the person when they behave in a particular way. It was also recommended that she work on changing her perspective around her spouse's behaviour. Perhaps she needed to see this as something she can actually help him with, by being on his side. That this is not just his problem, but something she can assist him with. For example, she can scan items, receipts and tickets ahead of time and tell her spouse that she made sure things were all clear before he could see it. Maybe by acknowledging that he has a right to feel the way he feels and behave as he behaves, it can help him be less anxious.

General balancing techniques and chiropractic treatment were also provided.

Results: During a follow-up visit two weeks later, she reported a significant change in her symptoms. She claims that the hip pain is about 50% better and that she even had a day or two with absolutely no symptoms at all. She indicates that the hip is not as painful in the mornings any more. However, she is not sure why it seems to flare up at work when she is not even with her spouse. It was suggested that since her work involves looking at spreadsheets and numbers, that perhaps seeing the number 666 has become a track/trigger for her. She was recommended to remind herself that it was safe for her to see that number as it did not have the same meaning for her as it does for her spouse. She was also asked to continue to work on being more flexible about her spouse's behaviour to remind herself that they are on the same team.

She did not return to the clinic for about 6 months. During a recent visit for different symptoms, she reported that within a few days of our last visit her hip pain started to subside, and within two weeks it was completely gone. She admits that it took a lot of work for her to see things differently regarding her spouse's behaviour (because he still does it), but that she must have been able to change her perspective as she continues to have no hip pain at all anymore.

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

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