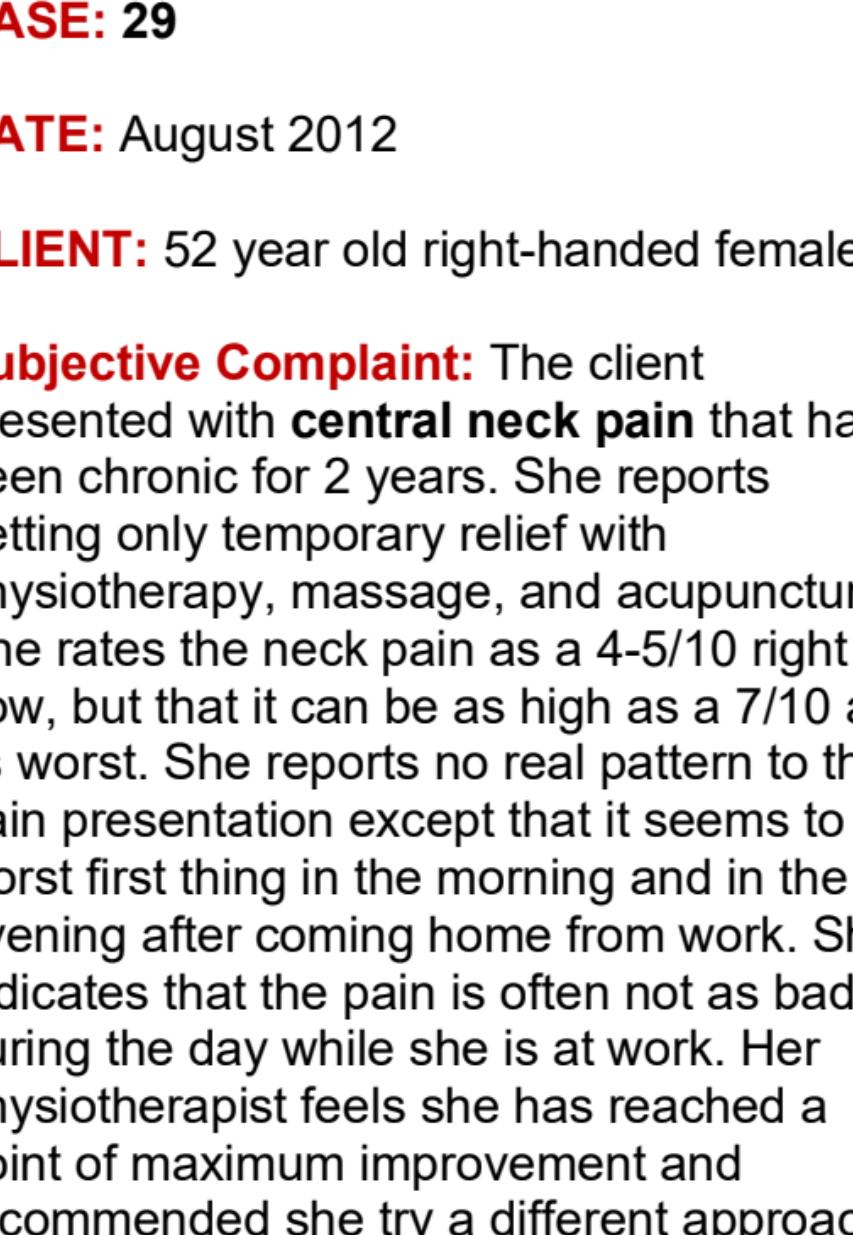
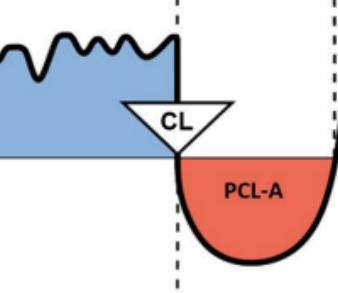


Case study by Dr. Alvin De Leon



CASE: 29

DATE: August 2012

CLIENT: 52 year old right-handed female

Subjective Complaint: The client presented with **central neck pain** that has been chronic for 2 years. She reports getting only temporary relief with physiotherapy, massage, and acupuncture. She rates the neck pain as a 4-5/10 right now, but that it can be as high as a 7/10 at its worst. She reports no real pattern to the pain presentation except that it seems to be worst first thing in the morning and in the evening after coming home from work. She indicates that the pain is often not as bad during the day while she is at work. Her physiotherapist feels she has reached a point of maximum improvement and recommended she try a different approach.

Observation: The client presented with full neck range of motion with pain in both sides of the neck with extension, flexion and rotation. Palpation revealed tension and trigger points in the cervical paraspinal muscles and joint restrictions in her upper back and neck regions of the spine.

Organs Affected: Neck muscles and joints both sides

Embryonic germ layer: new mesoderm
Brain control center: cerebral medulla

GNM Explanation: Neck: moderate intellectual self-devaluation conflict experienced as having failed an intellectual task causing muscle tissue loss (necrosis) of the striated muscles in the neck during the **Conflict-Active Phase**. Pain occurs in the **Healing Phase** as the tissue loss is replenished. The client is currently in a **Hanging Healing** as she reports the pain comes and goes and is worse when at home compared to being at work. The original conflict and her **tracks** must be identified and brought to her awareness in order to complete healing.

GNM Understanding: The client understood the explanation and recognized that the conflict is related to a former best friend who she had an issue with over 2 years ago. She reports that an incident occurred where a mutual friend of theirs began to spread gossip involving her, which her best friend believed. She states that she was shocked at how her best friend responded and that she felt she made a mistake in judgement regarding her friend's character. She thought her friend was a loyal and honest person who would not be easily swayed by gossip and hearsay, but she was mistaken (her **DHS**). The client admits that she is still very emotionally charged about the situation as she has now lost contact with her friend who has now become good friends with the third person who began the rumours in the first place. The client reports she still gets very upset when she hears about her former friend from other people or when she thinks about how their friendship fell apart, but that she never related it to her symptoms before today. She was encouraged to make the emotional connection between the conflict and her neck pain and to work on letting go of the incident, to look at the whole event from a new perspective. Muscle work and chiropractic adjustments were also provided.

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

Source: www.LearningGNM.com

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does not replace professional medical advice.