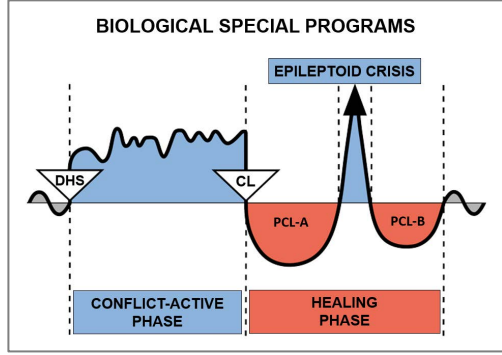


Case study by Dr. Alvin De Leon



CASE: 93

DATE: October 2018

CLIENT: 11 year old right-handed female

Subjective Complaint: The client was referred to the clinic for help in understanding the GNM perspective of her chronic digestive symptoms and **celiac disease** diagnosis. She reports that her abdominal pain, cramping, and nausea started 5 years ago after recovering from the stomach flu. The client admits that her symptoms were mild at first, but then 2 years ago they started to feel worse. She claims that for the past 3 months, her abdominal cramps, nausea, and the feeling of vomiting have been getting worse as they are now constant and daily. She indicates that her symptoms seem worse in the morning when she wakes up but that they randomly appear during the day while at school. The client reports that she did a lot of diagnostic tests over the last 2 years and that she was diagnosed with celiac disease. She admits that after going on a gluten free diet she felt relief for about 6 months. However, for the last year, she has had very little relief and in the last few months, the longest period of relief is only a few hours.

Observation: The client was observed to be otherwise healthy and did not present with any digestive complaints during our consultation. Chiropractic evaluation revealed full spine joint restrictions and myofascial trigger points.

Organs Affected: Small intestine

Embryonic germ layer: endoderm

Brain control center: brainstem

GNM Explanation: Abdominal pain, cramping and nausea: an inability to absorb or digest a “morsel” conflict experienced as anger about a person, situation or news that is “hard to take or digest”. This Biological Special Program (SBS) involves proliferation of the intestinal cells during the **Conflict-Active Phase** and removal of the cells that are no longer needed during the **Healing Phase** with the help of fungi or mycobacteria. The biological purpose of the cell increase is to better able to absorb or digest the “morsel”. During the Healing Phase, the person can experience abdominal cramping, nausea, diarrhea, and night sweats. The client is currently in a **Hanging Healing** with many **tracks** or triggers. Her original conflict (DHS) must be identified and brought to her awareness in order for the SBS to be completed.

GNM Understanding: The client understood the GNM explanation and realized that her conflict might be related to the fact that 5 years ago was when she witnessed her younger brother in the hospital vomiting and having a seizure. She later found out that he was diagnosed with cerebral palsy (**her DHS**). She admits that it was upsetting and hard to accept the news that she had a little brother that was “sick”. She now realizes that she must have associated vomiting with meaning that someone is really sick like her brother, which triggers her “indigestible morsel” conflict. Therefore, whenever she sees or hears that someone was sick and vomiting, it became a trigger/track for her leading to her digestive symptoms. She recalls that her symptoms flared up 2 years ago when a boy on a plane she was on had to get off because he started vomiting. She also realized that a few months ago, a girl in her dance class was also sick and vomiting and that it could be why her symptoms have since been worse. The client also mentioned that her last flare up a week ago happened after finding out that she was sitting in the desk of a girl who went home early because she was sick and vomiting.

She was asked to make the conscious connection that her digestive symptoms are originally related to the “indigestible morsel” she experienced when she saw her younger brother sick in the hospital. It was important for her to realize that she has since created many potential tracks or triggers that have

been keeping her in a hanging healing, including any foods with gluten. She was asked to work on changing her perspective about seeing or hearing someone vomiting or getting sick; that it did not have anything to do with her brother. She was reminded to see vomiting as a healing symptom and as a sign that the body was working well, by eliminating toxins that the body didn't need, instead of meaning something was wrong. It was recommended that she also remind herself that her original conflict is in the past and that she is now older and more knowledgeable. It was important for her to say to herself that it was now safe to eat whatever she wanted as it was not necessarily the food that triggered her symptoms.

She was provided with general balancing techniques and chiropractic treatments. She was asked to do a follow up visit within a couple of weeks.

Results: The client returned for a follow-up visit 3 weeks later. They had recently returned from a family vacation which she was not going to originally attend, due to concerns about her digestive issues and being in a foreign country. However, after our last visit, she reported a significant improvement in her symptoms which allowed her to enjoy the trip. She admits that she even ate foods she had not eaten in a long time like potato chips. She did report that a few days ago she began to get a little abdominal cramps, but then recalled that it was soon after asking her teacher about her daughter who she was told wasn't in school because she had the stomach flu (her track). She was commended for doing such a great job in recognizing her tracks and for resolving her original conflict. She was asked to continue to watch for any flare ups and to continue to minimize her fears around eating certain foods. She was treated for other musculoskeletal complaints and was asked to do a follow-up visit in a few weeks.

The client did not return for a follow up visit and so I reached out to her approximately one month after our last visit, to see how she was doing. She messaged me that her intestinal issues were 95% improved. She wrote that she was happy to be able to "enjoy time with my friends and I don't have to worry about my intestinal issues." She admits that she still gets triggered at weird times, but that she often now knows what causes it.

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

Source: www.LearningGNM.com

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