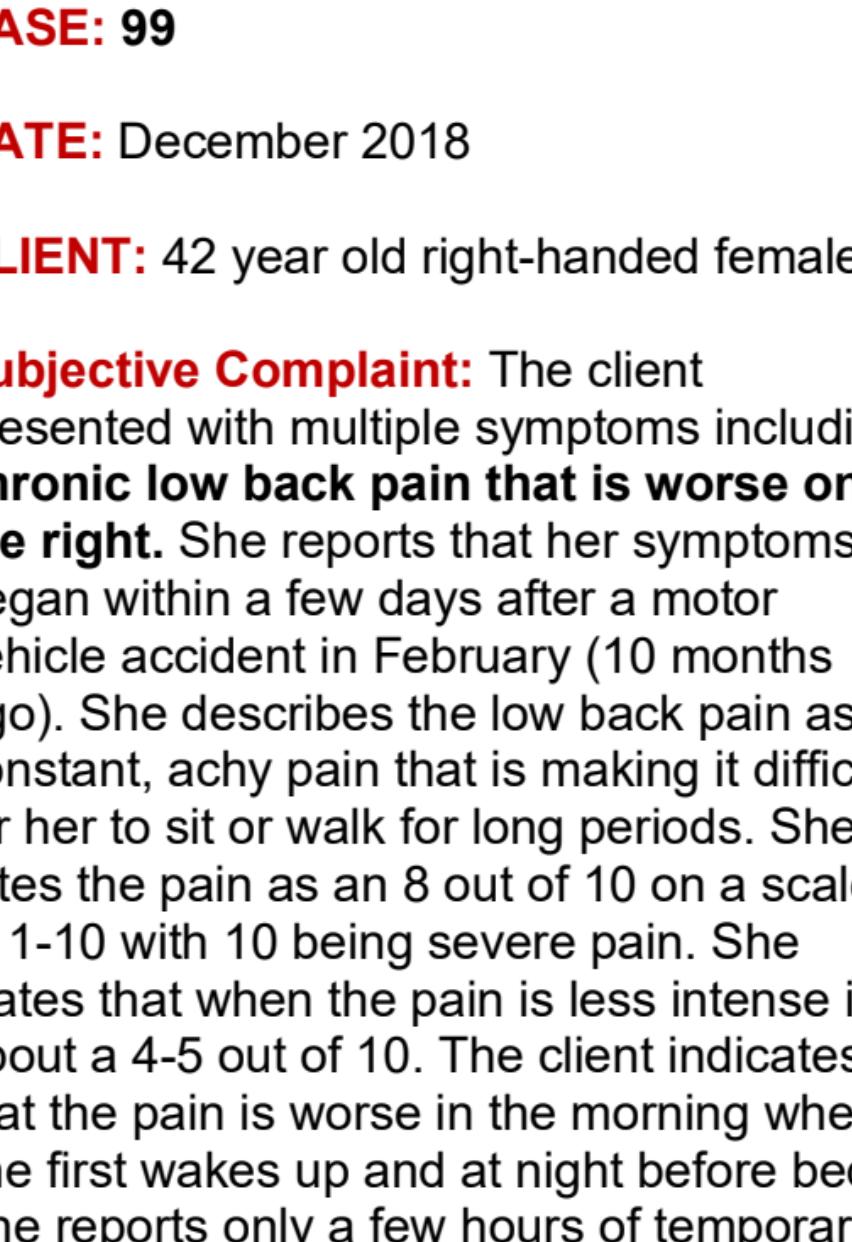
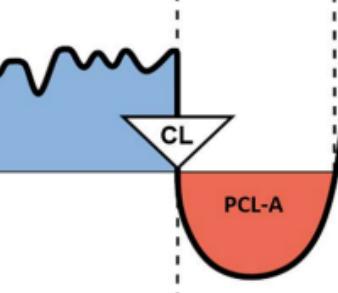


Case study by Dr. Alvin De Leon



CASE: 99

DATE: December 2018

CLIENT: 42 year old right-handed female

Subjective Complaint: The client presented with multiple symptoms including **chronic low back pain that is worse on the right**. She reports that her symptoms began within a few days after a motor vehicle accident in February (10 months ago). She describes the low back pain as a constant, achy pain that is making it difficult for her to sit or walk for long periods. She rates the pain as an 8 out of 10 on a scale of 1-10 with 10 being severe pain. She states that when the pain is less intense it is about a 4-5 out of 10. The client indicates that the pain is worse in the morning when she first wakes up and at night before bed. She reports only a few hours of temporary relief in the past 10 months, usually after getting therapy (physiotherapy, massage) or after taking anti-inflammatory and pain medications.

Observation: The client was observed to be walking with no discomfort and was able to sit during our entire consultation without any visible pain or discomfort. Active lumbar range of motion was all within normal limits with pain at end range of right lateral bending and bilateral rotation. Lumbar orthopedic tests performed were all unremarkable with tight hamstrings and quadriceps bilaterally noted. Palpation revealed muscle tightness and tenderness bilaterally on her lumbar paraspinal musculature. Chiropractic evaluation revealed full spine joint restrictions and myofascial trigger points in her low back muscles bilaterally.

Organs Affected: Right low back muscles, ligaments and joints

Embryonic germ layer: new mesoderm

Brain control center: cerebral medulla

GNM Explanation: Right low back muscular pain: moderate self-devaluation conflict experienced as a "lack of support", in relation to a partner. This Biological Special Program causes muscle tissue loss (necrosis) of the striated muscles of the low back during the **Conflict- Active Phase**. During the **Healing Phase**, the tissue loss is replenished and restored with accompanying swelling and pain. The biological purpose of this Biological Special Program is to strengthen the muscles of the low back to improve spinal support. The client is currently in a **Hanging Healing** with **tracks** and triggers causing chronic symptoms. The original conflict must be identified and brought to her awareness for her to complete the Healing Phase.

GNM Understanding: The client understood the GNM explanation and realized that her conflict might be related to an ongoing issue she was dealing with regarding her middle child and his challenges at school. She reports that there was another school incident in January, and that her husband who does not have the patience to deal with their son, brought up the idea that maybe their son should be institutionalized and sent away to a boarding school (**her DHS**). She recalls being very upset by his comment and that it's possible she perceived it as a "lack of support". The client indicates that since that time, her son has been doing better and is seeing different therapists and tutors to help him with school. She now understands that she may have several tracks/triggers that cause her to be in a hanging healing. She explains that when her son starts to misbehave or gets upset, it could be a trigger for her. She also admits that when her spouse is in a bad mood or loses his temper regarding the kids in general, it could also be a trigger for her. It was brought to her attention that she may also have a secondary local self-devaluation conflict related to her low back ("my back is weak", "my back is not 100%"), which could also lead to back pain being a track/trigger. This is especially relevant when she starts

to worry about walking her dog or sitting for long periods.

She was asked to make the connection that her low back pain is related to the unexpected “lack of support” from her spouse regarding how to deal with their second child. She was recommended to work on changing her perspective regarding his comment and to find the many different ways that he supports the family. She agreed that he has not brought up the issue again and that he is trying to do what he can to be more patient with the kids. She was also reminded that her low back is actually trying to repair and get stronger, so that she will not become overly preoccupied with her back as being weak or injured (in order to resolve her secondary local self-devaluation conflict). She was asked to slowly get back to doing the things she used to do while paying attention to how her body feels in general.

Chiropractic treatment including muscle work and mobilization were also provided. She was asked to do a follow-up visit in one week.

Results: The client returned to the clinic one week later and reported a significant improvement in her low back within a few days of our session. She admits that she feels 90-95% better overall. She was treated for other musculoskeletal symptoms and reminded to watch for any tracks/triggers particularly if her symptoms flare up.

She was seen in the clinic a few weeks later for her other symptoms and she continued to have no more low back pain. In her most recent visit, about 2 months since our initial consultation, her low back continued to be pain free and “back to normal”.

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

Source: www.LearningGNM.com

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DISCLAIMER: The information in this document does not replace professional medical advice.