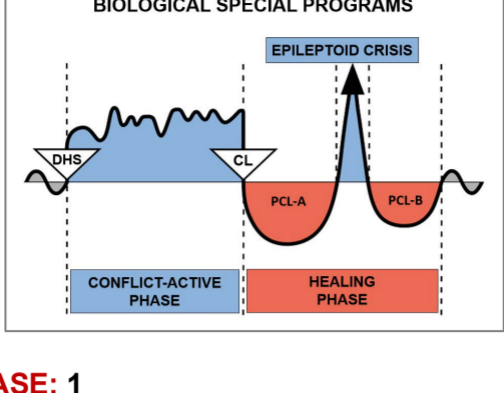


# Case study by Kimberly Ismail



## **CASE: 1**

**DATE:** November 2016

**CLIENT:** 10 year-old right-handed male

**Subjective Complaint:** The mother of the young client stated that her son was diagnosed with **bronchial asthma** and allergies to plants and trees at age 7 and that it had gotten worse over the past year. The client had symptoms of breathing difficulties (wheezing) and a dry cough which got worse at night. Over the past three years, there were at least ten doctor visits, two emergency room visits, and one hospital stay. He was prescribed two types of inhalers and used them from time to time when he had difficulty breathing. His mom mentioned there was no relief from medication or from any of the various other treatments; therefore, she had almost given up. She was referred to the office and thought she would give it one more try as she was seeking answers to help her son.

**Observation:** Client appeared to have slightly heavy breathing with an occasional dry cough.

**Organs Affected:** **Bronchial muscles**  
**Embryonic germ layer:** new mesoderm  
**Brain control center:** cerebral medulla and motor cortex

**GNM Explanation:** **The biological conflict linked to the bronchial muscles is a male territorial fear conflict (or a female scare-fright conflict)**, depending on a person's gender, laterality, and hormone status (see Bronchial Asthma Constellation). The distinguishing aspect of the conflict related to the muscle tissue is the additional distress of "not being able to escape", "not being able to (re)act", feeling "rooted to the ground" (petrified), or "feeling stuck". During the **Conflict-Active Phase**, there is cell loss of bronchial muscle tissue (controlled from the cerebral medulla) proportional to the degree of conflict activity and increasing paralysis of the bronchial muscles (controlled from the motor cortex). The paralysis causes breathing difficulties, explicitly, difficulties inhaling - exhaling is extended because of the reduced function of the bronchial muscles that control inhaling. During the **Healing Phase**, the bronchial muscles are reconstructed; the paralysis reaches into PCL-A. The Epileptoid Crisis presents as coughing fits with bronchial spasm and convulsions. The cough is dry. The client is currently in a **Hanging Healing**. The conflict and **tracks** have to be identified in order to complete the healing.

**GNM Understanding:** The client understood the GNM explanation and immediately realized that his asthma had gotten worse after the accident which occurred in Mecca, Saudi Arabia, over a year ago. His father had traveled to Saudi Arabia to perform Hajj in the holy city of Mecca. The client stated that he was watching the news on the television when he heard that a crane collapsed in Mecca, killing and injuring thousands of people (**his DHS**). He stated that he was scared and that he and his mom called his father to confirm that he was okay. They were not able to make contact with his father until the next day where they received the news that he was okay.

Making the connection that his asthma was related to the fear when he saw the news about the accident in Mecca and the worries about his father as well as the awareness that his father is now safe at home allowed him to complete the healing. The new perspective also cancelled the tracks associated with the original conflict.

**Results:** The mother reported that she noticed that her son's breathing improved on the drive home and that he fell asleep peacefully in the car. She said, "I was so happy that he finally got some restful sleep." One week later during a follow up call, she stated that he was doing well. He was doing well after a year and two year follow up.

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

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

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