

A Pilot Study Using Homeopathy 3.0 for Sustainable Recovery from Alcohol Addiction.

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Abstract

Listening to special prepared mp3 files (PPDs) has a profound effect on the mental and physical wellbeing of people recovering from alcohol addiction. PPDs are mp3 files with subtle resonance-based information that is embedded into sea wave sounds one listens to. PPDs are created to impact body / brain cells in a way they can resolve/process the information intelligently. The people participating in this study had given up using alcohol and other drugs (coke, ecstasy). They all had been in rehab (Minnesota 12 steps program) and they had strong negative experiences (trauma's) during their lives most probably related to their addictions.

Analysing the first results of all array data shows that mental and physical life was strongly affected already within a 5 week period. Changes in self expression and self esteem, fears impacting daily life, disappearance of daily life stress and improvement on physical wellbeing were widely observed among the participants.

It showed that 100% of the participants in this study were effected by listening to the PPDs, however the results were in different parts of the measured spectrum. More differentiated: 80% reported to be experience less stress, 70% had more self esteem, 70% noticed being less emotional and nervous. Another 80% reported to be in much better physical state.

Introduction

Science concludes: " We need to focus on our instincts to change behaviour. "

University professor Katan, an expert on health and food matters from VU University Amsterdam, The Netherlands, stated recently on national Dutch television that we are victims of our habitualised instincts. Katan states: "Obese people are suffering from their instinctual forces to eat. And since there is an overload of food available we keep on eating. Diets have no value for creating long term results".

(tv appearance: http://brandpunt.incontxt.nl/seizoenen/2013/afleveringen/01-12-2013/fragmenten/vergeet_het_dieet)

The human race has built-in limitations that are the foundation of our dysfunctions. These built-in limitations are a result of our (personal) past in the form of memories, habits, beliefs, behaviour, culture, education, evolution, etc., with other words: brain wiring.

The oldest and most important brain wiring is called the 'reptilian brain'. It's age is somewhere close to 500 million years and home of our survival instincts.

Survival instinct

The survival instincts (freeze, flight, fight, food and sex) are engaging in every interaction we have with everything that goes on inside and outside of us. These are limiting our lives in every possible way. (Ever wondered why it is almost impossible to keep personal goals up, even the smallest?)

Over time this part of our brain has become hyperactive as a result of recent world wars, genocides, massive epidemics, continues modern time stress, economic crises and personal drama. Traumatic survival memories have become the basis of limiting energies keeping us from living life to the fully with diseases and dysfunctional behaviour as a result.

Effects through the generations

This process by which hyped up survival instincts are passed down through the generations is studied by the new scientific field of epigenetics. People mostly do not realise that this even happens. Parents pass this on to their children unknowingly and un-intentionally by the way they parent.

Symptoms of hyped up survival instinct

Symptoms of hyped up survival instincts can be seen everywhere in our modern societies. Extraordinary (verbal) violence is common in day to day traffic, school and office life and politics. The porn industry is among the most successful in the world and lifestyle diseases (burn out, cancer, heart and vascular diseases, diabetes, obese and alcoholism) are endemic. After realising this epigenetic process is keeping us going around in circles there is only one 'conclusion' possible: resolving inherited trauma should be top priority.

A new vision

For thousands of years humanity has tried to deal with human limitations. The work has been done by monks, shamans and recently by (holistic) doctors and therapists. But a reality check shows: it is not enough!

The old methods are not good enough for the situation we are living in. Of course we know that 15 years of intensive yoga will bring 'results'. As does living a 'monks life' based on being vigilant, disciplined and devotive. But in modern life this type of disciplined life is quiet and unrealistic way to go and for most of us very unlikely. Many people cannot even keep up their intentions of eating less and losing a few kilos of weight!

Homeopathy 2.0

21st century asks for something new. A method that fits our modern (digital) life and works by influencing our brain to calm down the survival instincts. The many different methods and technologies used till now are mainly focussing on the frontal lobes of the brain: on logic, reasoning, feelings and emotions. They do not (actually) reach the survival instincts. Survival instincts reside in our primitive animal (reptilian) brain.

In this study we introduce something new to world: homeopathy 2.0.

The classical (Hahnemann) form, works in a way that from a group of remedies (fitting the totality of the symptoms) a selection is made mostly fitting an individual case.

The new form developed by homeopath Peter Chappell requires just one homeopathic remedy specific to that disease. Treatment is the same for everybody. Due to this new method thousands of people suffering from diseases like AIDS, malaria and tuberculosis have recently been treated with a high degree of success in Africa.

The same situation for treating trauma. One single remedy can be used to all suffering from a similar traumatic event. The last few years 10.000+ people have been successfully treated against genocide, war and rape trauma in a short amount of time. (see also the recent book 'Homeopathy for Diseases', p. 18, Homeolinks 2012, Haren, the Netherlands))

Homeopathy 3.0

Chappell also demonstrated that one could treat diseases with sounds as a carrier rather than pills, using the same technology and have similar effects. Essentially this new method (3.0) is something complete new and unknown before. It works with a consciousness source to imprint resonances directly into mp3s. (see 'Homeopathy for Diseases', p. 26, Homeolinks 2012, Haren, the Netherlands). The mp3's are called PPDs and they calm down the hyper activated survival instincts. It takes a short period of time (5 minutes a day for several weeks/months) to create the result.

PPD resonance works

Resonance works like this. It amplifies the problem briefly for a few milliseconds in a safe and specific way. It causes the survival instinct – for example food, the idea of starving to death, which is probably the root of all eating disorders and all overeating – to increase. By amplifying it briefly, the natural pattern recognising processing faculties in the brain register it and see that the response is unrealistic and does not correspond to reality.

The natural processing then goes to work and files away anything that the resonance shows to be useful, resolving, dissolving and binning the rest. It is all done within milliseconds. It sees the food situation is OK, not urgent, and not likely to be a problem -- there is no shortage, the shops and the fridge are still full -- and effectively bins this idea by resolving it internally. This is how resonance works. If this process is done systematically using different specific resonances, the survival instincts calm down gradually.

For example, when a parent of a young child who is crying reacts inside to that crying by feeling irritation, this is the parent's survival instincts kicking in. The parent cannot act with compassion until their own survival instincts are calmed down. Until then, the parent will be compelled to act as if survival is at stake, unwittingly teaching their child that crying is related to survival rather than to just getting over a trivial scrape. Perhaps the parent is being only a tiny bit threatening to their child about the crying, but to the child, being completely dependant on the parent, it literally scares the child to death, and he stops crying. He or she comes to link fear (of survival) with crying.

The overactive survival instincts show up not as core basic survival instincts, but as a large variety of limiting personal traits. There is this endless range of limiting and restricting thoughts and emotions of the "I can't do this and if-but" variety. It might be as simple as being too nervous to perform in front of a school class; it might be about being too scared of making a mistake in an exam or at a sport competition; it might also be about doing the opposite: acting forcibly, not caring, forcing an issue, cheating, or lying.

It is either underplaying your ability or overreacting and overplaying it, but both reactions are just as bad, as they limit personal ability. Children push themselves over the top, get injured, show ADHD symptoms or are too nervous, freeze and do not perform well. Either gets in the way of achieving one's personal best.

Materials & method

During a 3 month's test period a group of people recovering from alcohol addiction were listening to a PPD serial on a daily basis. Many of the participants were also addicted to other drugs like coke and ecstasy. The set was made up out of 10 different PPDs, every PPD was listened to for minimum of 7 days. The results were scored in a spectrum covering a normal person's life: physical and mental situation, results shown at work and in private situations. The results are based on 2 types of questionnaires (RAND 36 and a PPD impact test) and filled out by participants at 3 different moments (t = 0, t = 5 weeks and t = 10 weeks). The participants were asked to listen to the PPD on an every day basis and keep a diary. The initial number of participants was 12, 9 people finalised the testing period. Everybody was given PPDs with the active resonance frequencies included. In this pilot no placebo's were used.

Results

The results discussed in this paper are based on the questionnaires taken at t=0 weeks and t=5 weeks. The results at t=10 weeks will be added to this paper when available. It showed that 100% of the participants were effected by listening to the PPDs, and these results are in different parts of the spectrum of their lives. The key outcomes of the pilot, f.e. 78% mentioned improvement in their physical situation, 77% reported a positive change in their mental well being and 44% answered

positively on the question if there was any change in their spiritual situation.

Another outcome is that 66% of the participants reported positive changes in their professional life and 55% in their private lives. Everybody mentioned one of the two options, some had results in both parts of their life.

There is a differentiation to several factors in life. Important factors when it comes to being successful in what you are doing. 66% reported to have more self esteem, probably one of the most important factors in life. 55% had more focus / concentration while doing (work) activities. 66% noticed to have less emotional dips including being nervous.

75% of the participants reported a relief in stress experiences, they felt much more relaxed during the day. Almost 45% noticed that they were playing the blame game less often and that they were able to straighten quarrels and to forgive others.

55% felt that they were in better moods and suffer less from mood swings. More than 44% concluded that fears were less dominant both during day and night time. Another 44% reported better sleeping and 55% felt physically much more energized.

Discussion

The mentioned results have not been statistically analysed yet. We have not been using differentiation in the data, f.e. in the impact of PPDs. For example, 66% of the participants reported to be less emotional. Out of these 66% the majority scaled the impact at 1 (out of 5), 16% scaled 2 (out of 5) and 16% even 3 (out of 5). Also the RAND 36 questionnaire were not used in this first version of the study.

Personal comments from participants have been left out so far, although it would highly contribute to a differentiated picture of the impact of PPDs on people's life. As a matter of fact it gives a great insight on both the amplitude and the frequency of disturbing emotions and the relation to dysfunctional behaviour.

As a general remark one can say that PPDs are designed to influence the reptilian brain, which is regulating important basic parts of our life. Logically, the effect of PPDs is seen in many different (secondary) parts of life. Different people have different focus and issues in their lives.

The next step is to research the influence of PPDs over a longer time frame with a larger group of participants including a control group. The results from the pilot give indications that these symptoms will be strongly reduced when listening to PPDs. The integration of using PPDs with other techniques and therapies is likely to be even more successful and should be part of the study. fMRI scanning could give insights of the brain reacting differently on cues before and after listening to PPDs.

References

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