



A Breakthrough In BioEnergetic Medicine -- SkaSkys

The novel SkaSys Test System introduces new ideas into the field of bioenergetic testing:

Only a Few More Days Left Before the Price of August SkaSys Seminar Increases - Dr. Dietrich Klinghardt and Dr. Lee Cowden are also tentatively scheduled to attend. [Click Here](#) for more details.

Part 1 of 3 (Part 2, Part 3)

1. SkaSys conveys testing data without physical contact and free of electromagnetic stress. Its effectiveness builds on modern field theory, oriented to quantum and vacuum physics.

2. To retrieve the test reactions, the SkaSys Testing System makes use of the Arm-Length Reflex Test and a functional view of man as modified by the Clinical Kinesiology of A.G. Beardall.

3. The core of the SkaSys Testing System is software, which can be installed on any conventional PC, which makes possible, via scalar fields, to easily retrieve, test in their individual potentiations and document the following:

- **Acupuncture meridians, including Voll's special meridians**
- **Meridian-specific pre-selected homeopathic agents and nosodes**
- **Structural test data on, for example, cell organelles, cranial bones, etc.**
- **Chemical test data such as all toxins, neurotransmitters, cytokines, etc.**
- **Psycho-emotional test data and Bach Flower agents, Auro-Soma agents,**
- **Fine -energetic test data such as viruses, miasmas, geopathic disturbances.**

The Phenomenology of bioenergetic Testing

The living organism is a highly complex matter-based active structure, whose activity is completely information-driven. A highly complex organism can only exist if it can maintain its biological order - and this can only be maintained if the individual elements can communicate with each other in some manner, and are also bound together by an overarching ordering concept.

The organism has a number of systems at its disposal for internal communication between cellular structures, and for signal transmission within the individual functional structures; these systems operate according to very different principles:

- **A material-chemical system: the dominant biochemical system is the endocrine system, which uses chemically varied substances (hormones) to transmit signals - but also the newly-discovered neurotransmitters from the cytokine and interleukin series.**
- **An electrical system: the nervous system, that transmits electrical impulses as digital signals over its own anatomically distinct network. This is achieved by the alternating increase and reduction of membrane potentials.**

These communications systems are not able, however, to convey signals outward, i.e. beyond the body's covering of skin. If interaction or communication phenomena beyond the organism's anatomical borders are to be possible, there must be other action mechanisms able to permit the body to react as an "open system".

Bioenergetic testing procedures make use of "**resonance phenomena**" that play out in the area of vibration overlaps in an organic-material part of biodynamic existence, which has thus far proven difficult to understand.

Yet experience shows that the individual reaction to external informational impulses - i.e. bodily contact with foreign objects - permits the observation of changing muscular reflexes. One can thus differentiate or measure differing stimulus responses to external informational impulses.

These selective reactions proceed way in advance of any disease form and, as a rule, are likewise not registered by the persons affected. So, if one can make the endogenous reactions to this kind of "resonance phenomenon" visible via muscle and tendon reflexes, then it is possible, by means of this resonance phenomenon, to query the organism by contact with a test substance, which the organism can then reply to in a number of ways:

Using bioenergetic tests, the body can tell us "stories" about itself. To do this, it makes use of a restricted vocabulary to answer our questions.

Bioenergetic Testing and the Abyss of Consciousness

There is no doubt that our mental world includes parts that, in their universal grammar, are not accessible to consciousness. This part of the mental environment is basically not definable neurobiological. It is assumed that consciousness is produced by neuronal impulses in the thalamus and other regions of the CNS.

The link between consciousness and the functional processes of our existence are completely unknown - the following is thus concerned simply with the development of an explanatory model. Any discussion of "bioenergetic testing" involves dealing with the mechanisms of perception and cognition.

For testing purposes, perception can be described as "verification of previously-dreamed hypotheses".

Of course, we are then setting out on a path that can lead to a universe, that is more extensive, more complex, more fluid, more uncertain and (in a certain sense) more fearsome than the way depicted by reductionist scientific knowledge.

The aim here is to bring together empirical cognitive processes from the area of empirical medicine and physics, the observer and the observed, spirit and matter - and, in the process, avoid overly narrow reductionism.

All of the following explanatory and interpretive efforts no longer go in the direction of conventional reductionism, but rather toward acceptance of the entire epistemological edifice, including the fuzziness that emerges from any scientific explanation that strives for wholeness...

Ohlenschläger persuasively describes the conflict between sharp detail and a holistic orientation as follows:

- **The more precise the details of a statement about a networked system, the less relevant it is to that system; and**
- **The more relevant it is to the system as a whole, the less precise will the details be.**

Testing as Observer-Integrated Model

The recursive relationship between medium and observer - or between testee and tester - is an as yet unsolved scientific challenge, one whose solution by physical-science means is fundamentally dubious anyway.

The existence of an observer-relative objective reaction is, as such, nothing to be afraid of, and it only worries those who don't trust themselves enough to bring themselves into the picture.

This we know from relativity theory: here, too, the objective universe is co-determined by the observer's state of motion.

If we permit ourselves to inquire into the very fashionable concept of "kinesiology", what it boils down to is a formulation that, as it stands, is not all that useful:

Kinesiology means working diagnostically and therapeutically with the energy that unites body, mind and spirit.

Nevertheless, this definition leads us closer to the "observer-integrated explanatory model"; because the above description applies not only with reference to an individual, isolated organism. Kinesiology is - if one wishes to transcend a mechanistic-sensory muscle-reflex model - also working with the energy that brings individuals together in the area of interactions of biological field structures.

Many scientists subscribe to pure objectivity only at those times when they see themselves as worldview constructors. Of course, as regards our position vis-à-vis the world and our fellow inhabitants - particularly when they come to us as patients - we do not in fact occupy that exterior position that the upholders of the claim to scientific objectivity assume.

The observer is always a part of the system: while observing, he evaluates, and his evaluations then become part of the system... Evaluation of isolated stress factors as they contribute to the development of an individual disease can only take place in the context of individually felt process regulations within the individual organism.

To create this access to non-objectifiable processes and summary conditions for the origin of disease in an efficient manner is what our SkaSys Testing System, as a consciously "observer-integrated" model in the context of complementary medicine, is meant to help achieve.

Phenomenology of Testing and Quantum Theory

The Chaos Theory of Henri Poincaré was mathematically formulated a hundred years ago. Taking as its starting point a prize question of the Swedish Academy - namely: how stable is our planetary system? - it tackled the three-body problem.

Can the behaviour of three planets (or any three mutually influencing bodies) be calculated? It is not calculable using Newtonian mechanics, since the interaction of the three bodies changes constantly every moment. In 1930, the Heisenberg Indeterminacy Principle suspended strict causality and determinism among the smallest particles.

The modern theory of deterministic chaos then expands on this quantum-mechanical insight by including the macro world as well..In quantum theory, this principle means that the result of measuring two incommensurable variables (such as location and momentum) in a certain sequence is different from the results obtained if one reverses the measurement order.

That which is designated on the factual level as indeterminacy of location and momentum in quantum theory, is encountered on the level of the theory of non-linear systems as an incommensurability of models.

Accordingly, different modes of describing systems can no longer be applied with the same results. One might say that it depends on the perspective with which one views the problem.

Knowledge is therefore observer-dependent, wherefore there are always a number of modes of access to reality.

The induction of a field-based interaction between an individual, whose field serves as a passive projection surface - generally called the "tested person" - and another individual, whose field serves as an active projection surface - generally called the "tester" - seems to be a unique capability of the human mind.

The generation and intensification of this kind of situational "diagnostic" interaction is evidently an anthropological peculiarity, whose systematic application comes in useful in all forms of bioenergetic tests.

This interaction is characterized by the definition of its field-specific cross-sectional contents - modulated by the existential uniqueness of the two individuals entering into this interaction - and with reference to the moment - modulated by the biographical uniqueness of these two individuals at the time of the test procedure.

If, in addition, signs or symbols are "brought into" the testing process, they become integration mechanisms that, through abstraction, enable a quicker processing of the mutual interpenetration of the field contents. By going to a "higher" level of processing, more rapidly presented stimuli sequences can be processed.

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Sensory Aspects of Bioenergetic Testing

Man possesses sensory abilities beyond those of the five senses, with whose help he is able to further extend his visual, auditory, olfactory, tactile and gustatory discriminatory capacities. Conscientious therapists make use of the capabilities in the medical arena also, in the form of "bioenergetic testing", in which different schools of thought have developed and used different sets of devices - such as electronic measuring instruments - and procedures - such as the interpretation of muscle and tendon reflexes.

In what follows next, I shall attempt to develop a functional model of "bioenergetic testing" that closes the gaps in a critical confrontation and perhaps narrows a little the chasms of deficient acceptance in the interest of our affected patients. I am well aware of the risk of being reproached for a too-strongly reductionistic conceptual approach.

The Primary Field

If we assume that, after therapy localization - for example, a painful elbow - a previously weak muscle becomes strong again, then this can be explained via reflexes.

However, much more vivid is the explanation that, by touching the painful or diseased area in the body's information processing system a "lever" has been "switched over". Switching this lever "reminds the body of the problem with the elbow".

But awareness is synonymous with activating certain brain regions, just as every specific thought also activates a specific brain region. Activations of this kind can easily be displayed in the form of brain waves using measurement technology such as EEG devices.

This activation generates a "thought field" - this is physically self-evident, since wherever there is electrical current flow, there is also an electromagnetic field - whose energy is easily able to cross the borders of the physical body and "go out" into the external world.

But this does not get into a solution of the elbow problem - since, up to this point; our therapeutic localization has not yielded any diagnostic access to the problem.

For this, it is necessary to decode the fields "Identification". Experience has shown that this decoding can take place by entering into resonance with other fields. In other words: if another field appears, whose content is known to - and therefore can "resonate with" - the previous field, the contents of the "Primary Field" can be decoded. The only question is where this "Decoding Field" is to come from.

The Decoding Field

Based on everything we know empirically about bioenergetic and kinesiological tests, they can only be performed when the tester is "involved", able to generate a Decoding Field of this kind with the appropriate resonance qualities.

Only a second human organism, involved in the test at the same level of intensity - or who allows himself to be linked in like the patient being tested - seems to be capable of generating biologically or bioenergetically equivalent fields, which exhibit the relevant resonance qualities.

Voll, who, with his electro acupuncture, was one of the first to extensively systematize bioenergetic remedy tests, at first always spoke in terms of a "sympathetic remedy test"... If measurements of weak muscles that immediately got stronger after application of a homeopathic agent were reproducible, then the kinesiological muscle test would be a scientifically recognized method.

It is this, namely the creation of this Decoding Field, which my theory of bioenergetic testing medicine takes as its starting point: all further diagnostic steps undertaken subsequent to the above-mentioned therapy localization serve but a single purpose: the creation of a specific Decoding Field whose content can be "impregnated" (specified) by a number of measures. These measures usually include:

- **Applying an allopathic or homeopathic remedy ampoule**
- **Additional therapy localization**
- **Shaping of Hand Modes**
- **Visualizing feelings and thoughts**

The next issue that arises in a serious consideration of test phenomenology is: what "force" or "energy" is it that so impregnates the patient's field that specific resonance can occur. Is it possible that, from out of a hillock of twenty remedy packets piled up on his belly, the patient being tested can pick out - totally objectively and by virtue of his inner "cognitive valence" - that ampoule which will make his muscle strong again?

This would be a possible but very vague explanation, using concepts like the organism's "inner knowledge" and "implicit wisdom", which simply create additional explanatory deficits: For example, that - as is well known - different testers arrive

at differing test results.

Lucky exceptions are no proof of the "objectivity" of this test procedure, but rather merely an indication that two different people are able to make use of "similarly" structured Decoding Fields.

Far more plausible, in my opinion, is the hypothesis that, no matter which therapy localization, which Hand Mode the tester may perform, or which remedy he may apply, he himself always specifies the Decoding Field.

In other words, the tester himself "knows", at the moment of applying the "Arnica" ampoule, that the content of this ampoule is arnica. The decision - "Now I'll just try this arnica ampoule" or "Now I think I'll try the Allergy Hand Mode", and (accompanying or reinforcing) applying the ampoule or forming the Hand Mode Obviously re -activates certain brain regions - this time in the tester - and creates a specific "thought field" that overlaps the Primary Field.

If the Primary Field - i.e. the therapy localization field of the patient's elbow - and the Decoding Field - i.e. the thought field generated by the tester with the aid of a test ampoule or a Hand Mode - agree as to content, resonance ensues... This resonance signifies content equality of the Primary and Decoding fields and leads to a temporary collapse or to a cancellation of the Primary Field, experienced within seconds as a deletion phenomenon.

This is the sensory immediacy of the bioenergetic test in the form of:

- **altered skin resistance at acupuncture points (EAV)**
- **altered muscle reflexes (Kinesiology)**
- **altered tendon reflexes (Armlength Reflex Test)**

Since the initial step in generating the Primary Field was therapy localization, with the subsequent weakening of the muscle reflex, this muscle reflex now becomes, in the opposite sense, "strong" again: the field resonance cancels the "thought field", and the reflex situation reverts to its original neutral state. But at this moment, the diagnosis is right in front of our eyes, visible and perceptible.

The process that formats the Decoding Field corresponds as to content with the Identification of the Primary Field - or, in other words: Arnica is the therapeutic for the elbow pain..The Decoding Field itself depends on additional factors. As indicated above, a bioenergetic test design must encompass - besides the patient to be tested.

- **A specific technique with which the "language of the unconscious" -- i.e. the test reactions -- can be retrieved (muscle reflexes, skin resistance readings, etc.)**
- **A specific technique by means of which the "Identification" of both the Primary and the Decoding fields can be defined (remedies, therapy localization, visualization of thoughts and emotions, etc.)**

An additional "human component" must be present, able to generate a Decoding Field. Usually, this is the tester.

Scalar Induction of a Decoding Field

The Decoding Field to be generated by the tester is, as regards strength and preciseness of the Identification, of a magnitude that influences the quality of the test: we here approach a phenomenon known in modern biology as the "morphic field". Now, the question is, how can such a Decoding Field be optimally induced. Since thought fields are scalars to begin with, artificially induced scalar fields would be the most suitable for this purpose.

Scalar waves - as we here designate, by way of summary, all unconventional non-electromagnetic fields - are a type of electromagnetic potential. These potentials are a component of Maxwell's electromagnetic theory, yet they continue to this day to be viewed by the majority of physical scientists as purely mathematical magnitudes having no physical meaning.

However, since the discovery of the Aharonov-Bohm Effect, we know that potentials represent a physical reality and exert measurable physical effects. They are not force fields like electromagnetic fields are, since they cannot perform work; instead, they represent potential energy, the possibility of effecting something.

They are more fundamental than the electromagnetic forces that arise from them, and which actually simply represent concrete concepts for the observed energy and impulse transmission rates in the electromagnetic interaction.

According to William Tiller, the potentials have an important mediatory function between the vacuum and electromagnetic fields, as well as the macroscopic quantum states of solid matter, since they monitor the phase - central to quantum biology - of the electromagnetic fields. In his view, the non-physical "subtle energy" fields of the vacuum (which belong to a higher dimension than space-time) organize the structure of space-time, which in turn generates the corresponding electromagnetic fields (thus, for example, biophotons) via mediation of the potentials.

It must be assumed that the information field of the vacuum has a structure that can be induced and modulated. In SkaSys, the computer-aided data supply - with the audio graphic conversion of homeopathic agents, nosodes, substitution agents, metabolites and materials, as well as of representations such as acupuncture points, Hand Modes, organ and cell components - takes over the task of providing retrievable information. SkaSys works with acoustic field induction, not "digitised" remedies.

The technical preparation of this information via a non-inductive coil (Moebius Strip) makes possible precise and contentually accurate transmission via scalar action vectors, with no contact, to the testers field, thus inducing a highly specific Decoding Field.

Thus, certain geometric arrangements are needed to generate electromagnetic potentials (scalar waves). The essential element in all of these arrangements is the generation of backward-travelling electrical currents in current-carrying conductors with non-inductive geometries, in which the resulting "anti-parallel" magnetic fields cancel each other out by [destructive] interference.

The basic principle is that, in a "null-vector field" generated in this manner, potentials can persist whose magnitude is greater than zero.

The SkaSys Testing System utilizes a Moebius Strip geometry. A "Moebius Strip" is a loop formed by joining together two ends of a flat ribbon or band, first giving one of the ends a half twist [180° rotation]; the resulting loop only has a single surface. The inner and outer surfaces are one and the same. For the same reason, it only has a single edge. The Moebius Strip was first introduced by the German mathematician August Ferdinand Möbius (1790-1868).

The majority of the serious biological research on Moebius-Strip induced potential fields is the work of the American neurophysiologist Glen Rein. Stimulated by reports that plants evidently flourished in labs where "free energy" devices were in use, Rein carried out in 1987-89 a series of in vitro experiments on nerve and immune-system cells from cell cultures, doing it with and - as a control - without a Moebius Strip.

The experiments showed that both arrangements inhibited the uptake of neurotransmitters by PC12 nerve cells through their cell membrane, as had been observed previously for regular EMF. However, electrical field plus potential field had a

19.5 % greater effect than the electrical field alone. Later, the experiments were repeated using human lymphocytes.

Applying only an electrical field, their growth was 34 % greater compared to cells grown in the absence of any external fields. With the addition of the potential field from the Moebius Strip, multiplication of the lymphocytes climbed to 76 % more than the electrical field alone. Thus, for the first time, a direct biochemical effect of potential fields at the cell level was demonstrated, and excluding the possibility of placebo effects