

## Extended application of nutrient points

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From a scientific perspective, what are the nutrient points used in Sissi Karz's bioresonance therapy? Are they scientifically explicable, reproducible? Are there perhaps other nutrient points? Are there useful connections to other areas? Fundamentally, is there possibly a broader vision for the way in which bioresonance therapy works?

Here, it is useful to look at **the system of NetzwerkMensch(NM) physiology** (Network Human physiology). NM physiology is a **body-mind-soul system** in the form of a system analysis of the human being, which enables a type of work that uses the **patient's resources**. This physiology takes into account the body's **self-organisation and self-regulation** which automatically results in the **integration** of all bodily functions (from a theoretical point of view of modern mathematics - the mathematics of complexity, chance and chaos - the integration is thereby an attractor). In practice, NM physiology results in a **structured diagnosis** as the basis of a **therapy** that is **individually** adapted to and for the patients.

The **basis** of NM physiology is the "Wissenschaft der Feinstofflichkeit" ("Science of Subtle Matter") (see article on the website <https://www.netzwerk mensch.net/artikel-video>) based on the **electromagnetic field** (electricity+ magnetism+ optical light).

We may be genetic and biomolecular machines on two legs, but there is more to us than that. To appreciate what this 'more' is and, at the same time, present a **contemporary scientific approach**, it is necessary to consider the existence of **fields**. Fields with their waves should be understood through frequencies and resonances; their effects. Alongside cybernetics, network science and secondary mitochondriopathy, the contemporary scientific approach also includes **modern physics (quantum physics, quantum mechanics)**, which builds on the effect of the electromagnetic field, including light. This type of physics is a **physics of possibilities and relationships, a type of physics with a holistic approach**, the basis of which holistic medicine can be built upon.

The **basic scientific principles of the science of subtle matter** obtain their greatest pulses through the electromagnetic field, the Aharonov-Bohm effect and dissipative structures, through

1. Herbert Fröhlich and and Cyril Smith with the insight to acknowledge the **electromagnetic field (EMF)** as the most important coupling in living organisms and through
2. the Aharonov/Bohm effect which paved the way for the **subtle matter** of energy and the information of living organisms, as well as through
3. the **dissipative structures** of the thermodynamics of Prigogine's open cybernetic systems.

The term **dissipative structure**, which came about rather academically, will become more familiar to you if I list some examples from nature ...: waterfalls, clouds, a candle flame, swirls in the water of a river, through to storms and hurricanes. Around the year

1970, Ilya Prigogine named these dynamic structures "dissipative structures" in order to better distinguish them from static structures. Although dissipative structures widely existed long before modern civilisation, the development of the sciences and the birth of Ilya Prigogine, and fascinated human beings (the "elements"), the scientist's contribution led to an enormous expansion of modern science, including physics, chemistry, biology and, particularly importantly for us, medicine. Examples of dissipative structures that I very effectively work with in some instances include: 109 acupuncture meridians with their points, neural therapy pathways, trigger points, neuro-lymphatic and neurovascular systems with their points, and nutrient points according to Sissi Karz/Riddle. Because the majority of the structures in living organisms are dissipative rather than static in nature, a main focus of future medicine shall be in the field of subtle matter. All living organisms are dissipative structures. (From the book "NetzwerkMensch – Information, Energie, Materie" – "Network Human – Information, Energy, Matter")

Using the science of subtle matter, we are able to - amongst other things - better interpret and understand the **functional circuits** of traditional Chinese medicine (TCM) (from the article "Elektrizität, Magnetismus und Licht – Ist die TCM-Meridiantherapie angewandte Quantenphysik?" – "Electricity, Magnetism and Light – Is the TCM meridian therapy applied quantum physics?"): functional circuits are systems composed of coupled wave oscillations of defined frequencies of individual subsystems, individual organs. These frequencies are interconnected via the meridian system, a dissipative structure of the electromagnetic field, by means of the "most basic coupling that occurs in living organisms" – the EMF- (also see Bentov's example of the pebbles in water with their wave interferences in the article "Die Wissenschaft der Feinstofflichkeit" – "The Science of Subtle Matter"). "... biophysics regards the living organism, with its countless rhythmic processes of various frequency, as a complex, dynamic and coherent "concert" of oscillating fields that are coupled together non-linearly via their phase relationships." [11]

The **model of the quantum computer in living organisms** with "hardware", "software", "operating system" (extended basic regulation), "body wide web" (BWW), "pilot" and "autopilot" enables practical work with the patients which takes both material and subtle-matter (energetic and informational) aspects into consideration.<sup>1</sup>

The material basis for subtle-matter information and energy in living organisms is the *Lebende Matrix im Netzwerk Mensch* (Living Matrix in the Network Human) (see article on the website <https://www.netzwerk mensch.net/artikel-video>)

The **extracellular matrix (Pischinger's space)** serves as an essential transit route of the cell metabolism with a connection to all of the body's systems– central and autonomic nervous system as well as the arterial, venous and lymphatic vascular system and immune system. However, in addition, due to silicone stored in polymers and crystalline water, it has the function of a **semiconductor** [20, 4] and of coupling for the communication via the EMF (**EZ water** – G. Pollack).

Together, the cell matrix and the extracellular matrix form the "**living matrix**" – a communication system passing through all levels, composed of various emerging areas of the body that are separate from one another. It forms an important part of the system

via which subtle-matter energy and information disseminate over the electromagnetic field in the organism at the speed of light, and control its structures and functions. The "living matrix" can therefore be referred to as a meta level of an integrative physiology. Integrative physiology is the basis of integrative medicine.

The application of NM physiology not only enables therapists to work in an informed manner in the realm of the physical body and in the domain of coarse-matter energy, but also enables scientifically substantiated work with subtle-matter energy and information – and, ultimately, with data processing and -storage in living organisms and humans. Hence why I shall also refer to the electromagnetic level as the body's control level.

**Scar interferences** are areas of previously severed skin with a reduced electromagnetic gradient – mainly of lower electrical potential (from the article "Narbenstörungen – Störungen des elektromagnetischen Feldes im NetzwerkMensch" – "Scar interferences – Interferences to the electromagnetic field in the Network Human"). Now, the area of the scar interference only has a gradient to its surroundings one again, due to the electrical membrane potential modified to its environment, and thereby becomes a disturbance in the body's electromagnetic field. This interference, due to a reduced or absent gradient of the electromagnetic field, should be treated by the re-establishment of the gradient. Hence the **scar interferences are caused by interferences to wound healing in the EMF**. For scar interferences, the gradient on the epidermis, which had previously existed at the site of the no longer severed skin, is not restored again or is not completely restored. Thus not every scar is also a scar interference field. There are also scars without scar interference, namely scars with normal gradients restored during the skin's healing process. This electromagnetic interference of the skin can be so radical that it can create instability in all of our "operational programmes" in the **basic regulation** of the system, the "operating system of our quantum computer". This can then result in faulty testing, e. g. for muscle testing or other "energetic processes" with high sensitivity and simultaneous susceptibility [10]. Hence why there is also often talk of therapy blockages in relation to scar interferences; only when these obstacles have been removed, can further therapy be more effective or, often, even be effective at all.

I imagine a **possible scientific interpretation of nutrient points** by Sissi Karz in connection with the *Wissenschaft der Feinstofflichkeit im NM* (Science of Subtle Matter in the NM) as being similar to scar interferences as minimal interferences to the skin's electrical potential. This interference alters the EMF and can communicate with other interferences of the EMF (scar fields/nutrient point fields). The notion of an 'input socket' is closely related to the metaphor of the bio-PC.

Within the framework of NM physiology, I shall refer to the nutrient points as **utilisation disturbance points**. They represent a very good level of access to the metabolic level and overall system. The networks of the wide range of substances and reactions in the metabolism are ultimately not straightforward. In this instance, work with the superior control level in the body's EMF can be helpful. In practice, the utilisation disturbance points (UDPs) represent a type of 'input point'; an 'input socket' of a 'metabolic black box'. At the same time, diagnosis and therapy with the UDPs therefore represents a link between the metabolic and electromagnetic control level.

By way of example, the following aspects can be provided as **additional points**: hormonal (thyroid hormones) and neural transmitters (ADR) as well as mitochondrial co-factors (alpha-lipoic acid). Sissi Karz has already defined allocated nutrient points among the mitochondrial co-factors (Q 10/minerals/vitamins/AS). Additional points include the utilisation disturbance of omega 3 fatty acid/alpha-lipoic acid.

The selection of individual UDPs takes place as a result of the connection of functional circuit couplings with their allocated metabolic substances (see example 3 E in table).

I have incorporated the work with nutrient points by means of bioresonance into a therapy concept with one-needle acupuncture, manipulation to the cranial-sacral system, and a "knock software technique" which I successfully use in my clinic for approx. 95 % of the more than 30 patients I see per week. On a material level, the therapy is supplemented by orthomolecular medicine and phytotherapy, bowel treatment and removal-detoxification. In this way, I am able to treat each individual patient in a customised manner, by means of NM physiology based on a structured regime.

Hormonal, neural transmitter mitochondrial co-factors	Example: SD hormones ADR  Alpha-lipoic acid
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Tab. 1: Mitotrope Substanzen, Co-Faktoren der Mitochondrien [7]

Energie	Membran	Antioxidanzien Entgiftung	Spurenelemente
Ubiquinol	Phospholipide	SOD	Zink
Ubiquinon	Tocopherole	GPx	Mangan
B2	Omega-3-Fettsäuren	KAT	Selen
B3 (NADH)		Vitamin E	Kupfer
Magnesium		Vitamin B12	Chrom
Vitamin C		Vitamin D3	Eisen
Glutamin		Glutathion	
Liponsäure			
Kreatin			
Taurin			
Aminosäuren			

<b>Nutrient–UDP</b>	<b>Programme (minutes)</b>	<b>Localisation</b>
Alpha-lipoic acid right	835 (7) + 460 (3) + 250 (3)	shoulder blade, upper centre-
Thyroid hormones	804 (3)	right temporomandibular joint
Carnitine	520 (6) + 460 (3)	coracoacromial arch, left
IgA	428 (3)	right sacroiliac joint
Curcuma	530 (10) + 580 (5)	lumbar spine, centre
Glutathione	?? ( )	between umbilicus and pubis
Uric acid	910 (6) + 421 (3) + 530 (10) + 922 (5) + 812 (8)	left 12th rib, rear axillary
Histamine left	447 (8)	cheekbone, towards the nose,
DAO (Diaminooxidase)	842 (6) + 922 (5)	left Inguinal ligament
Homocysteine left	826 (5)	shoulder blade, upper centre-
Iodine collarbone	311 (4)	middle of neck between the
Omega 3 fatty acid	520 (6) + 530 (10)	left Thigh, centre 1/3 dorsal
Phenylalanine	522	squamosal suture right cranium
ADR	530 (10)	left Temporomandibular joint
Progesterone	934 (4) + 980 (3)	left, dorsal Piriformis on femur socket
Tryptophan	428 (3)	right Sacroiliac joint
Tryptophan MCL.	824 (5) + 341 (4)	left under umbilicus at level of
Sugar	860 (5) + 808 (5) + 450 (4)	2-3QF under navel + 2-3 cun left
Utilisation disturbance Colloidal silver	530 (3)	right Groin over utilisation iron



## 1 Functional regulation circuit of the fire element of TCM with allocated coupling of meridian with ancient tonifying/sedation point **nutrient/UDP**- tooth-muscle-organ.

Meridian	Nutrients	Teeth
Triple warmer T: Di 1 S: Bl 66	Thyroid substance or nucleoprotein extract., <b>organic iodine</b> , copper, tyrosine, zinc, thymus concentrate, vit. A, vit. C	18.28 38.48
Muscle	Organ	Bilateral weakness
Teres minor muscle	Thyroid	
Infraspinatus muscle	Thymus	

### Patient example

Following a visit to the dentist at the end of 2016 in which he received a filling to tooth 16, a fit 34-year-old patient with a muscular physique experienced severe pain on the right-side cervical spine radiating to the right arm, as well as tingling paraesthesia. The patient felt as if the muscles on his right shoulder blade were no longer working properly. He visited my clinic following consultation with an orthopaedic specialist, two physiotherapy clinics and another dentist. There was a significant deficit of movement when lifting the right arm above the head. Upon lifting the arm above the head, the right shoulder blade became severely malpositioned in that it strongly lifted off the thorax.

At the first consultation, the basic regulation was disturbed by a selenium deficiency. Furthermore, magnesium, calcium and thyroid hormone deficiencies with utilisation disturbances were present.

In the area of the right shoulder and right shoulder blade, nine muscles were not activated. Teeth 15 & 45 tested conspicuously: in the muscle testing with applied kinesiology, both teeth tested positive for procaine, Neuralgia Inducing Cavitation Osteonecrosis and acute pulpitis D 12, and were related to the non-activated muscles of the right shoulder and right shoulder blade.

Therapy during the first consultation: neural therapy (2 ml procaine with soaring nosodes), teeth 15 and 45, one-needle acupuncture (ancient points of AKMT), neurological integration of the utilisation disturbances and manipulation to cranial-sacral system. Further treatment with bioresonance (scars + UDPs).

Subsequently, continued application of the same therapies whereby, in the meantime, tooth 47 was conspicuous on one occasion. A total of seven bioresonance treatments were carried out.

At the fourth consultation appointment, tooth 15 continued to test positive for chronic pulpitis D 12.

Occasionally, there were short periods of complete freedom from symptoms. Overall, the symptoms are still only minor. There is no more pain. A slight difference can be identified when lifting the right arm above the head; there is no malposition of the right shoulder blade.

Summarised assessment: the patient presented with various disturbances in the field of 'Subtle Matter' (EMF), to three teeth on the right side (1st +4th quadrant), interference fields disturbed the body's electromagnetic field and influenced the activation of the allocated muscles. In addition, mineral and SD hormone deficiencies were present due to utilisation disturbances. All of the disturbances behind the symptoms constitute an overburden, an intersection of large number of interference factors. The unstable, vulnerable situation was decompensated by the manipulation to tooth 16 and then resulted in the symptoms. The additional manipulation to tooth 16 was the final straw.