Marguerite Lane, ND - Hormon treatment with MORA

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Hot Flashes! - Could it be Hormones?

By Marguerite Lane, ND

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"I keep getting sweats between 1:30 and 3:30 am. Could it be menopause starting?" These were the first words out of her mouth after we sat down to start the consultation. She was 45 years old, had had no children or pregnancies, and generally in good health. My analytical brain switched into action with diagnostic possibilities – Menopause? Viral or bacterial infection? Thyroid problems? Exposure to toxins? Parasite? Insect bite?...

I had seen this client many times in the past, so I was familiar with her health patterns and weaknesses. I knew that she had not had any thyroid issues in the past. However, I don't like to rely on previous impressions as a way of eliminating diagnoses. I have learned through years of MORA practice to listen to the client, ask questions to gain more insight, and then test every possibility.

She told me that in the previous week her energy levels were lower than normal. She had a slight headache, increased thirst, and was not as mentally clear as usual. A month previously she'd had some mid-cycle spotting and in the past 6 months she had missed two periods. Every symptom is a sign post and must be taken seriously. Most of the time there is more than one issue involved in health problems which are serious (or annoying) enough to cause a person to seek help. My modus operandi is to leave no stone unturned. I have the luxury of being able to do this because I have a MORA. I can run through 100 or more different tests in the hour's consultation for no extra charge, and receive the answers immediately.

I don't have to be all-knowing, thank goodness!

And so one by one I tested each differential diagnostic possibility.

Organ Preparations I started with Test Set W (the Wala test set) to test several potencies of various organ preparations: thyroid, ovary, pituitary. It's always a good idea to test the liver and kidneys, since they are so vital to the body's ability to deactivate and eliminate not only toxins, a common problem in today's world, but also hormones.

Toxicity

Then I tested her overall level of toxicity using Cornelissen's test set item, Acidum Malicum. I recalled a situation a few years ago with a client whose hot flushes had finished. She returned to see me a year or two later with strong hot flushes again. Her toxicity level had jumped up several hundred points on the scale. At the time, I tested her for pesticides and herbicides. The culprit was a widely used glyphosate product. Using a MORA elimination program, she was back to

normal after a single treatment. The toxins had not yet deposited in her deep tissues, so with the help of the MORA, they were able to be released quickly.

Viral, bacterial, insect borne illnesses

Next I opened the nosode test set and quickly ran through the bacterial nosodes, the Coxsackie and Grippe viral nosodes, and the Influenza nosodes. This group of nosode tests took about 3 minutes. Then, in the Cornelissen test set, I tested the top 20 parasites, Mycoplasma varieties, Epstein Barr Virus, Cytomegalovirus, Pfeiffer's Glandular Fever, Borrelia and other tick fevers. About 20 minutes had passed and I had found a few clues as to what was happening. She tested positive for two strains of Coxsackie virus and one Influenza virus. Her toxicity levels were low (we had dealt with them in the past and apparently she wasn't suffering from a sudden acute exposure to pesticides or similar.)

Hormones

The next step was to test hormone levels. I usually do not start my testing with the hormones because they can be affected by many other things. I consider them to be an effect, rather than an underlying cause of most

problems. However, there are no hard and fast rules with health. If symptoms of menopausal changes are obvious, then immediately after testing ovaries, pituitary and hypothalamus, I test each hormone.

The client sat patiently and was attentively watching my PC screen as I put the cursor on each hormone as it was being tested: DHEA, Cortisol, Adrenalin, Acetylcholine, Noradrenalin, Dopamine, Melatonin, estradiol, Progesterone, Testosterone, Serotonin, etc The MORA gives a tone with each test. Using the Cornelissen technique, when the tone is low, a resonance has been found. This happened with Cortisol, so I tested the different levels available in the test set. The equivalent of 10mg registered a resonance.

Other hormones that gave a positive signal were Estradiol and Serotonin.

Because Cortisol gave a resonance signal, I went back to the Wala test set to check the adrenals. The Wala test set has organ preps for the adrenals as a whole, as well as just the medulla and cortex. It's handy to have access to this level of detail. I have found that the more specific I can be, the more effective is the treatment. In my opinion, any organ preps that resonate with the client are vital to the successful treatment. I think of them as guiding the rest of the remedies to the correct location. Also, they make it easy for someone trained in Western medicine to envisage, conceptualise and explain the client's symptoms. Clients can easily understand, too. With a good grounding in anatomy and physiology, a wholistic practitioner can piece together and test each step along the way from health to disease. People appreciate understanding the causes of their ill health. It empowers them to make better choices in the future. In this case, none of the organ preps were needed at this time, so I was not able to get any further clues here. At least I knew that there was no major imbalance or chronic disorder.

As far as hormones were concerned, so far I knew that this client had an "issue" with Cortisol, Estradiol and Serotonin. I call them issues rather than deficiencies, since there's no way to be certain at this point. The resonance could be related to metabolism and utilisation, for example, rather than to frank deficiency.

Nutrients

Perhaps a quick test of nutrients was in order. Many nutrients act as cofactors in metabolic processes, and even one nutrient being blocked can have a sort of ricochet effect causing the body to compensate in unpredictable ways.

Zinc is always at the top of my priority list because it is so vital to hundreds of enzyme

reactions. In this particular case, if the client were not utilising zinc, she may have difficulty with the conversion pathway from cholesterol to both Cortisol and Estrogen(1).

And so I proceeded to test the nutrients. This took another 5 or 10 minutes. It was worth the time, even though today no resonance was returned.

Assemble the Treatments

Before I continued, I reviewed the client's symptoms to be certain that I had found something that would account for all of them. The night sweats, fatigue, brain fog, and headaches could all be related to viruses. Some of her hormones were out of balance which could account for the mid-cycle spotting.

The next step was to assemble the treatments. I always run two main programs:

One for energy system balance and to stimulate the channels of elimination, and strengthen any vulnerable organs or tissues found in testing (Cornelissen's program 78)

One to neutralise the factors that are burdening the body (Cornelissen's program 77) In the first treatment, I always combine various homeopathic remedies or preparations. I prefer

the Heel test set for this, since it encompasses such a multitude of remedies, both as

Homaccords and as predefined combinations such as Reneel. I tested all the remedies that seemed relevant and then put them together and tested them

as a group. When the resonance signal was returned, I was assured that her system was willing and able to accept the group of remedies all at once.

The treatments were as follows:

Program #78 (Balance and Medicines)

ELH:

Echinacea compositum forte (for lymphatic drainage and immune balance)

Galium-Heel (excellent drainage remedy, resonates with nearly every client) Lymphomyosot (another great drainage remedy, but often it does not resonate with clients, for some reason) Mucosa compositum (support of all mucous membranes. For this client, it provides further immune support)

Cortisol 10 mg

Estradiol 1.00 mg

Serotonin

MT2 (output): water-alcohol mixture, to make MORA drops for her to take twice a day, 4 drops per dose. The optimal times to take hormone-related substances are around 6 am and 4 pm. I mention this to clients who need hormone support, but assure them that they don't have to be so strict. I'd rather have them comply slightly inaccurately than skip doses because they can't get it right!

Program #77 (Universal Neutralization Program)

ELH:

Coxsackie B3

Coxsackie B5

Influencinum AB

Follow up: I saw her again 7 weeks later and she reported that the symptoms had gone within hours after the treatment. She had taken the MORA drops for a few weeks, but didn't feel that she needed them, so she eventually stopped and has felt fine ever since. Was it the start of menopause? Maybe, and if so, we've eased the early stages of the transition. An actual diagnostic label is never important to me. My aim is to bring my clients to optimal health. For that, the MORA is indispensable in my clinic.

References:

1) Tabrizian, Dr Igor, Visual Textbook of Nutritional Medicine, NRS Publications, Bangkok, 2012. Page 96.