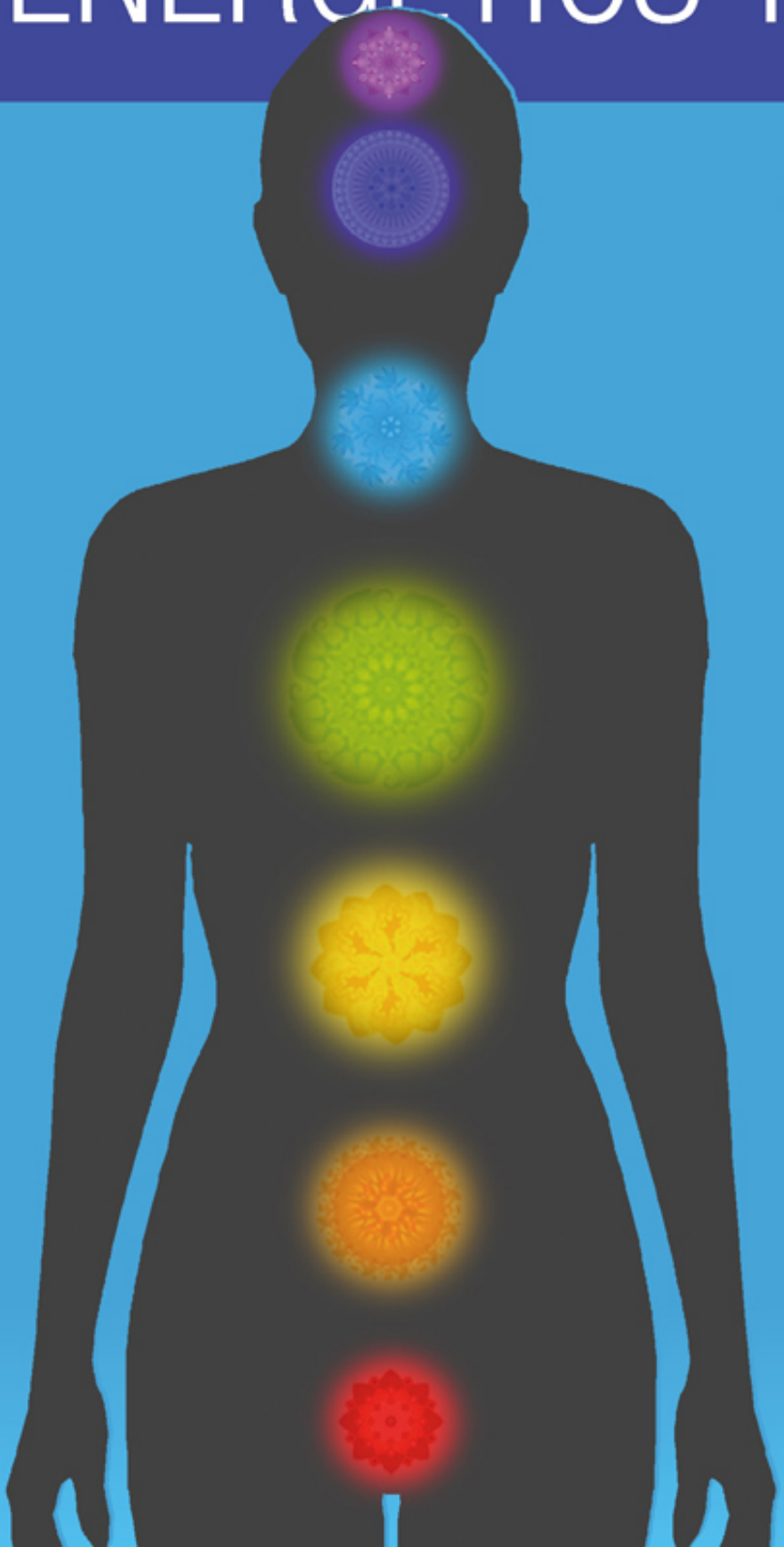
PSYCHOSOMATIC ENERGETICS TEXTBOOK

Reimar Banis



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Dr. Reimar Banis

Born 1951 in West Berlin, grew up in the Ruhr valley, alternative service in hospital, after graduation from high school, attended the all-day German Naturopathic School (DH) in Bochum for two years. Passed the naturopathic examination in 1976, then studied human medicine in Heidelberg. Doctorate under Prof. Maria Blohmke (social medicine), dissertation title *Thermoregulation Diagnostics and Focal Diseases,* magna cum laude. 1984 American State Exam (ECFMG). Worked as assistant physician at the internal-medicine ICU in one of Germany's largest rheumatism clinics (University of Hanover).

Since 1985 established physician in general medicine with continuing-education warrant in naturopathic medicine, over a decade as panel doctor with practices in Achern (southern Baden), Stuttgart, Plochingen. Private practices in Ostfildern, Bregenz and Wallerfangen. Intensive collaboration with H.W. Schimmel, developer of the Vegatest. Collaborated in research on electroacupuncture and computerized segment electrography with Prof. G. Heim, Heidelberg University. Seminar activity around the world, and development of Psychosomatic Energetics.

Reimar Banis is married to a Swiss woman, lives in the vicinity of Lucerne with three children: Jana, Frederik and David.

Preface

The Psychosomatic Energetics Textbook (PSE) is meant as an aid and reference work for therapists while in training to become “Certified Energy Therapists”, but also to be useful later in daily clinical practice. At this point, after more than 15 years, over 600 therapists in German-speaking countries and 50 in North America have been trained, and Psychosomatic Energetics – originally developed from the precursor Vegatest method of H.W. Schimmel – is well on the way to becoming one of the standard methods of modern complementary medicine.

For those interested in the method, this textbook provides a good overview of the possibilities and limits of the method, but it cannot replace practical training. To the uninitiated, energy tests might seem easy to perform, but they are very sensitive and require intensive training in order to obtain good results.

With standardization, PSE aspires to a high level of quality, and this textbook makes an important contribution thereto.

The textbook contains the entire training material for PSE and I’m very grateful that my colleague Dr. Birgitt Holschuh-Lorang, head of PSE training, has looked it over and authorized it.

The textbook is now 16 years old. First published in 1997 by CO’med Verlag in Sulzbach, a thoroughly revised version was published in 2003 in three editions by VAK Verlag in Hinterzarten. In 2013, the textbook again needed to be completely rewritten and brought up to date. It now contains all the studies and scientific research on PSE, as well as an overview of the therapeutic options for a number

of different disease pictures. Each procedure is illustrated by means of specific pertinent cases. Because PSE provides a glimpse into the characterological deep structure by which human feelings and actions are subconsciously pre-formed, PSE also makes possible a kind of psychotherapeutic life-counseling, the possibilities of which are likewise thoroughly presented.

Since PSE is active in a relatively unexplored region of the human organism, a certain degree of theoretical underpinning was necessary to indicate what PSE is capable of. The model developed here of the psychosomatic and subtle-energy mesenchymal mode of action should be regarded as provisional; nevertheless, it has a high reality content, since it is based upon decades of clinical experience. It is intended to help therapists to arrive at correct decisions in each case, and also to be able to explain to patients the healing principle of subtle-energy harmonization.

Hergiswil/ Switzerland, August 2014
Dr. Reimar Banis

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Basics

1 Introduction

This manual deals with the complementary-medicine method known as Psychosomatic Energetics (PSE), which the author developed in the mid-90s in his naturopathic general practice. As a textbook, it is oriented exclusively towards therapists, and presents the essential knowledge and insights of the method. It contains the learning material for the training course toward becoming a “Certified Energy Therapist”, a multiyear PSE-specific extra-occupational supplementary course with written and oral exams as well as obligatory continuing education. This training is authorized by the International Society for Psychosomatic Energetics [IGPSE: Internationale Gesellschaft für Psychosomatische Energetik; website: www.ipse.ch) and is carried out by a team of physicians and naturopathic practitioners.

Along with the multi-volume PSE readers, this manual is meant to serve as a practical reference work when questions arise in daily practice. In order to make this easier, it contains an index as well as an easily understandable copiously illustrated introduction to testing. It also includes many useful case histories as well as a rich variety of answers to frequently asked questions. I hope it will turn out to be a valuable enrichment of each reader’s daily practice.

Fortunately, Psychosomatic Energetics has quickly established itself as a new standard procedure in modern complementary medicine. In the opinion of many colleagues, this is attributable primarily to two characteristics of the method: the logical simplicity of its

practical application and its high therapeutic efficiency. Meanwhile, in a great many clinical studies, the success rate for common mainstream medicine disease pictures is over 80%, in which more than 1200 patients from the entire range of mainstream medicine diseases have been treated. Many important questions in daily practice can only be answered at this high level of quality and confidence with PSE. In more than a few practices led by experienced therapists, this has now led to Psychosomatic Energetics becoming the primary procedure of choice.

Experience has shown that, with Psychosomatic Energetics, one can practice holistic medicine in the truest sense of the word, which leads for many disease pictures to psychological and somatic improvement or healing. The elimination of conflicts resolves psychoenergetic blocks, so that life energy can once again flow at full strength. A disrupted metabolic system is able to renormalize, amazingly often leading to emotional regeneration as well as physical healing processes. Thus, with PSE, one treats both body and soul – i.e. psychosomatically in the best sense of the word. Amazingly, this often even succeeds nonverbally, so that the method can be used successfully with children and animals, as well as with patients with a negative attitude towards psychotherapy. On the other hand, Psychosomatic Energetics is fundamentally open to the application of adjuvant therapies, such that psychotherapy, hypnosis or other procedures can be performed.

Psychosomatic Energetics is based on two fundamental theses. The first thesis is also one of the fundamentals of Indian Yoga and traditional Chinese energy theory, which says that the quality of the subtle energy field reliably reflects a person’s subjective feeling of health, and moreover is crucially related to health and illness – comparable, say, to the relationship between software (energy) and hardware (matter) in a computer. A person

with a lot of subtle energy therefore feels fresh, lively and is usually healthy, whereas sick people tend to have low energy and feel tired and listless. The healing principles of Yoga and acupuncture developed from these observations, which are also the basis of Psychosomatic Energetics.

The second fundamental thesis of the method is based on the presence of emotional conflicts in the energy field. Shamans and spiritual healers have long been able to visualize these “demons” and regard them as important causes of disease. Unlike the current conceptual model of modern psychotherapy, PSE can show that emotional conflicts by no means represent purely emotional processes, but rather are permanently stored in the energy field and act there as “energy thieves”(**cf. Fig. 1.1**). For example, if a patient suffering from depression feels tired, his low energy is based on a *Rage* conflict which constantly siphons off energy and which can be viewed energetically as the cause of the patient’s depression. With the REBA® Test Device, one can measure the energy stored up in the conflict and thereby determine its size, which is an enormous advantage – vis-à-vis techniques which operate entirely on the mental level – not only for the determination of the clinical picture, but also for monitoring the course of treatment.

Psychosomatic Energetics uses a kind of **quick or focal psychotherapy** in which the conflict contents are briefly summarized in a short phrase. The patient is then asked if there’s anything he wants to say about it or if anything occurs to him. In practically all cases, patients recognize that the testable conflict theme addresses the current emotional topic. Many people feel quite relieved to be accepted and correctly understood in the depths of their being. The results of this quick psychotherapy have since come to be regarded as scientifically valid. In particular, the quick response of the conflict contents turns out in many cases to be especially beneficial. The patient maintains his individuality and sovereignty because no regression is

performed, and the mental self-healing powers are optimally stimulated.

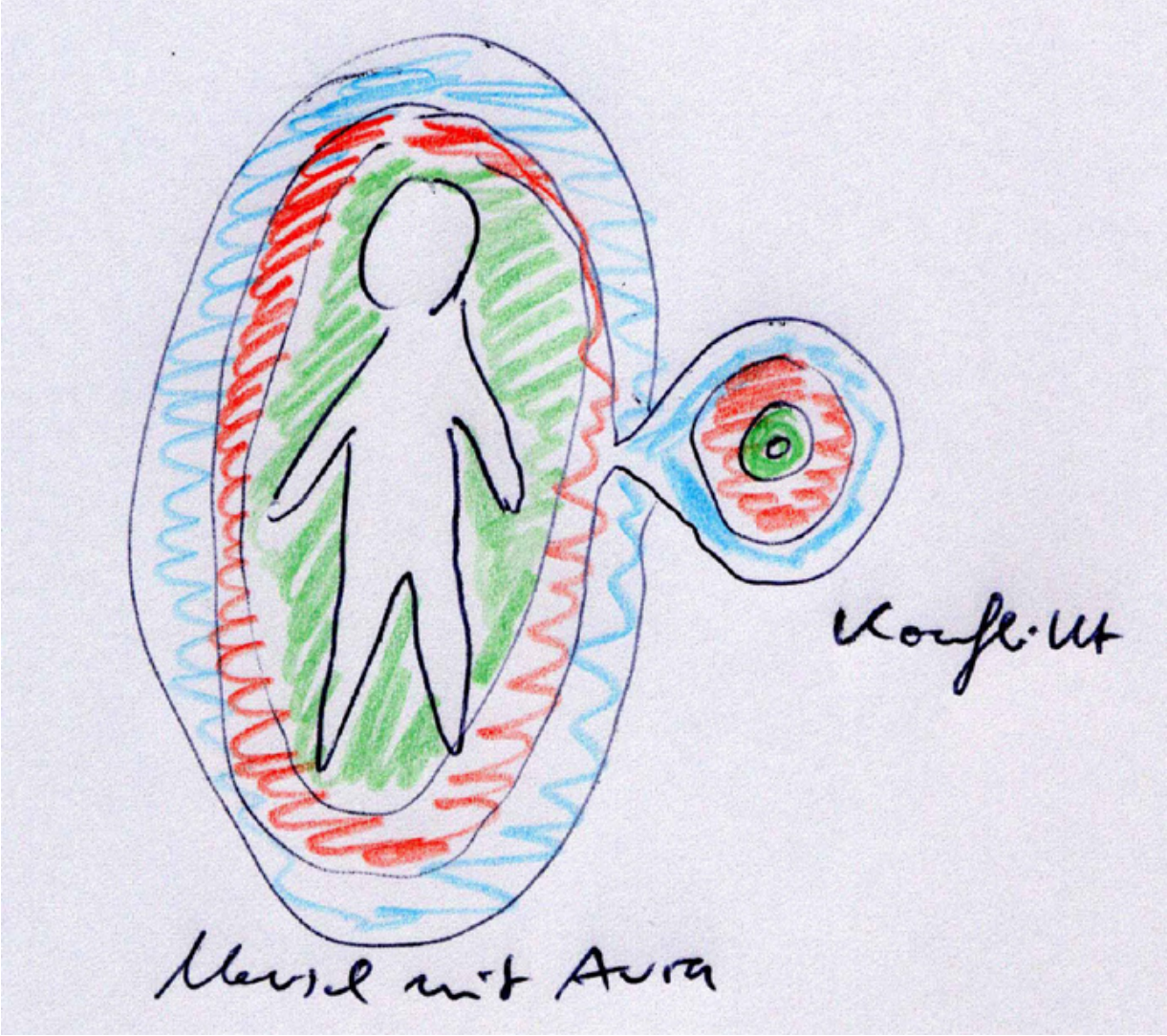

Fig. 1.1 *– Aura levels showing a conflict connected to the Aura via an energetic umbilical cord and feeding vampirically from it (sketch by the author).*

The discussion of the individual **character type**, based on testing of the Central Conflict, leads to particularly profound life counseling sessions. Patients thereby learn about the otherwise subconscious “stage directions” which influence their life scripts and relationships with others. Awareness of the script often enables breakthroughs in personality development, especially when the Central Conflict is

dissolved at the same time. Afterwards, people seem more authentic, are more clearly able to express their needs and are better at demarcating boundaries; they put a stop to self-damaging behavioral patterns and once again look optimistically into the future. In the social give-and-take, the theory of character types has proven to be particularly beneficial in the areas of child rearing and choice of partner.

In Psychosomatic Energetics, **energetic conflict resolution** has turned out to be the key healing element, since ultimately the method also works wordlessly. One is thus dealing here with a special form of psychotherapy which is more closely related to modern energy medicine (such as psychokinesiology or Bach Flowers therapy) and humanistic somatic psychotherapy (biodynamic psychology) than, say, to traditional psychoanalysis. The essential point in Psychosomatic Energetics is that, for the first time in the history of medicine, it seems to be possible to portray one's inner emotional "demons" energetically and most precisely by means of resonance over a few months' time.

We now have amassed clinical practice experience from many thousands of patients who have come to us with a great variety of disease pictures, from simply feeling bad all the way to severe chronic ailments. With this treasure trove of experiences, therefore, this manual can offer quite solid instructions in procedures and techniques which have led to success in the majority of cases. Nevertheless, since it is a living method, new experiences and insights are added every day, which makes standing still impossible and which lead to constant improvement. To this extent, Psychosomatic Energetics represents a continuous learning process to which many colleagues, fortunately, constantly contribute. So the method is always being improved and expanded, and every reader is invited to join in this process.

Moreover, I hope that this manual will "infect" as many therapists as possible with the same enthusiasm with which it was written. Because PSE is not just a method with

excellent results which is easy to use, but also often an outright adventure for the therapist, which ever and again leads to new stimulating insights. I also hope that this book will impart to my colleagues valuable ideas and information. But above all I hope to stimulate them, as they work with character types, to take on the important role of life counselor, whose comfort and advice is so sorely needed by so many suffering people. The PSE toolkit, which reaches deep into the mental and spiritual realm, makes it possible to impart brand-new insights to many people, which then enable them to reconcile themselves with their destiny and to recognize the truly significant life tasks which each person has, namely to get to know themselves at a very deep level and thereby fully develop their individuality.

1.1 How is Psychosomatic Energetics applied in practice?

Fig. 1.2 *Kinesiological arm-length test with the REBA® Test Device.*

In order to give the reader an initial impression of the daily routine with PSE, I would like to describe briefly (in greater detail later on) what a therapist actually does when using PSE. The first step measures the charge on the four subtle-energy levels Vital, Emotional, Mental and Causal using a test device called the REBA® Test Device (Fig. 1.2). The more energy the patient's organism has, the more it can be stressed by the device's vibrations, until finally it exhibits a test reaction. This means, for example in the case of a kinesiological arm-length test, that the position of the patient's parallel arms will become unequal (Fig. 1.3). Other testing procedures can also be used, e.g. a shifting of the pulse wave in the reflex auriculocardial (RAC) test, or an electroacupuncture test device indicating a different value at a measurement point.

There is a training film available for ESP trainees which presents the rule-consistent use of PSE. Every Basic Seminar participant gets a copy of the DVD so that the testing steps can be calmly learned and rehearsed at home.

Fig. 1.3 *– Differing arm positions in the kinesiological arm-length test (positive test reaction).*

In the second step, the therapist uses small test tubes filled with homeopathic compound remedies. This is done to find out why the patient has too little energy – i.e. where the energy blocks are located. The test tubes are placed in the test honeycomb one after another to determine when the patient exhibits a reaction to the test. Experience has shown that, at a particular energy block – whether disturbed energy center (Chakra), subconscious conflict, geo-radiation or functional organ disorder – one of the test tubes will respond. Like a sore spot on the skin which hurts when touched, the organism reacts to the subtle vibrational

signals of a particular test tube because it also contains the same vibrations.

In the third step, the size of an energy block – i.e. how much energy is taken away from the patient – is determined with the aid of the REBA® Test Device. The duration of therapy can be derived from the conflict size. The final testing step then checks whether the therapy will benefit the patient energetically. Placing the test tube in the pelvic region (Yin zone) simulates taking the agent. Next, the energy levels are retested; if they are noticeably improved or even normal (100%), it may be assumed that the medication in the test tube will be the right healing agent, and so the tested healing agent is prescribed for the patient.

After a few months, the patient is retested with the question now being whether the old energy blocks have disappeared and whether any new ones have surfaced. Case studies of more than 1000 patients have shown that, as a rule, there are good results after 2 to 3 sessions. Thus, PSE is not a fast-acting therapy, but rather takes a great deal of time – which the Psyche evidently needs in order to get reoriented. For this reason, all attempts to accelerate PSE have failed.

1.2 Psychosomatic Energetics vs. Orthodox Medicine – just a placebo?

Modern scientifically-oriented medicine (also known as “mainstream medicine”) is known to cover only a portion of the area which makes people sick and for which it can then offer appropriate therapies. One can only estimate how large the region is which mainstream medicine does cover. Based on my decades of experience as a practicing naturopathic physician (going after medical school into a multi-year full-time DH-technical college for training as a

naturopath, I've been comprehensively trained in and have a good overview of both areas), it might be 30% or less. Now of course mainstream medicine is constantly improving and discovering new possibilities such as immune-system modulators in cases of inflamed rheumatism, yet this only marginally changes the lack of knowledge, i.e. the incapacity of mainstream medicine will remain pretty much the same for quite some time.

Because mainstream medicine is unaware of large regions which make people sick – for example disturbed intestinal flora or nocturnal geo-radiation stress, as well as disorders on the subtle-energy level – these areas are obviously not treated. However, Psychosomatic Energetics (PSE) knows about these problems and can offer good solutions – it works as a supplement (complement) to mainstream medicine. With this as background, PSE's time has come when the usual mainstream medicine procedures have come to a dead end. However, one first needs a solid mainstream-medicine diagnosis which is then used as the basis for the application of PSE.

PSE complements mainstream medicine without competing with it, since mainstream-medicine diagnostic procedures have their legitimacy and are often indispensable. I'm not just paying lip service here, I also use it in clinical practice, such as when I strongly urge a patient who has not undergone a mainstream-medicine examination to get an examination (cancer checkup, lab tests, x-rays etc.) or therapy (hypertension therapy etc.) as quickly as possible, if the patient has come in for PSE testing, or maybe have it done afterwards.

One tiresome topic is the placebo accusation, since mainstream medicine refuses to acknowledge any possible diagnostic or therapeutic gaps. Instead of learning from alternative or complementary medicine, one mainstream-medicine journal article asserts that: "placebo effects probably account for part or all of the effectiveness of

alternative and complementary medicine. Since the administration of [...] creates an illusory state of affairs, it needs to be [...] checked as to whether or not the deliberate administration of a placebo might not represent [...] a deception of the patient." [29] Readers of the *Deutsches Ärzteblatt* [German Medical Journal] thereupon wrote angry letters to the editor, indignant at the above quote by Breidert and Hofbauer, insinuating that they would be guilty of fraud under the law if they were to perform homeopathy (as do about 80% of all established German physicians!). In their response, the authors quickly backpedaled, saying that they "had not even considered professional disbarment for practitioners of alternative and complementary medicine; they were merely concerned that physicians be more aware of the placebo effect."

Ultimately, this confrontation hinges upon what is medically correct and sensible. Anyone who is not convinced of the efficacy of homeopathy will understandably be convinced that the administration of a homeopathic agent constitutes a kind of fraud. However, upon closer inspection, the situation is much less drastic than it sounds at first, because categorical statements of this sort – what is 100% right and what is false, what really works and what does not – are impossible to make from a scientific standpoint: no one can say with absolute certainty that homeopathy is ineffective

- because there are plenty of positive studies concerning homeopathy,
- but above all because, for scientific-theoretic considerations, such dogmatic statements are fundamentally impossible to make in the first place.

The basic idea of the scientific theoretician Karl Popper [109] that one should view science as an "unfinished construction site" (to use a visual metaphor) remains to this

day the gold standard of scientific thinking. On principle, serious science may and must not make any final and definitive statements, but rather can only work with probabilities which are subject to constant change. Obviously, critics can nevertheless call into question particular scientifically disputed diagnostic and therapeutic procedures, but they should in all fairness also admit to the proponents that they might under certain circumstances turn out to be right after all. Ultimately, present-day science is something that the scientists of 100 or 200 years ago would largely have found to be absurd and false; one might recall the hostility of his colleagues around 1850 when Semmelweis proposed that unhygienic conditions caused childbed fever. In like manner, it seems thinkable that future research will someday confirm the effectiveness of homeopathy.

Note

Nobel prize winner Luc Montagnier surprised his colleagues during a scientific conference in 2010 with the statement that aqueous solutions which contained the DNA of pathogenic bacteria and viruses (including HIV) "are capable of emitting low-frequency radio waves which then cause the surrounding water molecules to group themselves into "nanostructures". These water molecules could then in turn emit radio waves. Montagnier showed that water maintained these characteristics when the original solution was massively diluted, even up to the point where the original DNA had in fact vanished. In this manner, water could store the "memory" of substances with which it had been in contact – and physicians could make use of these omissions in order to detect disease.

Source: www.theaustralian.com/news/health-science/Nobel-Lorient-gives-homeopathy-a-boost/story-e6frg8ys – 122 588 777 2305

Like other complementary-medicine procedures, homeopathy is controversial primarily because it simply has not yet been sufficiently investigated in its fundamentals nor its therapeutic efficacy. One reason that the situation is so unsatisfactory is because no one in the universities believes in such procedures; that which from the outset is believed to be nonsense will not be considered to be worth investigating in the first place. Besides, it is well known that busying oneself with homeopathic topics does not exactly further one's scientific career. The topic is disreputable, i.e. whoever researches such topics should, to be considered a serious scientist, at least demonstrate that homeopathy has little to no effect. So this is indeed what comes out of many studies, but it needs to be said that there are nevertheless a nontrivial number of positive study results (more on this later).

From a business standpoint, when it comes to the serious clinical studies that need to be done, we are talking about expensive material outlays which can run to much more than $3 million, which busts the limited budget of many naturopathic enterprises. In addition, one needs a suitable personnel and economic environment in order to sensibly carry out studies of this sort in the first place – which, considering the global dominance of mainstream medicine in universities and hospitals, turns out, as we all know, to be quite difficult. Any medical outsider faces difficult initial conditions from the very beginning – or is not able to have his therapeutic method rationally examined at all.

Hence, when it comes to scientific investigations of alternative and mainstream medicine, a double standard is employed: those who attack alternative medicine, as can be seen in the quote from the German medical journal, are ultimately merely expressing thereby their strong belief in the current scientific status quo. If one considers contemporary mainstream medicine to be the "true and only church", then anything that deviates from this is

basically heretical. One believes exclusively in mainstream medicine and is therefore completely convinced of its correctness.

However, since serious homeopathic research already exists also, which numerous successfully concluded clinical studies and even positive meta-studies demonstrate (mostly carried out in private clinics and special homeopathic departments), there are definitely serious indications that homeopathy is indeed effective.

But the stridency of the confrontation is fueled by other matters. Viewed superficially, it is initially a matter of medical worldviews and current political, business and societal positions – i.e. with objective arguments. But behind these one finds intensely emotional motives such as personal pride, ambition and the like at work. Thus, anyone who is attacked by others will feel personally injured. No wonder, therefore, that the confrontations can at times take a subjective and passionate turn.

For instance, experience has shown that anyone who takes alternative medicine to task in respected medical journals, such as I cited at the beginning of this section, can count on a rapid climb up the academic career ladder. That which seems to be permeated by noble scientific conviction, striving altruistically to discover the truth, is in reality driven by numerous societal and personal motives. In this context, it is worth noting the empty cash registers of the health insurance firms, which understandably makes the intensity of the struggle to legally carve out as big a piece as possible from the shrinking pie of membership fees ever harder and at times more ruthless. To this extent, the article in the German medical journal is an expression of the predominant political and economic *Zeitgeist*.

That the bitter confrontation between mainstream and alternative medicine frequently takes the form of ideological trench warfare can also be seen among the alternative medicine practitioners. Like their opponents, they too often