



**Why me?
Why now?**

**The secrets of wellness
doctors don't know**

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A book about META-Medicine® – Answering the fundamental questions behind illness and wellness

Chapter 1

The greatest mistake in the treatment of diseases is that there are physicians for the body and physicians for the soul, although the two cannot be separated. ~Plato

It was 10.30 in the morning on a cold winter's day in late 1976, I was twelve and walking up a small hill to a classroom in the school I went to in Bath, England, UK. There were tears flowing down my eyes, I couldn't stop them, they were uncontrollable but I sobbed silently, I didn't want any of my school friends to see me; boys don't cry. I walked alone, it was a horrible, horrible day, however in hindsight, an important one. It was the day I was to make one of the most fundamental decisions of my life, a decision that was to shape me and take me on an incredible journey that, until that time I had not foreseen in any way. A decision that I would not realise its importance until 28 years later.

That morning I had been awoken by my father who unusually instead of popping his jovial head around the door to wake me, had silently walked into my room, without looking at me, his head down hiding his eyes; he sat down on the end of my bed. I could feel something was wrong, he was so obviously different, there was an air of deep anguish around him, as he looked at me, I could tell he was in shock, his eyes were red and bloodshot. I knew something awful had happened but I had no idea what. He sat for a moment, looking at me shaking his head slowly from side to side, I can still see his saddened face, I said nothing but I felt in my belly what was going on. He looked away and spoke, his words were full of grief, 'I don't know how to tell you, you know your Mum was very ill and I'm so sorry Richard but she died late night'.

My parents had divorced 6 years earlier and my mother had noticed lumps in her left breast 1½ years later. She had remarried and had moved an 10 hour car ride away to the north of England from where myself, my father and my two brothers lived in Bath in the south. Seeing her was infrequent and extremely traumatic for myself and my brothers, we missed her terribly. Little did I think at the time that this separation and worry about her three boys was the cause of her breast cancer and subsequent complications and eventual death.

That was where my journey began and how many years later after trying in vain to find out why she died so tragically and so young, an unusual meeting of minds caused me to become part of META-Medicine®. In 2003 I was reviewing an advanced emotional clearing technique called Time-Line Therapy® with Dr Tad James (the

inventor) in Los Angeles, USA. I was asked to stand up and explain as one of the few master trainers in this field, how I use and want to work with this material. I mentioned a German Doctor whose basic principles are discussed in Time-Line Therapy® and go to make up some of the foundation behind META-Medicine®. Sitting right behind me was a man called Johannes Fisslinger, after I had spoken he tapped me on the shoulder and said ‘I’m into the same work, we should talk’. Johannes was just setting up the International META-Medicine® Association at that time and from there on in we have remained good friends and with other great people we have grown META-Medicine® into what it is today.

What is META-Medicine® and what is it not.

So what is META-Medicine®? It is not therapy or therapeutic intervention but a model of diagnosing disease that is based on how the body reacts to a significant stressful event that affects the mind, body, spirit, social and environmental balance of a person or animal. Unlike a traditional medical diagnosis which diagnoses a symptom, META-Medicine® looks at the whole human being, how a disease affects us in all areas of our lives and is truly holistic in its approach to solving problems. Traditional medicine can brilliantly diagnoses the symptoms a person has whether it be, heart disease, a cancer, the flu, a syndrome or any multitude of issues a person might be going through, and from that information doctors will treat the symptom with the aim of getting rid of it, using drugs, surgery, heating, freezing or other therapies to make the symptoms disappears.

META-Medicine® diagnosis is different from a traditional medical diagnosis because although we use that information we go to the root cause of the disease, which we believe is a highly significant stressful event. This method then establishes where a person’s symptoms are, within what we believe to be the process a disease goes through.

Therefore we can explain how a disease and the symptoms move from the damage caused by the ongoing stress, followed by how the body repairs itself after the stressful event has been resolved. From this information a META-Medicine® Health Coach puts together a whole therapy plan that involves the mind, body, spirit, social and environmental solutions; focussed around solving the stressful event that caused the disease to occur in the first place and then supporting the body through the disease process.

Traditional Medicine’s whole premise seems to be based on one major factor, that a disease is a mistake of the body; that somehow we have caught or created this issue, growth or problem. Our body has gone wrong, it is not functioning properly, it is not our fault and therefore the issue/problem has nothing to do with us. That’s why you hear people say ‘Doctor cure me, make me well again, get rid of this thing inside me, cut it out, zap it out, give me drugs to kill the germs, do whatever you want to do to me, just get rid of this thing’.

This approach has worked for many years and certainly modern medical techniques have had a profound effect on the world for the last 100 years. The promise of being able to pop a pill to solve any issue has driven the pharmaceutical industry to relentlessly develop newer, better and more dynamic interventions, some of them

brilliant. Plus it is what we as a society want as well. ‘Give me a pill to make me better’ and until recently, with the lack of proof that the mind is connected to the body, who can blame the general public, the doctors or the pharmaceutical industry for this behaviour

There is a question though, why doesn't this system of ‘Curing’ people work all the time? In recent years the truth has come out. In fact there is a massive growth of energy medicine that is probably going to change health care worldwide, one such method is Nutri Energetics system - NES (www.nutrienergetics.com) and the brilliant work of Professor Peter Fraser. Time and time again I come across people who are not happy with the crippling expensive chemical pill popping culture, because it often only masks the symptoms and the drugs can create more side effects, than the original issue gave the person in the first place. It is also strange that in the last twenty years I find doctors are no longer at the top of the social ladder, enamoured in the past for their magical abilities to cure every ailment in their path, they are more likely to be sued for mal-practice than hailed as healers now.

Plus the fact that the enormous pharmaceutical industry, who interestingly remained totally un-policed worldwide, play such a massive part in our society by keeping government health policy focussed on only one system of healing; that of a chemical resolution for a disease, when clearly there is a wealth of evidence proving that this chemical approach accounts for only a small part of the disease jigsaw puzzle. So what has gone wrong?

I can only speculate because the facts are not available but I have some thoughts on this matter and when you have completed reading this book I believe you may think the same way. I will give you an example. Were you aware that 60 years ago the intervention for cancer was chemotherapy, radiation and surgery. It was all experimental and the survival rate of a person with lung or pancreatic cancer has hardly changed in that time.

Today the intervention for cancer has remained practically the same, chemotherapy, radiation and surgery with a tiny little bit of hormone therapy. The survival rate for many cancers have remained the same despite reported improvements in the effectiveness of chemotherapies. In his book *Questioning Chemotherapy* Ralph Moss PhD www.cancerdecisions.com talks about how many doctors explain to the few clients that ask them, after they have received a cancer diagnoses, that having chemotherapy will improve their chances by 30%. Sounds good but what does that 30% mean? Do people live longer and without reoccurrence? How are these statistics compiled by personal supervision or carefully controlled clinical trials?

Ralph Moss describes that the 30% often quoted tells a person how long they will live without signs of the disease, but it does not tell them if they will actually live any longer than they would have if they had not had chemotherapy. He illustrates this point by mentioning ten randomized trials of chemotherapy for node-negative breast cancer did reduce rate of recurrence by about one-third, but had no visible effect on survival. (An example of the 30% improvement often mentioned.)

This may surprise you as everyday we are told about the dramatic improvements in cancer treatments. However it seems that the truth is not as good as we are led to

believe. Yes breast cancer reoccurrence rates are down by 50% over the past 30 years. Therefore implying survival rates are up by 50%.

Reading through the literature most of these efforts are put down to better screening, smoking reduction and education. However in 1994 the Canadian government determined in examining 50,000 women from 40-49 years of age, that in the group that received mammograms, 33% more women died of breast cancer than died in the comparison group who were not screened.

The trauma that a women goes through when having a mammogram could be causing a cancer to occur. A Dr J.P. Van Netten at the Royal Jubilee Hospital in London demonstrated this fact in a study in 1994, when he was able to prove that ductal carcinomas in situ (early onset of breast cancer of the milk ducts) increased by 200% through the mammogram.

In the article about breast cancer survival rates it does mention improvements in chemotherapies assisting these figures but even then many chemotherapies have been proven unable to cure certain cancers. A person can take a test to determine if a certain chemotherapy will have the effect that the doctor says it will on their cancer (Extreme Drug Resistance Test www.therapysselect.de) but it is often not used and is costly. From this extensive research it has been found many people are resistant to certain chemotherapies' or cocktails of chemotherapies and so receive the therapy with the patient and doctor not knowing if it will have the necessary affect. This test has only been available in the last few years so it begs the question how many people have received chemotherapies that the patient was never going to respond to and how many still do have this therapy because the oncologist does not want to carry out the test or does not know about it.

It is also surprising to find that my native Britain lags behind the rest of Europe in cancer survival rates for lung, breast, colorectal and prostate cancer (Lancet, 1999; 353: 1437-8). It was also suggested that over 25,000 lives could be saved per year if Britain performed as well as the some of the top performing countries.

It also pains me to say that when you consider the trillions of Pounds, Dollars and Euros, often donated by charities, that have been spent on the so called 'War Against Cancer', these improvements don't add up. How many more people have to die before they start to look elsewhere other than in the bottom of a petri dish to establish that disease is a process that is triggered by changes in environmental conditions in a 'live' human being and not something that a single isolated defective cell decides to do with no cause, no reason, no explanation; even a person with a defective gene who suddenly develops a disease after being healthy must have had something happen to trigger that gene to change so it expresses itself.

We think that the basic treatment and philosophies for most disease are the same worldwide. However every country has different approaches to treating disease. As an example a diabetic friend of mine called Tim Harnden found that in the world there are four separate philosophies as to how diabetes comes about and therefore where the focus of research and treatment are. In the UK the belief is that its hereditary and genetic, hence a lot of money is being put into stem cell research, or in other parts of the western world they believe it's caused by a virus. In Israel they are researching

into how the beta islet cells (the ones in the pancreas that produce insulin) communicate with each other, they have found that these cells build tubes that talk with each other and in diabetes these cells are too busy chatting amounts themselves to do what the body wants them to do. Another belief that comes from the east says that it may be down to trace elements being out of balance in the body; if there is too much of one specific element, the insulin molecules clump together in sixes and are ineffective. Four completely different explanations as to what is going on. Undoubtedly all of them could be right however the money goes into what is in vogue at the time in that country, so the whole thing becomes a lottery based on who has the cash, who thinks they might be able to prove something is happening and what drug can be developed from this research; the sales from the drug then pays for the investment in research and what is leftover is profit for the company. I do not think anyone is conspiring to do anything wrong here but the process of development of a wonder cure is not as idealistic as we may think it is.

In the last 50 years we have put a man on the moon, we have built wonderful new structures and buildings and other engineering projects that are astounding. We can do things with technology that were pure science fiction in the 1950s. Quantum Physics has told us that we are not who we think we are, and that matter is just pure energy (find out more by watching 'What the bleep do we know' www.whatthebleep.com) Quantum mechanics has been able to explain some of the world's most incredible phenomena, such as the weather, making faster computer processors, the web. We can blow up the world a thousand times over with nuclear weapons (a direct result from splitting the atom). We are able to see things at a millions times magnification through electron microscopes and through genetics we can determine so much of the imprints that go up to make our biological blue-print of our bodies.

The point I am making is that wonderful things have been happening in science, as it evolves and challenges our current paradigms of thinking, but when it comes to medicine these changes have not been acknowledge or even considered. Take for example the implications of Epigenetics the new science born out of genetic research that is challenging the very philosophies of modern medicine in how many diseases are created.

Epigenetics is a science that finally proves that our DNA is not static but genes can switch on and off therefore expressing different traits based on specific events in our live or changes in our environment.

Professor Wolf Reik, at the Babraham Institute in Cambridge, has spent years studying this hidden ghost world of DNA and Epigenetics. He has found that merely manipulating mice embryos, not changing the DNA in any way, is enough to set off 'switches' that turn genes expression on or off. Willhelm Reik's work has gone further, showing that these switches themselves can be inherited. This means that a shocking 'memory' of an event could be passed down through generations. A simple environmental effect can switch a genes expression on or off – this change has been found to be inherited. As an example a great grandparent who went through a famine, almost dying from the effects of this, passes on an expression of a gene that tells the body to gorge when you can, and store excessive food so you don't starve to death in the future. A grandchild whose parents limit the intake of food for health reasons

could be causing the grandchild's body to trigger this inherited gene's expression and the child ends up becoming clinically obese.

What we are saying is that a shocking memory, that a great grandparent has experienced, is remembered and can be passed intelligently down through the gene pool to a grandchild. If that grandchild environmentally experiences something similar to what the great grandparent experienced, then that triggers off the same learnt pattern; it causes that key specific gene, with the memory stored in it, to alter its expression (not create a new gene or change its coding) but to switch on how that gene behaves in the body.

Therefore something that is totally irrelevant in our modern society, such as starving to death through the lack of food, could be triggered off just by denying that grandchild a meal when growing up; perhaps as a punishment for being naughty. The inherent memory is built into the gene pool; its expression is triggered by environmental factors not at conception but at a later date in the child's life. Other members of the family, with the same gene do not react and therefore do not become obese, others experience the event as traumatic and therefore the great grandparents unconscious memory becomes reality and the child from thereon in, gorges itself on as much food as possible as if there was a famine, ending up with clinical obesity.

The rest of the family who all have the same gene, do not suffer from this obesity. If you think a memory being passed down in this way cannot possibly be true then consider studies carried out in America which are finding Holocaust victims great grandchildren and black Americans whose great grand parents came from the slave trade, are showing this exact gene expression. Whereas other offspring with the same gene pool, in the native countries of these people, even though they have the same gene and the same abundance of food, they do not have the same obesity issues.

This goes a long way to prove that genes and the environment are not mutually exclusive but are inextricably intertwined, the environment affects the gene.

To back this up there have been discoveries that the cell membrane not the DNA is responsible for determining how the DNA switches itself on and off. Cells change their structure and function based on their environment (Lipton & Bensch 1991) Microvessel Endothelial Cell transdifferentiation (BL p72/3)

It has also now categorically proven through Neuropeptide research that the mind and body are connected as one, there have been many research papers concluding this, this means as you think, you affect the whole of your neurology; this forms the basis behind kinesiology. We know so much more about our body and what it is doing than we did in the 1950s.

Then it begs me to ask the question what has happened to the medical fraternity who seemingly have not learnt from these breakthroughs. Instead it is as if they are unknowingly burying their heads in the sand and ignoring what has been going on and around them in the last 50 to 60 years. A simple example of this is that if you give someone a drug that is supposed to solve a complex issue, that drug has been tested using Newtonian physics A follows B follows C follows D follows E instead of Quantum physics where A affects BCDE and B effects ACDE and C affects ABDE

and so on has been totally ignored. Therefore a drug does not only have the effects on a biological system that it is supposed to but many other effects that don't follow the simple Newtonian sequential model. These unpleasant 'side effects' can be explained by Quantum physics but not by Newtonian physics. In this instance the medical fraternity are using science based on a system which is over 200 years old. The literature explaining quantum biology is available but it seems as if they refuse to listen. (Bruce Liptons book *Biology of Belief* covers this whole premise very well).

There are many more examples of this ostrich head burying phenomena, some I will mention later in this book but one of the craziest is that practically every illness, diseases, pain or disorder, the cause is not known. It is true, your doctor and all the medical scientist out in the world don't know what is causing 95% or more of all the diseases people have. Look in any medical dictionary or the web and time and time again you will find 'the cause of this disease is not known'. There are hypothesises as to what may cause a disease but they remain hypothesises and can't be proven categorically. The medical fraternity have no finite models they can follow; it is all guess work as to what is going on inside a person when they have a disease. That is akin to building a house with no foundation, along with no knowledge of the ground on which you are building whatsoever.

We will find out more about this when I explain metastasis, (secondary cancers). It seems the medical fraternity are not really interested in the cause of a disease. Why a lump appears in a breast, why someone gets eczema, why a person suffers horrendously with irritable bowel syndrome, why a cyst appears, what caused any of these issues cannot be explained, so the cause is ignored, in the same way a patient who asks why is their disease there and why now in their life. The doctor cannot tell them because simple they don't know.

It poses a real question that no-one has asked of the medical fraternity. 'How can you claim to cure a disease (and doctors are the only people that can claim to cure someone) if you don't know what caused it to occur in the first place?

Please understand me, I believe the medical fraternity and doctors do a magnificent job and they are fantastic diagnosticians and when it comes to breaking a limb or in an emergency situation for example, then A&E Accident and Emergency or the ER Emergency Rescue is the place to go. Plastic surgery is incredible and many drugs are lifesavers. It is just the flawed way of approaching disease that I believe must change.

When I was young I used to listen with baited breath as the next cure for cancer would be announced, I had an interest spurned on from my mothers death. 30 years on I am still waiting. In fact I have given up. Finding a pill, drug, serum or treatment to stop this disease is not going to happen. We have thrown all the money we can possibly throw at cancer in this way to solve this issue, and we keep throwing more at it but where is the cure? When are all the people who dig their hands in their pockets to support a 'Cure for Cancer charity' going to stop and realise no 'Magic Drug' will ever be developed to 'cure' that disease. This way of looking at the body has not worked so far and I am going to say this approach never will work.

As I mentioned earlier over the last 50 years many therapeutic interventions have remained the same, those cancer research scientist are still looking inside the body for

the wonder drug instead of looking outside at the bigger picture and what has been going on in their own back yard. The attitude of the medical fraternity has not changed, the link between the mind and body has not been acknowledged, DNA is still regarded the culprit for all diseases but the medical fraternity have ignored all the biological breakthroughs since the 1980s that prove that it is the cell membrane that controls the switches of the DNA. That means the environment, what is going outside the cell has a massive impact on how the cell reacts inside.

DNA is dumb, it is like the hard drive of a computer, the CPU (the main chip of the computer) controls how the files are accessed and used. Why then does consciousness still play no part in disease regardless of the undeniable link between neuro-peptides and thought. When it comes to so called 'modern' medicine unfortunately I believe we are living in a bygone age.

So what is META-Medicine® again. I can tell you what it is not first. IT IS **NOT** A THERAPY. However it is a diagnostic system that uses conventional medical diagnosis, along with specifically targeted questions and other observations, to establish the significant stressful event in our environmental, that we believe is the cause of a disease. (Reading a Brain CT is sometimes used for diagnosis in serious cases as well, more about this in Chapter 9).

It is important for me to say that META-Medicine® does not supersede a conventional medical diagnosis either (as I have just mentioned, we use conventional medical diagnosis as well) we also consider complimentary or alternative viewpoints, all of these disciplines will have merit at some level. META-Medicine® works before any therapeutic intervention except emergency life threatening issue which require immediate attention and much of the rehabilitation work caused by accidents. However in this instance, knowledge of META-Medicine® can assist any medical practitioner in how they plan an intervention.

META-Medicine® can however explain why a disease is there, what caused the disease to happen. How long the disease has been there. What the disease cycle will be, where the person is within their disease cycle and what will be the next stage of this and therefore what symptoms to expect. It can predict to a degree the size of a conflict mass or the cell necrosis a person might experience. It also explains allergies, chronic diseases, reoccurring diseases, water retention, epileptic fits, migraines and heart attacks. Plus why we change our personality, our spiritual nature, our reaction to certain stimulus in the environment and why socially we change. Furthermore how long a disease will take to complete its cycle and what may cause a person to possibly die and why: All these things can also be predicted with great accuracy.

In addition metastasis (the development of secondary cancers – therefore a cancer that so say travels through the system and attaches itself to another organ) can finally be correctly explained. The role of microbes, bacteria, virus and fungi also can also be explained in this cycle and why they are not the evil nasty villains of nature that should be eliminated at all cost in order for a person to survive. Additionally psychological disorders such a depression, bulimia, bipolar, acute anxiety and other forms of neurosis and psychosis have an answer.

Really META-Medicine® is a way of turning a disease from a static thing that someone has (sometimes for life) back into a process, whereby simply understanding what the body is doing, a person can complete the process and therefore get back to wellness.

META-Medicine® is also not a cure. I say to every client I meet that I have never cured anyone with META-Medicine® and I never will. (The only person I have ever cured of any ailment is myself). However META-Medicine® is a model of thinking about disease that a lot of recent traditional and medical scientific research is confirming. It uses medical systems to assist it in its diagnosis. It works before any traditional, complimentary or alternative intervention. I also say to people. It is not the be all and end all. There may well be something else out there that could supersede it. Until that time it is a fantastic model that explains so much.

I will guarantee you one thing META-Medicine® will turn your world upside down and inside out when it comes to thinking about disease, pains, ailments, syndromes and psychological issues. However as I say to all my students ‘A person who can hold two totally conflicting ideas in their heads and have them be OK is the sign of a true genius’. META-Medicine® will throw up many questions for you. It will turn your way of thinking about disease on its head. I guarantee you will be sceptical – I was until I tested it and tested it again only to find out it always worked. There are no mistakes in the mind/body and therefore we believe in META-Medicine® that there is no mistake in a disease.

I meet many people who just want an answer to the question of their own disease. They want to know ‘Why me, why now’ and in my quest for understanding my mothers death, I can now say I know what caused her breast cancer, I know what caused it to spread to her lymph glands, her liver , her bones. I know why she died and why then. Personally knowing that has given me a massive mental release and final closure on her tragic death.

People also ask me; ‘If META-Medicine® is so wonderful and can do what you say then why have I not heard of it before now?’ To answer that question I need to explain the history of META-Medicine®, where it originates from and who discovered some of the basic principles that are the backbone of the models. Plus I shall explain more about my beliefs regarding what the medical fraternity has done to stop you from learning this information and why.

The History and future of Meta Medicine

Dirk Hamer the son of a German doctor was holidaying in Naples when he was tragically shot whilst relaxing on a yacht he was chartering with friends. The bullet passed up through his left leg into his body and through into his right lung. He was found in a pool of blood and immediately rushed to the small local hospital, where they removed his leg and one of his lungs.

Dirk Hamer’s father is Dr Geerd Hamer who had designed a knife that could cut through flesh without causing bleeding and with the proceeds from this world-wide

patent he was planning to retire. Like any father after hearing his son had been almost fatally wounded he rushed down to Naples where his son was being cared for and had him immediately flown back to Germany to get expert care and treatment.

Even though Dirk had suffered horrendous injuries Dr Hamer knew that his sons prognosis was good. Many soldiers and other people had recovered from this type of amputation and wounds. Dirk has several other operations and was on the way to recovery when, with his father sitting next to him Dirk sat up leaned forward where his father held him and he died.

Dr Hamer was totally shocked, he expected his son to live and he had not planned in his mind to lose him. After burying his son he became very angry and he tried to get justice with the Italian courts against the person who did the shooting. Also during this time he noticed a small lump on his testicle, knowing this could be testicular cancer he had a second opinion and his doctor recommended he had the testicle removed; ironically with the knife he had developed. This was successfully carried out but having testicular cancer started to get Dr Hamer thinking. For a man who had never had anything medically wrong with him in his life apart from the occasional cold how come he had developed testicular cancer? 'Why me why now' were his thoughts.

He then postulated that there must be a link between the death of his son and his cancer. He found a job working in a gynaecological surgery in Germany. He knew that ovaries have a similar biological makeup to testicles and they come from the same embryological layer. So he started interviewing every woman with ovarian cysts asking them had they had some form of traumatic loss before the onset of the cysts. Without fail every woman had experienced an unexpected, traumatic loss of a loved one, whether it was a child, partner, close friend or a pet, which left them feeling as if they needed to replace that loved person in some way because of their loss.

He wrote a paper to submit to the Germany Medical Journal and before he sent it he asked his colleagues in the practice for their opinion. Each one in turn dismissed his findings apparently saying that he should know better their comments were 'There is no link between emotions and disease'. They also told him that if he submitted the paper he would not be allowed to work in the practice any longer. He did submit the paper, which to this day has never been published and he was sacked from the practice.

Dr Hamer went onto work in other clinics in Germany and Austria, painstakingly carrying out his research with no funding and against the traditional medical fraternities approval. During this time he made further discoveries along with that of the discovery that a significant stressful event that has a biological meaning causes a disease. He noticed that there are two phases of a disease. A disease process can also be seen in the brain, through a brain CT, as well as in the organ. There is a direct link between microbes, fungi, bacteria and virus's and the disease process. Plus each conflict shock shows up in a specific area of the brain based on an elegant system of embryology and the organs of the body react according to the same embryonic makeup (meaning the brain is connected to each organ) and this system explains certain symptoms during a disease process and that each disease has a biological meaningful reaction based on surviving more effectively in our environment.

Over time he has written many books and has taught thousands of people his ideas and ways of carrying out therapy however that is where META-Medicine® and Dr Hamer part company. Over the past 20 years Dr Hamer's passion for his work has caused him a significant amount of anguish. Not only did he lose his son he also lost his beloved wife to cancer. Not being listened to by the medical fraternity and his highly aggressive confrontational manner with the pharmaceutical bodies, the medical fraternity, complimentary and alternative therapy practitioners, has lost him friends but has also made many more enemies. His practice of leaving the disease to take its course is also highly controversial and subsequently has cost him his Medical Doctor licence and landed him in prison several times.

He called his work New Medicine and later on German New Medicine. Before META-Medicine® was created Johannes Fisslinger the president of the International META-Medicine® Association approached Dr Hamer at a conference explaining that with his skills at developing a worldwide business he wanted to make this information known to the world. Dr Hamer agreed but said that he was the only person that would be allowed to train New Medicine; which of course was totally impractical. He also put many other impossible constraints on what he wanted from this type of setup. Subsequently and reluctantly Johannes Fisslinger and Dr Bader (the vice president of International META-Medicine® Association parted company with Dr Hamer and his 'New Medicine' and setup the International META-Medicine® Association with its structured training process, ongoing development of resources, medical research projects and comprehensive public relations. We therefore have nothing to do with Dr Hamer.

I do hope that Dr Hamer is honoured for his work in the future and I mention his story so you know that many of the models behind META-Medicine® come from Dr Hamer however as Dr Anton Bader explained to me personally in early 2007 he said in the last few years since we set up the International META-Medicine® Association we have done more with META-Medicine® than Dr Hamer has done in the last 25 years with New Medicine.

There have been many discoveries that back up the theories as well which is very exciting. The two phases of a disease process we believe can be proven to a great degree and I go into this in more detail later on in this book. The fact that we are inherently linked with our environment as was mentioned in Bruce Liptons Book and Karl Probrams work into the nervous system. So although Dr Hamer has linked all the theories META-Medicine® is making them available to the world through structured trainings, literature and audio visual training packages, whilst integrating all the different therapeutic interventions to healing found in traditional medicine, energetic medicine, alternative and complementary therapy.

There is also a wide gap between META-Medicine®'s application of Dr Hamer's material, notably we call META-Medicine® a diagnostic process and not a therapy. We make no claims to heal anyone. We use medical diagnosis and psychological questioning in a META-Medicine® diagnosis to develop a therapy plan with the client that encompasses their mind through psychological intervention, their body through surgery, drugs (homeopathic or allopathic) and nutrition, their spirit through understanding the reason on a grander scale as to why they created the issue and their

place in the world with regards to the disease plus their overall vitality as a human to deal with a disease. We also look at the social aspects of the issue the person is going through, therefore how the person interacts with other human beings as friends/enemies, family, colleagues or people. Plus how the person interacts in their environment; we look at the where the person lives, where they work, the type of work they are involved in and what changes need to be taken into consideration environmentally so the person does not fire off the same triggers, through associations, that could be causing the disease to reoccur.

One other factor is we focus on the wellness of the person not the disease. Doctors as a whole will often dismiss a person because their disease is too far gone, because they are focussing on just the disease and not the whole person. However this attitude towards people and focus on disease can have the effect of the person shutting down and causing themselves to switch off their reasons to live. One of the exercises we ask cancers patients to do is to write down 100 different reasons as to why they want to live. Some clients find this incredibly difficult others love it. The medical diagnosis of a client who is told they have a specific illness can also cause what is called the Neocebo effect which is opposite of the placebo effect.

As an example of the Nacebo effect in action is one lady who went into hospital with a problem with her bowels (Crohns disease) a chronic form of Irritable Bowel Syndrome, unpleasant but not fatal and something she had been living with for many years. The x-rays she had showed some dark spots in her lymph which the doctors told her 'could' be CANCER, but they were not sure, further tests had to be done. She immediately had a conflict shock which caused a fear of death, which according to META-Medicine® meant she started a voracious emergency programme at a deep survival level in order to fight to save her life. This was a small cell carcinoma; basically a virulent form of lung cancer whose prognosis is she will be dead in 2 months without chemotherapy or 6 months with. She was a spiritual person but all her life she had feared dying of cancer, because her mother had died of cancer and she made a decision that moment that cost her, her life.

The doctors had to tell her that she may have lymph cancer for fear of being sued. From a META-Medicine® point of view a lymphoma of this sort was a minor self devaluation issue which was in the regeneration phase, the second part of the disease programme and therefore was probably resolving itself. She was an skilled alternative practitioner who had recently worked on her in the last few weeks clearing up some deep issues to do with her self esteem; that equates exactly to resolution of a minor self devaluation conflict. This would have caused her lymph to swell as it healed and it would have shown up as looking like a dark spot on an X-ray. If she had not focussed on the word CANCER, she may not have had the diagnosistic shock and maybe, I can only speculate, but she could possibly be alive today.

So the META-Medicine® approach is different, we look at a disease as an opportunity to literally re-programme the whole person, so they can evolve. A beautiful lady who I have had the pleasure of assisting called Jenny Bourne has completely turn her life around since breast cancer. Many people including myself, would say of horrible disease certain teaches you a tremendous amount.

We also know that thinking this way is not a mistake or some fancy new age idea; Epigenetics proves this theory that as we go through a conflict shock we literally switch on or off certain gene programmes therefore causing us to alter our whole make-up and how we interact with the environment as I explained earlier. We are literally changing by learning to adapt more creatively to our surroundings, so we can survive and pass on those lessons to our offspring. As I said any person who has been through a horrific disease will tell you that their issue taught them so much. As a friend and colleague of mine says Christa Uricher, 'Terminal illness is not a death sentence but our approach to dealing with it is'.

In the next chapter we will explore the present approach to healing that is costing us our evolvment and health. We shall look at what happens to a person when they get sick and how we traditionally treat illness by separating the mind from the body. We shall explore the whole notion that disease and especially 'Cancer' is a mistake of the body and what is the survival rate of a person with cancer? (Cancer is from my point of view worth discussing because I believe it to be the ultimate disease programme and therefore understanding cancer allows us to better understand any disease whether chronic or minor.)