

APN- Applied Psycho-Neurobiology: another tool to healing.

APN is one of the most revolutionary, yet non-invasive and elegant healing techniques available today. This unique method was developed by Dietrich Klinghardt, M.D., Ph.D. (In recognition of his work, Dr. Klinghardt received the Physician of the Year award from the Global Foundation of Integrative Medicine in May 2007).

APN utilizes psycho-kinesiology (biofeedback-guided counseling and healing), understanding about color therapy, eye movements (EMDR), energetic taping techniques (MFT), understanding about acupuncture, and unresolved emotions connected to acupuncture meridians.

Applied Psycho-Neurobiology is based on a deep understanding of psycho-neuro-immunology and neurobiology. Through a series of appropriate questions and biofeedback testing, unresolved psycho-emotional conflicts and trauma can be rapidly uncovered and resolution (at the source) is facilitated.

Treatment is usually done with the client comfortably resting on a massage table, with a session lasting 30 to 60 minutes. At the end of the session, the client usually feels a sense of relaxation and a feeling that something important was just resolved. As the weeks progress, there is a noticeable improvement (examples would include: reduction of allergies, detoxification pathways opening and resulting elimination of stored toxins, better relationships, improved sense of well-being, to name a few).

The method is a safe and very efficient way to uncover and resolve long-standing emotional traumas, false negative beliefs and unresolved emotional conflicts.

Below is the full article written by Dr. D. Klinghardt MD
(www.mercola.com/article/applied_pscho_neurobiology/apn.htm)

All events in life are accurately recorded by the subconscious. Whether the location of the recording is the brain or consciousness itself is not relevant for most practical applications. A memory can be complete and resolved or it can be unresolved.

Unresolved memories can belong to one of two distinctly different categories:

1. The memory is always present - to different degrees - disturbing, haunting, relentless and painful. It keeps the person from being present in the moment. These patients are often highly dysfunctional. Post-Traumatic Stress-Disorder belongs into this category. Dr. Klinghardt refers to this condition as "Unresolved Psycho-Emotional Trauma". Significantly traumatic circumstances - usually in late childhood or young adulthood - are the cause of this condition.
2. The memory is suppressed into the subconscious, the patient is not aware of all details of the original event and of the psycho-emotional impact it had and still has. These patients (all of us) are often fairly functional in life but have specific areas of dysfunction.
Both unresolved psycho-emotional traumas and unresolved psycho-emotional conflicts are the most common - or only - cause of illness, chronic pain, accidents, psychological problems, relationship and job-related problems. The neurophysiology involved is fairly simple:
Researchers have demonstrated that unresolved psycho-emotional conflicts create a significant bioelectrical disturbance in conflict-specific areas of the brain. The abnormal signals produce abnormal neuropeptides and abnormal electrical currents that reach the hypothalamus. From here, the signals travel in the autonomic nervous system to distinct target organs, which are - again - conflict specific. Chronic abnormal stimulation of, for example, the sympathetic fibers that reach the liver, creates chronic vasoconstriction, abnormal gating phenomena at the ionic channels of the cell walls and, of course, the presence of abnormal noxious neuropeptides and leads to chronic illness, pain, and other dysfunctions.

Theoretical Background

The nervous system of the conscious mind is the well-known and studied motor and sensory nervous system. The nervous system of the subconscious mind is the autonomic nervous system, the stepchild of modern medicine. The subconscious is in charge of the survival. It can, however, not distinguish between real danger and perceived danger. The memorized snake, that was responsible for an unresolved psycho-emotional conflict many years back, is as scary to the subconscious as a real snake. Therefore the subconscious uses the defense mechanisms (the term coined by Freud) to keep the unresolved psycho-emotional conflict down in the subconscious.

It is the consciousness that will steer the person again and again in the direction of healing the original traumatic event. To

resolve an unresolved psycho-emotional conflict, it has to be remembered by the conscious mind, understood, and the coupled response in the autonomic nervous system has to be disconnected. Dr. Klinghardt calls this process "un-coupling." Applied Psycho-Neurobiology is a practical process of: Having a dialogue with the subconscious mind with the intention to uncover the unresolved psycho-emotional conflict, Understanding the limiting beliefs that were formed as an attempt to resolve the unresolved psycho-emotional conflict and replacing them with freeing beliefs, and Un,coupling (disconnecting) the autonomic nervous system from the unresolved psycho-emotional conflict.

The method that consciousness uses to help the person to deal with an unresolved psycho-emotional conflict is to have the person repeat the same or similar situations until the person deals "successfully with the situation." This may or may not happen. When a therapist helps a patient to identify a repetitive painful theme (such as repetitive financial crises, repetitive failure in relationships), and helps to uncover and resolve the underlying unresolved psycho-emotional conflict, the patient's need to repeat the painful event ceases, the pattern is broken, the patient is free, and their life changes often immediately and significantly. Chronic pain and illness follow the same mechanism.

The Four Steps of Healing

1. Diagnosis

To establish the diagnosis that an illness or chronic condition or psychological problem is caused by an unresolved psycho-emotional conflict or unresolved psycho-emotional trauma, one has to remember several elements: the Autonomic nervous system is the peripheral nervous system of the subconscious mind. If touching an ill part of the body or thinking of a particular life situation causes an autonomic nervous system stress signal, the subconscious is involved in the problem. The subconscious is usually only involved if there is a related unresolved psycho-emotional conflict or unresolved psycho-emotional trauma. Autonomic nervous system stress signals can be detected with bio,feedback equipment or with kinesiological tests.

APN uses changes in the autonomic nervous system innervated muscle spindle as an indicator for the state of the autonomic nervous system. The autonomic nervous system and the test-muscle are our delicate testing instrument. Researchers have shown for over 30 years that whenever an unresolved psycho-emotional conflict is activated by a therapeutic dialogue or procedure, the prefrontal cortex becomes active. Again, muscle testing can be used to confirm activity in the prefrontal cortex. The changes after a successful treatment can be confirmed by a new objective test Heart Rate Variability Testing, which measures the function of the autonomic nervous system.

2. Dialogue with the subconscious

As explained earlier, the subconscious is afraid of the content of the unresolved psycho-emotional conflict and avoids exposure. Whenever in the therapeutic dialogue a question is asked, or a statement is made, that points in the direction of the unresolved psycho-emotional conflict, the subconscious sends a stress signal. By monitoring the signals elicited by the dialogue and steering the questions accordingly, the unresolved psycho-emotional conflict can be uncovered.

The rule of Three:

To uncover an unresolved psycho-emotional conflict, one must find

1. The exact time of the original traumatic event, the age of the person.
2. The circumstances (create an internal picture or short video-clip of the event).
3. The feeling that was not appropriately expressed at the time.
4. Uncovering Limiting Beliefs

Our belief systems are the programming of our bio-computer, from which we create our reality - current, past, and future. If we can exchange a limiting belief with a freeing expanding one, our reality, and therefore our life, changes - always for the better. At the time of traumatic events we are in an altered state, which is the state in which new beliefs are laid down and incorporated in our already existing belief systems.

To change our beliefs, we have to be in that identical state again. This is achieved with the previously mentioned dialogue. Now the limiting beliefs can be an original traumatic event without having heart palpitations, trembling, muscle tension. The need to repeat or perpetuate the painful event is extinguished.

The Unresolved Psycho-Emotional Conflict

For an event to cause an unresolved psycho-emotional conflict, several conditions have to be present:

1. The nervous system is in a vulnerable phase.
2. The person is in a situation where it is not safe to express their feelings. (Example: soldier in combat. He really feels fear but has to act aggressive)
3. An event happens which is perceived as shocking and that interrupts the anticipated normal flow of life (example: the first day of school).

Unfortunately there are very few practitioners who practice this treatment. I use it in my office and there are

probably a few dozen others in the country who use it, but there is no central database of practitioners. Another option from a Christian perspective would be to contact [HYPERLINK](http://www.theophostic.com/)

"<http://www.theophostic.com/>"

Events That Frequently Leave Behind an Unresolved Psycho-Emotional Conflict

The intra-uterine period:

Emotional problems between parents at the time of conception or later during pregnancy

Thoughts of abortion

Attempted abortion

Feelings of older siblings about the ever-increasing loss of attention by the mother

Physiological problems in the womb (mother's smoking, amalgam fillings, alcohol abuse, illnesses, accidents, medical drugs - especially psychopharmacological medications taken by mother, malnutrition)

Being aware of a twin dying ("vanishing twin"), 6-10% of all pregnancies start as twin-pregnancies, less than 2% of pregnancies end with the birth of twins

Birth and the time before, during, and after (drugs, trauma,)

Post-birth trauma: needle pricks to heel, silver nitrate in the eyes, cutting the umbilical cord, circumcision and other invasive procedures often without proper anesthesia.

The early years:

Birth of younger siblings

Emotional climate with parents and older siblings

Weaning the baby (too early, too late, etc . . .)

Not breastfeeding

Traumatic toilet training

Relationship with babysitter

Early sexual abuse Drug use by parents

Physical abuse

Emotional abuse or abandonment

Neglect

Childhood diseases

Illnesses/hospital stays of a parent

Relationship to pets, nature, other kids

Kindergarten

The young years:

First day in school

Relationship to teachers and other students

Moving

Changing school

Academic performance

Athletic performance

Dealing/becoming conscious of physical impairment

The locker room

Relationship with kids of the opposite gender

Social roles

Roles in the family

Abusive parents

Puberty Adolescence:

Academic/athletic performance

First romance

Competition

Peer groups/peer pressure

Fights/injuries

Operations: tonsils, appendix

Dental interventions - placement of amalgam fillings (causes shyness, etc . . .)

Parties/dancing

Ritual abuse, cults, black magic

Sports

Accidents

Divorce of parents

Physical/emotional abuse

First sexual experiences

Abortion

Betrayal/broken trust in first deep, often non-sexual relationship

Disappointments

Depression/thoughts of - or attempted ñ suicide

College/separation from family/friends
First drug experience
Academic pressure
The grown-up years:
They never come
Relationship problems
Separation from a loved one
Broken friendships
Academic failure
Divorce
Death of a loved one
Financial disasters
Financial problems
Failure (job, university, relationship, sports)
Legal problems (jail, convictions)
Illnesses (of oneself or loved ones)
Diagnosis of a serious illness
Loss of energy
Loss of sex drive
Signs of aging

All of these events and circumstances may leave an Unresolved Psycho-Emotional conflict behind or the patient can negotiate them successfully (that simply means the person becomes more mature and stronger because of the way the conflict was negotiated and navigated).

Reading Resources

Family Secrets by John Bradshaw
Love is Hidden Symmetry by Burt Hellinger