

Analiza Minerală Tisulară

<http://www.donotlink.com/tN>

*Studiile efectuate timp de 40 de ani pe sute de mii de cazuri de catre cercetatorii americani Dr. Clivet, Dr. David Watts, **Dr. George Watson (premiul Nobel)**, Dr. Paul Eck, Dr. Wilson, au aratat ca nivelurile mineralelor din firul de par se coreleaza foarte bine cu cele din tesuturile organismului.*

Nu există nici un George Watson câștigător de premiu Nobel:"

http://www.nobelprize.org/nobel_prizes/medicine/laureates/

"De ce metoda de diagnostic moderna ?

*Pentru ca se bazeaza pe o tehnologie de ultima ora, pusa la punct de NASA :
spectrofotometria cu absorbtie atomica."*

Ce este spectroscopia cu absorbtie atomică?

Atomic absorption spectroscopy (AAS) is a spectroanalytical procedure for the quantitative determination of chemical elements employing the absorption of optical radiation (light) by free atoms in the gaseous state. In analytical chemistry the technique is used for determining the concentration of a particular element (the analyte) in a sample to be analyzed. AAS can be used to determine over 70 different elements in solution or directly in solid samples. Atomic absorption spectrometry was first used as an analytical technique, and the underlying principles were established in the second half of the 19th century by [Robert Wilhelm Bunsen](#) and [Gustav Robert Kirchhoff](#), both professors at the [University of Heidelberg](#), Germany. The modern form of AAS was largely developed during the 1950s by a team of Australian Chemists. They were led by Sir Alan Walsh at the [CSIRO](#) (Commonwealth Scientific and Industrial Research Organization), Division of Chemical Physics, in Melbourne, Australia.

Terapie Craniosacrală

<http://www.sciencebasedmedicine.org/index.php/alas-poor-craniosacral/>

It was pulled out of the air by [William Garner Sutherland](#).

*While a student at the American School of Osteopathy in 1899, **Dr. Sutherland pondered the fine details of a separated or "disarticulated" skull.** He*

wondered about the function of this complex architecture. Dr. Still taught that every structure exists because it performs a particular function. While looking at a temporal bone, a flash of inspiration struck Dr. Sutherland: "Beveled like the gills of a fish, indicating respiratory motion for an articular mechanism.

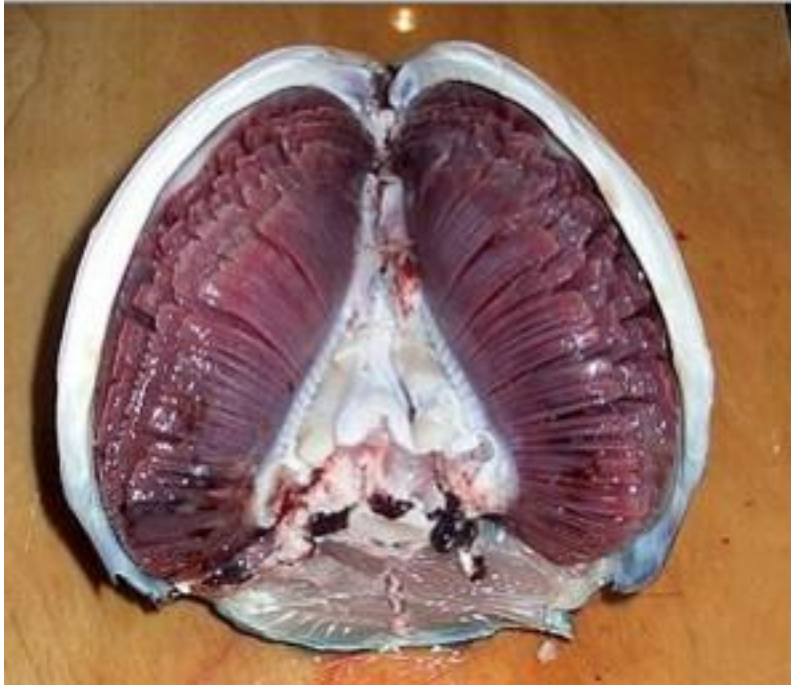
Here is a picture of a [temporal bone](#):



Here is a [cranial suture](#):



And here is a [fish gill](#):



Because the temporal bones are beveled like fish gills (!), the bones of the head are supposed to move relative to each other (!) with respiration (!). That is the insight that lead to CST.

Dr. Sutherlands' insight did not stop there. He synthesized his observations into "The Primary Respiratory Mechanism":

This Primary Respiratory Mechanism has five basic components:

- 1) The inherent rhythmic motion of the brain and spinal cord.*
- 2) The **fluctuation of the cerebrospinal fluid (CSF)** that bathes and nourishes the brain and spinal cord.*
- 3) The shifting tensions of the membranous envelope (dura mater) surrounding the brain and spinal cord. This entire membranous structure acts as a unit and is called a "Reciprocal Tension Membrane."*
- 4) The inherent rhythmic motion of the cranial bones.*
- 5) The involuntary motion of the sacrum (tailbone) between the ilia (hip bones).*

I don't know that means. I read the words, I think about what I understand about anatomy and physiology, I reread the above and I got nothing. A word salad, it appears to be all sound and fury, signifying nothing. Repeat. It is not meant to be fiction.

*To make it more mysterious, or fanciful, **the CSF has tides**:*

- "1) the cranial rhythmic impulse; a more superficial rhythm expressed at an average rate of 8-12 cycles per minute,*
- 2) the mid-tide; a tidal rhythm that carries ordering forces into the body expressed*

at a slower rate of approximately 2.5 cycles per minute and
3) the long tide; a deep and slow rhythmic impulse expressed about once every 100 seconds. The long tide is considered to be the first stirring of life and motion as the Breath of Life emerges from a deeper ground of stillness at the center of our being.”

[..]

I do not think there is a SCAM where the practitioners deny the evidence in their hands. There are videos of CST therapists saying that, unlike what is taught in medical school, the bones of the skull are not fused and articulate. They say this with [Yorick](#) in their hands, a skull evidently never contemplated

[..]

What does a [practitioner do](#) with the insight that the CSF flows incorrectly and the cranial bones are out of wack? **CST**

“involves the practitioner “listening through the hands” to the body’s subtle rhythms and any patterns of inertia or congestion. Through the development of subtle palpatory skills the practitioner can read the story of the body, identify places where issues are held and then follow the natural priorities for healing as directed by the patient’s own physiology.”