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# Quantum Techniques Teleseminar

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**Balancing Hormones Part 3**

Dr. Carolee Johnson



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**Description:**

Recorded Tuesday, February 21st, 2012 In the third and final installment of the hormone teleclinic series, Dr. Carolee Johnson will be talking about how balancing certain hormones can help heal head injuries, and how head trauma affects certain hormone functions. We will find out why woman crave chocolate. This discussion will also include hormones created by the heart, and what effect they have on cancer. Codes will be given to help clear and balance certain hormones.

**Transcript:**

**Dr. Carolee Johnson:**

Good evening, this is Doctor Carolee Johnson. I'd like to thank everyone for tuning in tonight for our third installment of our hormone teleclinic series.

We will be discussing hormone levels and traumatic head injury.

We will also be discussing a few other things like why woman crave chocolate at the onset of their menstrual cycle. And then we will discuss some about hormones from the heart, and how they affect blood pressure and cancer and a few other things.

I live out here on a cattle ranch, and two years ago my sixteen year old son was helping his dad work the livestock in the fall of that year. They were separating the calves from the cows because it was shipping season. And when you are separating the calves from the mothers, some of those mothers get downright mean, and start charging people in order to keep their calf safe.

Well one of these mother cows charged, and my son was working the gate. The cow hit the gate, and my son lost his hold, and went down and was trampled under this cow. He was knocked unconscious and bruised up good, and from that day forward, he never grew even a fraction of an inch. Who would have thought you would need to wear a crash Helmut to work cows? Usually a cowboy hat is good enough.

Over the next two years, my son mention to me that he didn't think he was growing anymore, and it really bothered him because his little sister was catching up to him, and I had noticed it too.

So I started looking into this and realized that if you have a traumatic head injury, it can stunt your growth, because it affects that pituitary gland, and can shut off that growth hormone.

And as we talked about in previous teleclinics in this series on hormones, growth hormone isn't just for growing taller, it does many things, like cell reproduction and protein synthesis to name a few.

Also growth hormone is not the only hormone the pituitary produces. So I want to talk about this tonight, and bring out some of the research that has been done on this subject because it doesn't take much force to jam the cranial sutures around that pituitary gland so that the cranial sacral fluids cannot be pumped through and around the brain.

When you breathe in, it moves the sutures apart, and when you breathe out, then the sutures go back together. This actually pumps the pituitary gland, and allows it to produce the hormones that it does.

So if you are having thyroid issues that don't seem to respond to regular treatments or other hormone issues, it might be time to check and see if pituitary hormones are the real issue.

In this case, with my son, because it was quite a severe head trauma, We had some cranial work done with a particular kind of chiropractor that does some neuro-cranial restructuring. If anyone wants more information on that, they can e mail me at [carolee@quantumtechniques.com](mailto:carolee@quantumtechniques.com)

The information that I am going to go over was originally presented by Dr Mark L Gordon and a handful of other physicians. But it is groundbreaking work.

I am going to put a QT slant on it, and give some codes to help balance the hormones in the brain.

And clear receptor sites for the pituitary and other hormones.

Traumatic brain injury can be caused by a direct impact, or by acceleration alone like shaking a baby.

Brain trauma also causes secondary injury, which takes place in the minutes and days following the injury. These processes include alterations in cerebral blood flow and increased pressure within the skull, contributing substantially to damage from the initial injury.

Dr Gordon says traumatic brain injury can cause a host of physical, cognitive, emotional, and behavioral effects, some of which can be difficult to detect. Symptoms can appear immediately or weeks to years following the injury. With my son, the effects were pretty immediate, and then it took us a while to realize that he wasn't growing any more, and then he also started to show signs of depression following the accident within a year.

Traumatic brain injury can sometimes be difficult to detect. Localized damage to the frontal and occipital lobes occurs when the brain collides with the skull. Increasingly, they are discovering that traumatic brain injury is also a causative factor for accelerated hormonal deficiencies.

These deficiencies, can cause a host of psychological, physiological, and physical manifestations, including depression, outbursts of anger, anxiety, mood swings, memory loss, inability to concentrate, learning disabilities, sleep deprivation, increased risk for heart attacks, strokes, high blood pressure, diabetes, loss of libido, menstrual irregularities, premature

menopause, obesity, loss of lean body mass, muscular weakness, and a number of other medically documented conditions.

What's more, veterans suffering from these forms of psychological damage due to traumatic brain injury, are frequently misdiagnosed and have their injury erroneously downgraded to post-traumatic stress disorder (PTSD).

Moreover, especially in mild traumatic brain injury cases, symptoms at the initial time of injury may go unrecognized or unnoticed, but patients will still develop hormone deficiencies.

So the thing that this is showing us, is that there is a link between traumatic brain injury and hormonal deficiencies.

There was a young man with a history of numerous sports-related head injuries. The young man's symptoms outlasted the immediate effects of his acute injury and included loss of concentration, memory, mental energy, focus, and physical well-being, accompanied by loss of lean muscle mass and an increase in body fat.

The parents of this kid, were familiar with the effects of hormonal imbalances, and assumed that their son's problems might reflect an endocrine problem of his own.

And, many of his symptoms did resemble those of adult patients with so-called hypo-pituitarism, or loss of pituitary gland function. The pituitary gland is located at the base of the brain and is sometimes called the "master" gland of the endocrine system, because it controls the functions of the other hormone-secreting glands.

Although the figures vary between studies, at least 50% (and up to 76%) of traumatic brain injury victims show some loss of pituitary hormone function immediately after the brain injury.

In general, the more severe the original brain injury, the more profound the hormonal deficits, although hormone deficiency or insufficiency are seen even in patients with mild traumatic brain injury.

And while about 58% of patients recover their normal pituitary function within one year of their head injury, 52% develop new pituitary hormone deficiencies after one year.

Those deficits include reductions in many different pituitary hormones, including those that regulate the thyroid gland, the adrenal glands (that produce cortisol, DHEA, and other vital hormones), the gonads (where estrogen and testosterone are produced), and growth hormone.

The severity of the hormone deficiencies correlates strongly with the kinds of symptoms the patient exhibits. For example, patients with growth hormone deficiency or insufficiency had significantly worse disability rating scores, greater rates of depression, worse quality of life, lower energy, greater fatigue, and poorer emotional well-being, compared to brain injury patients with normal hormonal levels.

So patients with traumatic brain injury often have pituitary hormone deficiencies or insufficiencies, especially in growth hormone. And those defects are closely associated with the persistent neurological, psychological, and emotional deficits that are so tragically common in survivors of traumatic brain injury.

Traumatic brain injury afflicts nearly 2 million Americans annually.

Survivors of traumatic brain injury suffer from a broad spectrum of physical, mental, cognitive, and emotional deficits, ranging in severity from mild to crippling.

Conventional medical treatment and rehabilitation often fail to achieve substantial recovery once the acute injury period has passed.

Restoring the balance of deficient hormones to their pre-injury levels has been shown to produce substantial improvements in all facets of traumatic brain injury.

Most people typically think of hormones as the products of the endocrine glands located throughout the body. That's an accurate, but incomplete, view of these powerful biological regulatory molecules.

Virtually all endocrine glands are under the control of the pituitary gland, which is located inside the skull at the base of the brain. Because of its powerful influence on the other endocrine glands, the pituitary is often referred to as the "master gland."

But even the pituitary is subject to a "higher" form of control. A brain structure called the hypothalamus has a direct connection to the pituitary via a unique network of veins.

Regulatory molecules from the hypothalamus "tell" the pituitary how much of its own hormones and hormone releasing factors to produce.

And the hypothalamus, as part of the brain itself, receives constant neurological inputs from all over the body, creating a host of feedback loops. It is those feedback loops that maintain a steady balance between extreme biochemical states.

That connection between the brain's hypothalamus and the endocrine system's pituitary is called neuroendocrine function. And, though it may seem obvious, medical science is only just beginning to recognize that trauma to the brain, even apparently minor trauma, can damage the hypothalamic-pituitary system and have profound effects on hormonal function.

In fact, most people (including the majority of physicians) assume that the neurological deficits that follow a traumatic brain injury result simply from disruption to brain tissue itself.

In this simplistic model, a "hit" to the head causes the brain to be "rattled," triggering bleeding, bruising, and other large-scale injuries that can be seen on MRI and CT scans. And it's quite true that we can predict some of the

deficits a brain-injured person will sustain by the location and severity of the visible damage on those scans.

But victims of traumatic brain injury frequently have sustained neurological deficits that exceed what would be predicted simply by examining brain scans. Unfortunately, people with so-called minor traumatic brain injury, who comprise the largest group of brain-injured patients, have no visible damage at all on brain scans.

It took someone with genuine insight and a fresh approach to recognize that it is disrupted hormonal function, not simply physical "brain damage," that creates the sustained neurological deficits suffered by victims of traumatic brain injury.

Science now has the ability to map the entire brain, and we now know exactly where growth hormone works on mood, and which pathways it uses.

With Quantum Techniques, we can start to balance those pituitary and hypothalamic hormones in order to help reverse some of the damage created with the traumatic head injuries.

There was one case of a woman who had been involved in a "T-bone" car crash – which is usually a notoriously deadly situation in which the victim's vehicle is hit full-force from the side.

The patient was left with multiple neurological deficits. She spoke with a stutter and needed to keep one hand on the wall as she walked in order to maintain her balance. She had substantial memory impairment as well.

After a series of blood tests, work was started to get her hormones back on track that were deficient in this patient's case. She soon showed encouraging progress, with diminished speech and balance impairment.

One day about six months later, Dr Gordon got a phone call from a woman who said, in a perfectly normal voice, 'Hi, this is your patient Nancy. He told her to stop joking and asked who it really was. She said, 'I'm your patient, Nancy, the one with the bad stutter. I woke up this morning, and this is how I was able to speak. I just wanted to let you know.'"

Nancy's case, though dramatic, is actually far from unique.

Since that time, scores of other patients have been helped with hormone balancing , and have experienced similar outcomes.

Traumatic brain injury leaves millions of survivors with substantial impairments in physical, emotional, cognitive, and behavioral consequences each year. Despite high-tech diagnostic and treatment protocols, mainstream medicine has managed to do little to overcome these long-term problems.

The discovery that traumatic brain injury, by damaging the brain's hypothalamus, triggers dysfunction of the pituitary gland, allows us to treat the resulting hormonal deficiencies in traumatic brain injury cases. Restoring hormone levels to their optimal, pre-injury and youthful levels results in remarkable recovery of many of the impaired functions.

From a Quantum Techniques Perspective then the thing that we would want to do in the case of a head injury, or even a suspected head trauma, is to balance the hormones.

There are people who have pressure in their head that may have been a head injury from childhood that they do not really think of that way.

Maybe they fell off their bicycle, or hit the pavement on roller skates or a skate board. There is a really good reason they have protective head gear now days.

Not everyone gets run over by a cow. That's reserved for the few of us who live out in the sticks.

What we would want to do to start the person into a recovery mode from the injury would be to start checking for reversal in the pituitary hormones, and then the secondary pituitary hormones.

And then we would look at the hypothalamus and it's hormones.

So for the pituitary we would check for reversal in:

Growth hormone, and then IGF 1 or insulin like growth factor. And then clear those functional receptor sites.

And I will give a code for that right here.

The code to help clear Growth hormone and IGF-1 is:

SH G50 SH G50 IF LF MF G50 LIV G50 SH TH CH EB OE A C G50 E  
G50 SH IF LF MF G50 UN SH UN

With the pituitary, we would also check Luteinizing hormone along with estrogen and progesterone.

I will give a code for balancing Lutenizing hormone here. There are codes to help balance estrogen and progesterone in the previous teleclinics in this series.

UN SH G50 SH UN G50 SH IF LF E G50 SH MF SH G50 IF LIV CH SH  
G50 SH OE A C 9G SH UN SH UN

I gave codes previously in this series for the thyroid stimulating hormones and T-3 and T-4 but if there is anyone who missed that or does not have that code, here it is again:

The code for TSH, T-3 and T-4 and other thyroid hormones is:

SH, EB, SH, G50, IF, MF, LF, G50, CH, TH, THYMUS, SH, IF, LF, G50,  
IF, LF, MF, G50, OE, A, C, 9G, CHAKRA 1

Since we are talking about hormones, I thought it might be interesting to take a look at why women crave chocolate so much when they get close to their menstrual cycle. I figured that since the craving seems to be simultaneous with the menstrual cycle, it must be hormone related.

I am very guilty of giving into this type of craving, so I thought I would take a closer look at that.

Come to find out, a hormonally imbalanced woman will get a chocolate craving right before her period. Estrogen Dominance (too much estrogen) which we talked about in part one of this series on hormones, creates a magnesium deficiency. Estrogen dominance seems to be epidemic as of late. So it is not surprising that so many women would have this craving in common. Men are not immune to chocolate cravings and hormone imbalances by the way.

Chocolate is one of the foods with the highest magnesium content. Magnesium is needed to keep the muscles relaxed. A magnesium deficiency can cause muscle cramps or tensing, constipation because the intestinal muscles tense, chocolate craving, "charlie horse", leg cramps, uterine cramps, menstrual cramps, and the jumpiness of "restless leg syndrome".

So you will be relieved to know that chocolate cravings around your menstrual cycle is NOT a loss of will power. You don't get rid of a magnesium deficiency by willing it.

You cannot will away a chocolate craving. The craving is caused by a hormone imbalance that causes a magnesium deficiency. So we consume chocolate to try to make up for the magnesium deficiency.

So there you have it ladies and gentlemen. It's real, it's not all in our heads. Chocolate is a necessity of life.

Actually, there are better ways to get magnesium though, and I don't want to disappoint anyone who thought I just told them it was a great idea to go eat chocolate.

You can take magnesium supplements. One of the best ones that I know of is redmond clay. This is a bentonite clay supplement, and you can get it at [redmondclay.com](http://redmondclay.com).

It is very important when taking magnesium supplements to take a magnesium that is easily absorbed. Magnesium oxide is poorly absorbed with an absorption rate of 4%.

It is best to get a chelated magnesium at the health food store that has an absorption rate of 40%. A chelated magnesium is simply a magnesium that has an amino acid wrapped around it. I like to use magnesium glycinate about 400-600 mg/day.

Some of the symptoms of magnesium deficiency are:

- insomnia

- muscle tension or spasms
- muscle cramps
- constipation
- headaches
- menstrual cramps
- heart palpitations
- cold hands and cold feet - Reynaud's Syndrome
- calcification of tissues or joints
- possible microcalcifications in the breast
- possible calcifications in the arteries or heart valves
- nervousness or irritability

Whenever there is a magnesium deficiency, there is muscle tensing or spasm. This is commonly known as a "charlie horse".

The uterus is kind of like a muscular bag. If the uterus tenses up, women label this as menstrual cramps. The uterus simply contracts and tenses up. Your intestines are surrounded by smooth muscle, the intestines tense up and you get constipation.

For nerves to properly conduct there must be adequate levels of magnesium.

If there is a magnesium deficiency, then the nerve will misfire and not conduct the electrical impulse correctly. The heart muscle has a nervous system that allows it to beat regularly when the nerves are working properly.

If there is a magnesium deficiency, then you may get heart palpitations or irregular heart beats.

Even though magnesium is not a hormone, I am going to give a code here with the intention to clear magnesium receptor sites, because magnesium does help to balance hormones.

The code for clearing magnesium receptor sites is:

SH IF SH IF LF MF G50 SH G50 SH UN IF MF LF G50 SH G50 LIV OE A  
C E 9G SH UN SH UN

The discovery of cardiac hormones

It has fairly recently been discovered that the heart is actually an endocrine gland of sorts and secretes certain hormones.

For more than 350 years, scientists and physicians thought the heart was just a pump, delivering blood and oxygen to the body. But in 1981 it was discovered that the heart produces atrial natri-uretic factor (ANF), so-named because it is produced in the atrium of the heart and stimulates the production of urine and the excretion of sodium.

Then it was later discovered that three more hormones are produced from the same gene as ANF.

Those are called: Long acting natriuretic peptide, which also stimulates urine production and sodium excretion.

Vessel dilator which opens the blood vessels and lowers blood pressure

Kaliuretic peptide which increases potassium excretion

The hormones, are called peptide hormones because they are composed of amino acids, and they help regulate blood volume and blood pressure.

Most hormones, including such well-known hormones as insulin, are also peptide hormones.

The discovery of these hormones actually started with research into congestive heart failure.

The researchers wife's died from breast cancer in 2002 -- and as it became clear that the cardiac hormones controlled cell growth -- he decided to place the hormones into cancer cell cultures.

Using colon, ovarian, breast, prostate and pancreatic cancer cells, among others, this guy, I think his name was Vesely found that the hormones kill up to 97% of all cancers in cell cultures within 24 hours.

He then turned to trials with mice, injecting some with pancreatic cancer cells and others with breast cancer cells. Once the mice developed tumors, he treated them with the hormones.

At the end of one month, the treatment had eliminated cancer in 80% of the mice injected with human pancreatic cancer and in 66% of the mice injected with breast cancer. The results with pancreatic cancer were particularly exciting because it is a fast-moving cancer with poor prognosis.

The pancreatic cancers that were not cured were reduced to less than 10% of their original size. Treatment with vessel dilator hormone gave the best results: reducing the tumor to 2% of its largest size. None of the mice died of cancer – they all died of old age – and none of them suffered any side effects.

None of the mice received any other course of treatment such as surgery, chemotherapy or radiation. After the mice died at the end of a normal life span, the researchers found that the cancer had not spread. If the hormones act the same way in humans, cancer could become a chronic condition treatable with these hormones.

Specialists who study heart and kidney function are fascinated by what they have already learned about the hormone. It helps dispose of excess sodium in the blood and so it seems to play a role in regulating the amount of salt in the body.

It appears to act as a counterbalance to other vital hormones in governing blood volume and pressure. It is present in large amounts in the blood of patients who suffer from congestive heart failure and certain kinds of abnormally fast, irregular heartbeats.

In animal experiments even small amounts of the hormone gave powerful aid to the functioning of failing kidneys.

The heart hormone is being studied all over the world now, and many drug companies are hard at work trying to adapt it for use as a drug. There are major companies, working with doctors at hospitals here and abroad, are already testing the hormone in humans.

One of the most fascinating new discoveries concerning the hormone has been the powerful effects that minute amounts can produce.

The astonishing thing about this hormone, that all studies are showing, is that within minutes of its secretion by the heart it reduces the blood volume. The effect of this reduction in circulating blood is to reduce sharply the workload on the heart.

Several related actions seem to bring about the reduction in volume.

Fluid leaks selectively from the capillaries into the tissues.

Blood vessels seem to relax and blood pressure falls. The kidneys begin to filter the blood at an accelerated rate and to release more salt into the urine. Salt acts to maintain proper blood volume, but in some people an excess can increase both volume and pressure.

Because the field of study is so new, scientists differ over the hormone's precise effects, over what triggers its release and over the central issue of what its normal functions may be in the human body. They note that the hormone is just one newfound substance in a complex system of blood regulation involving many hormones and enzymes.

In an inactive form, the hormone is apparently stored in granules in the tissues of the atria. The existence of these granules has long been known, and 20 years ago, Dr. George Palade, Nobel-prize-winning scientist at Yale, noted that their appearance suggested they might contain a hormone.

It took a lot of years to find it. In its active form, the hormone, which circulates throughout the body, is a relatively small chain of 28 amino acids chopped from a much larger molecule by an enzyme.

Chains of amino acids are called peptides. Consequently the hormone is known as an atrial peptide, but different scientific teams that have been pioneers in studying it have given the hormone a variety of different names..

Recent studies indicate that the hormone circulates continuously in the body in minute amounts and is released in larger quantity when excess salt is taken in or when circulating blood volume increases sharply. Although it was first found in the atria, new studies show that the heart's main pumping chambers, the ventricles, are also capable of making it.

Special receptors with which the hormone interacts have been found in cells of the blood vessels, kidney and adrenal glands. Scientists speculate that the atrial hormone represents a system that acts in complement to other hormones to maintain proper blood pressure and volume.

The atrial hormone has also been found in the brain in aggregations of nerve cells that are known to be important in regulating blood pressure and blood volume.

I am going to give a code here to help clear functional healthy heart hormone factors:

That code is :

UN SH UN G50 SH IF SH G50 SH IF OE A C G50 SH IF LF MF SH UN  
SH G50 IF MF LF 9G UN SH UN CHAKRA PATTERN 1

Another gland that secretes hormones is the pineal gland.

The pineal gland, no larger than a grain of wheat, and is, I think the most mysterious endocrine gland of all. In 1628 the famous French philosopher Descartes called the pineal gland, "The seat of the soul."

Because of its inaccessible location, deep within the center of the skull and attached by a stalk to the posterior wall of the third ventricle of the brain, the pineal gland hasn't been studied as exhaustively as the other glands.

The gland will sometimes shrink and then fill up with specific types of mineral salts that are referred to as "brain sand." The condition has been traced directly to poor nutrition. When this condition exists in the pineal gland, thinking and sexual processes are affected.

The pineal gland will respond quickly to proper nutrition even after being "starved" and degeneration has begun. The pineal contains more lecithin than any other body part.

The pineal isn't an actual gland; it's a neuroendocrine transducer: meaning it converts incoming nerve impulses into outgoing hormones. Most glands are triggered by changes in the body or hormones secreted by other glands.

The pineal gland releases hormones in response to bioelectrical messages from the outside environment received through the eyes. The optic nerve sends information to the visual portion of the brain through nerve fibers.

The impulses from the brain are carried to the superior cervical ganglia (a cluster of nerve cells) in the upper part of the neck by smaller nerve fibers.

From there the autonomic nervous system relays the information to the pineal.

In low light, or darkness, the pineal gland secretes the hormone melatonin. Melatonin has been connected to many body functions. Before the early 90's there was just about no information on melatonin, even in medical dictionaries.

Excesses of melatonin have been connected with alcoholism.

Aging accelerates calcification of the pineal and calcification is connected with higher cancer rates. People who eat less sugar, less highly processed foods and spend more time outdoors, exhibit a lower incidence of calcification. Mostly because sunlight creates another hormone called vitamin D which I am going to talk about in a minute.

Melatonin production increases after dark. In the morning when sunlight hits the retina, production of the hormone slows. Light meals in the evening help improve sleep and maximize melatonin's anti-aging effects.

Keeping a regular schedule and eating at set times increases hormone production.

If we exercise or participate in any strenuous activity at night, we delay melatonin output. Stimulants and caffeine at any time of the day, but especially at night, slow or stop melatonin production.

Ok so if you want to stay young looking, then you eat light at your evening meal, exercise in the morning, and cut out the stimulants such as coffee and chocolate, or I guess now days that would also include any caffeinated beverage including soda, and energy drinks.

And then clear any reversal or blocks in HGH hormone, DHEA hormone, Melatonin hormone and then get plenty of vitamin and minerals and stay hydrated with plenty of clean water.

That is the beauty of Quantum Techniques. It gives you a set of tools that does something no other method of healing does.

Human growth hormone (HGH), dehydroepiandrosterone (DHEA) and melatonin are all free radical scavenging, antioxidant and anti-aging hormones.

Melatonin may be the most efficient of the free radical scavengers, especially for anti-aging, since it has the ability to permeate any cell in any part of the body. Within the cells, melatonin provides protection for the nucleus, the central structure containing the DNA.

Protection of the central structure allows a damaged cell to repair itself. If a cell can't repair itself, it can mutate and turn into a cancer cell. The enzyme glutathione is stimulated by melatonin.

Glutathione is a tripeptide containing the amino acids glutamic acid, cysteine and glycine. glutathione functions in several oxidation-reducing capacities,

meaning it's an antioxidant. Research during the 30's and 40's showed it to be necessary for delivery of calcium to the brain cells.

Research studies on 44 mentally retarded children using supplemental glutamic acid, raised their test scores from an average of 69 to 87 (almost normal).

One of the test subjects, a 17-year-old boy, scored 107 (average/normal) on his first test and after 6 months of treatment with glutamic acid scored 120 (superior intelligence, just below genius).

Organs and other body parts take their share of glutamic acid before the brain receives any. A nutritionally deficient diet has low or nonexistent amounts of this necessary amino acid.

When added to the diets of hyperactive children, and others with behavior problems, glutamic acid was able to obtain the same calming effects as the chemicals so often prescribed and without side effects.

Glutathione has shown to be highly beneficial in removing lead from the body. Lack of glutathione contributes to chronic fatigue.

Glutamic acid can be found in almost all protein rich foods, natural cheddar cheese, (not cheese substitutes or highly refined and processed cheeses), eggs, lean meats, peanuts, whole grains, soybeans, legumes, peas and beans.

So, balance out your mental powers, get some sleep and slow the aging processes by "naturally" caring for your pineal gland.

The code for balancing the pineal gland is:

EB IF SH G50 IF G50 SH G50 CH TH MF LF E A C 9G UN SH UN

The code for clearing and balancing melatonin is:

E EB G50 SH IF G50 SH E EB IF OE A C E G50 SH IF LF MF G50 SH IF  
SH OE G50 SH UN UN CHAKRA 2

The next hormone I want to discuss is Vitamin D which is a family of related compounds with hormone-like activity.

Ocean plankton, most plants and most animals exposed to sunlight make vitamin D. Vitamin D is critical for the development, growth, and maintenance of a healthy skeleton from birth until death. Vitamin D-activity promotes the absorption and deposition of calcium in bones.

Sunlight Protects Against Cancer by Stimulating the Production of Vitamin D

New research confirms that if you want to slash your risk of cancer, it's essential that you spend adequate time in the sun or a safe tanning bed, or at the very least supplement with proper amounts of vitamin D3.

Specifically, researchers found that, consistently, the higher the solar UVB, the lower the incidence of 15 different types of cancer, including:

Bladder, Esophageal, Rectal, Breast, Gastric, Renal, Cervical, Lung, Vulvar, Colon, Ovarian, Hodgkin's lymphoma, Endometrial, Pancreatic, and Non-Hodgkin's lymphoma.

The review, based largely on three studies from the United States, one each from Australia, China, France, Japan, and Spain, and eight multi-country studies of cancer incidence rates that collectively examined more than 100 countries, concluded:

"The evidence for the UVB-vitamin D-cancer hypothesis is very strong in general and for many types of cancer in particular."

Further, they noted that weaker evidence exists that solar UVB also leads to lower rates of cancer of the following types:

Brain, Oral/pharyngeal, Leukemia, Gallbladder, Prostate, Melanoma, Laryngeal, Thyroid, Multiple myeloma.

Theories linking vitamin D to certain cancers have been tested and confirmed in more than 200 epidemiological studies, and understanding of its physiological basis stems from more than 2,500 laboratory studies, according to epidemiologist Cedric Garland, DrPH, professor of family and preventive medicine at the UC San Diego School of Medicine. Here are just a few highlights into some of the most noteworthy findings:

Some 600,000 cases of breast and colorectal cancers could be prevented each year if vitamin D levels among populations worldwide were increased, according to previous research by Dr. Garland and colleagues. And that's just counting the death toll for two types of cancer.

Optimizing your vitamin D levels could help you to prevent at least 16 different types of cancer including pancreatic, lung, ovarian, prostate, and skin cancers.

A large-scale, randomized, placebo-controlled study on vitamin D and cancer showed that vitamin D can cut overall cancer risk by as much as 60 percent. This was such groundbreaking news that the Canadian Cancer Society has actually begun endorsing the vitamin as a cancer-prevention therapy.

Light-skinned women who had high amounts of long-term sun exposure had half the risk of developing advanced breast cancer (cancer that spreads beyond your breast) as women with lower amounts of regular sun exposure, according to a study in the American Journal of Epidemiology.

A study by Dr. William Grant, Ph.D., internationally recognized research scientist and vitamin D expert, found that about 30 percent of cancer deaths -- which amounts to 2 million worldwide and 200,000 in the United States -- could be prevented each year with higher levels of vitamin D.

On a personal level, you can decrease your risk of cancer by MORE THAN HALF simply by optimizing your vitamin D levels with sun exposure. And if

you are being treated for cancer it is likely that higher blood levels—probably around 70-100 ng/ml—would be beneficial. Vitamin D's protective effect against cancer appears to work in multiple ways, including:

Increasing the self-destruction of mutated cells (which, if allowed to replicate, could lead to cancer)

Reducing the spread and reproduction of cancer cells

Causing cells to become differentiated (cancer cells often lack differentiation)

Reducing the growth of new blood vessels from pre-existing ones, which is a step in the transition of dormant tumors turning cancerous

Many Americans simply are not getting enough vitamin D to even maintain healthy bones, much less getting enough to fight off diseases like cancer. There are two primary reasons for this, one being that many people are still worried that going out in the sun will lead to skin cancer. It's important to understand, however, that the risk of skin cancer from the sun comes only from excessive exposure. And then I would have to even wonder if there is such a thing as too much sun exposure. If you consider the Native American people from before this country was a country, running around in nothing but a loin cloth all summer.

But what we do know from studies, is when used properly, sunlight exposure will help you prevent cancer.

To optimize your levels, you need to expose large portions of your skin to the appropriate amounts of sunlight. And, contrary to popular belief, the best time to be in the sun for vitamin D production is actually as near to solar noon as possible. During this time you need the shortest exposure time to produce vitamin D because UVB rays are most intense at this time. Plus, when the sun goes down toward the horizon, the UVB is filtered out much more than the dangerous UVA.

Just be cautious about the length of your exposure. You only need enough exposure to have your skin turn the lightest shade of pink. Once you reach this point your body will not make any additional vitamin D due to its self-regulating mechanism. Any additional exposure will only cause harm and damage to your skin. When I say damage, I mean it toughens your skin, and you start looking leathery.

Vitamin D from sun exposure or a safe tanning bed is the BEST way to optimize your vitamin D levels. Safe tanning beds have electronic ballasts rather than magnetic ballasts, which helps you avoid unnecessary exposure to health-harming EMF fields. They also have less of the dangerous UVA than sunlight, while unsafe ones have more UVA than sunlight. The second primary reason so many are vitamin-D-deficient, aside from lack of sun exposure, has to do with misinformation about supplementation

First, let me repeat that sun exposure or the use of a safe tanning bed are the best options to optimize your vitamin D levels. You cannot overdose when getting your vitamin D from sun exposure, as your body has the ability

to self-regulate and only make what it needs. If these options are not available, a supplement can be used, but keep the following in mind:

According to the most recent findings by Carole Baggerly, founder of GrassrootsHealth, her research of nearly 10,000 people shows the ideal adult dose appears to be 8,000 IU's a day to get most into the healthy range.

When you do supplement with vitamin D, you'll only want to supplement with natural vitamin D3 (cholecalciferol). Do NOT use the synthetic and highly inferior vitamin D2, which is the one most doctors will give you in a prescription most of the time unless you ask specifically for D3.

As an aside, there is evidence that the safety of vitamin D is dependent on vitamin K, and that vitamin D toxicity (although very rare with the D3 form) is actually aggravated by vitamin K2 deficiency. So if you take oral vitamin D, ideally you should take vitamin K2 as well or use organic fermented foods that are high in vitamin K2, as you need about 150 mcg per day.

The "normal" 25-hydroxyvitamin D lab range is between 20-56 ng/ml. But, this conventional range is really a sign of deficiency, and is too broad to be ideal. In fact, your vitamin D level should not be below 32 ng/ml, and any levels below 20 ng/ml are considered serious deficiency states, increasing your risk of cancer and autoimmune diseases like multiple sclerosis and rheumatoid arthritis, just to name a few.

Code for balancing functional vitamin D hormone factors:

SH G50 SH IF E EB LIV G50 CH TH SH LF G50 OE G50 SH IF E IF LF  
MF E A C 9g UN SH UN

That is all the information I have for this evening, I would like to thank everyone for joining me for this teleclinic tonight, I hope you enjoyed the whole series.

If you missed any part of this teleclinic series on hormones, the first two segments are available at [www.quantumtechniques.com](http://www.quantumtechniques.com)

Have a great evening everyone.