

FYI: Want better mileage? Try losing weight.

# KIMA

The Journal of  
The King Institute Method® Association  
A Publication of the King Institute, Inc.

Issue 10

# TKM® IN THE PHILIPPINES



Update: More Questionable FDA Approvals  
KIMA to Get Revamped in 2007

Gifts Fit for a King: A Closer Look at the Health Benefits of Frankincense and Myrrh

Extraordinary Alternative Medicine for Extraordinary Results

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10, December 2006

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*Cover photo:*

*Sunken Cemetery*

*Camiguin Island, Philippines*

# KIMA

The Journal of The King Institute  
Method® Association

### Staff

Glenn King  
Director

Christine Dao  
Editor

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### Contact us:

KIMA Membership  
PO Box 118495  
Carrollton, TX 75011  
[www.kinginstitute.org](http://www.kinginstitute.org)  
1-800-640-7998  
E-mail: [info@kinginstitute.org](mailto:info@kinginstitute.org)  
Editor: [cdao@kinginstitute.org](mailto:cdao@kinginstitute.org)

# Our Mission Statement

“Dedicated to serve as Ambassadors bringing Restoration, Healing, Truth, and the Love of Christ to the World, giving all the Glory to God.”

## Notes from the Director

Our organization is about to make the largest single change, which will make a great impact in many areas, that it has ever embarked on. Classes! All TKM® classes have been based on a particular TKM® book. As books were updated and new editions published, the classes remained typically the same. This is not true concerning the new TKM Textbook! This new Textbook changes classes, presentations and other aspects that basically result in new training according to the new four-volume book as a study manual.

The old TKM Textbook and Textbook Level classes (Levels 1 to 6) are gone forever! The new TKM Textbook chapters and page references have been changed. There are changes in some sequences, additional new sequences, new diagrams, new charts, all new illustrations and more thorough explanations on everything. There are additional pages for symptom references, which include other suggested applications to help each symptom. The information on almost every page is different. This will be a great and much easier learning experience for new students.

This means that a review student would not be able to bring their old Textbook to a class and follow the teaching. The teaching will either not coordinate with the old book or would not exist in it. The information in the old Textbook is not obsolete for private use and study. But it is now obsolete and not valid for any current TKM classes (Levels 1 through 7). You will need the new Textbook to attend any Level 1 through 7 classes from this point forward.

This is a very good change! There will be an adjustment for current students due to relearning associations and references from the previous classes, plus trying to transfer your old notes into the new books. But I think you will find the new books refreshingly user-friendly in sequences, illustration descriptions and references.

We will honor students who have attended previous TKM Textbook Levels (old book and classes) to attend the new classes in 2007 at review (discounted) tuitions. I have thought and consulted with others on an extended benefit (discounts) for those who will not attend in 2007 and it presents too many issues. Therefore, in 2008 the grace period will end and anyone who hasn't taken a new Textbook class, regardless of previous training, will be considered a new student.

The necessity for all students to have the new Textbook is why a pre-sale discount was offered.

After this, only Volume 1 will be available for purchase by anyone, without attending the correlating class level. In 2007, review students not attending one of the three classes above will need to purchase the appropriate volume at full price and only that volume. For example, a review student (discounted tuition) attending level 1 and 2 combination class will need to purchase volume 1 and 2 but cannot purchase volumes 3 or 4 until they attend that the Level 3 and Level 4 classes.

The appropriate volume will be included in the full tuition for new students, just as previous classes. The difference is that they can receive the correlated volume only and will not be able to purchase unrelated volumes.

**IMPORTANT NOTE:** Starting Feb. 1, 2007, tuition discounts (collectively) shall not lower tuition below the full deposit of a class. The minimum tuition for any class will be the full deposit amount, which is 50 percent of the full tuition. For instance, if Level 1 is \$450 and the deposit is \$225, then early registration, review discount and class coupons collectively can only bring the total tuition as low as \$225. Attending spouses remain at a 50 percent discount, but not below. If you have any questions about further details on tuition or the new Textbook, please call 800-640-7998 or e-mail [info@kinginstitute.org](mailto:info@kinginstitute.org)

Glenn King, Director



# Editor's Corner

## 2007: The End of the Journal?

Christmas greetings and salutations! The King Institute, Inc. is keeping Christ in Christmas, and we wish you and your loved ones a very Merry Christmas!

As many of you know, the King Institute, Inc. is a nonprofit organization, meaning we are designed to run on financial contributions from sponsors like you.

The King Institute Method Association, or KIMA, was created specifically for the purpose of funding the efforts and projects of the Institute by receiving contributions of \$75 or more annually. And among the benefits for members is the KIMA Journal as well as the coupons for materials and discounts for classes.

However, since KIMA's inception, membership has steadily gone down, and annual contributions are barely covering the costs of printing, binding and mailing out just **ONE** issue of the Journal to all the members. The other three issues are not being covered by the membership fee due to low membership.

I've heard from a few that they didn't believe that the Journal was worth \$75 a year to purchase and therefore didn't renew their memberships for this third year.

**However, what they don't realize is that the Journal is a benefit, not a product.**

We did the math a few years ago and figured that if at least 1,500 people from our database contributed \$75 annually, the Institute would have the basic funds to pay for its operation costs, missions, as well as invest into new projects, such as the new Textbook, the Energy Sphere DVD and many more.

However, in that first year, only about 200 contributed to our cause. But still, we wanted to give the benefits of the Journal and the discounts that came with the membership. In the second year, when I was able to officially come onboard as KIMAJ Editor, membership topped out at around 150. And this year, less than 100 renewed in time to receive Issue 9 with the cover story "How much can we trust something that is FDA Approved?"

**In this downward trend, the Journal has proven too costly a project for the Institute. And because of that, we most likely will not see Journal Issues 13 through 16.**

KIMA was originally made so that we can count on the financial support of members so that we can continue to do our work to help people.

So in September 2007, KIMA will be undergoing a face lift, which you can read more about in this Issue. We want your feedback, so please contact us and tell us what you think by filling out your comments on the inserted Feedback Card and mail it back in the self-addressed envelope. All it will take is your opinion and a moment of your time. Depending on your response, if it doesn't seem like a viable solution, then chances are we will have to dissolve the association all together. This by all means won't mean the end of the Institute. But it does mean that we won't be able to do many of the outreach and fund future projects and books that we've (and you've) been wanting to see manifest for so long.

We thank you so much for your contributions, your readership and your prayers. We need many more people like you! Hopefully, we'll be able to keep going next year as well.

Christine Dao, Editor



## More Questionable FDA Approvals

**By Christine Dao**

In the last Journal issue, Issue 9, we looked at how changes in the approval policy of the Food and Drug Administration incidentally coincided with many problems we're finding in FDA approved items, namely prescription drugs.

Before the FDA Modernization Act of 1997, formulas could spend years in review and clinical trials before even coming to the agency for approval. But in the early 90s, the AIDS epidemic prompted the dramatic increase in demand for new prescription and experimental drugs. Then-President Bill Clinton signed the Modernization Act in an effort to streamline the regulation of process and accelerate the review and approval of new medications.

Since then, drug approval times have dropped from an average of three years to one. Critics believed that the accelerated reviews and approvals would cause side effects to be overlooked. And with the detrimental track records of prescription drugs such as Vioxx®, it's no wonder we're seeing the FDA suddenly banning and pulling drugs off the market, the same drugs that it had to approve to put there in the beginning.

Since the printing of the Issue 9, we've watched the wires for any other FDA approv-

als that might raise red flags. Sure enough, for the first time, the agency approved viruses as food additives to combat harmful bacteria in food, an issue we touched on in the October edition of the Health News Updates.

The viruses, also called bacteriophages literally meaning “bacteria-eaters,” were first introduced to the FDA in 2002. Since bacteria build resistance to antibiotics at rapid rates, Baltimore-based Intralytix Inc. sought to develop a viral cocktail that could combat these microscopic bugs. The viruses could be sprayed on food, such as cold cut lunch meats, to kill bacteria. The FDA approved in August bacteriophages designed to combat listeria.

Supporters say that critics don't have anything to worry about, since bacteriophages are found in everything, including the human body. And the viruses are grown in a preparation of the very bacteria they are designed to kill and then purified.

Even consumer advocacy groups are supporting the phages, saying that the FDA is applying some of its toughest food-safety standards and that it wouldn't approve of something that it didn't feel was safe.

But if that's how the agency feels, then a major red flag flies at the fact that consumers won't know what foods have been sprayed

with the viruses. The phages will be added to ready-to-eat meats prior to packaging. The Department of Agriculture will regulate the use of the product.

Not long after the viruses made their debut, the FDA also approved of over-the-counter access to Plan B for women 18 and older. Known generically as Levonorgestrel, Plan B is a medication taken orally by women to prevent pregnancy after birth control failure, such as a broken condom or unprotected sex. Its side effects include nausea/vomiting, abdominal pain, tiredness, dizziness, changes in vaginal bleeding, breast tenderness, diarrhea or headache.

Plan B's precautions state, "Before using this medication, tell

your doctor or pharmacist if you are allergic to it; or to other progestins (e.g., norethindrone); or if you have any other allergies.” But if it’s available OTC, then who’s to stop someone from taking it if she doesn’t know if she’s allergic to it or not? It’s bad enough when medical doctors prescribe drugs that they don’t fully understand and their patients suffer from the side-effects (i.e. Vioxx).

In October, the FDA approved another drug from Merck and Co., makers of Vioxx, called Januvia for treatment for diabetes. Remember that the Modernization Act “streamlined” prescription drug approval times, dropping the average approval time from three years to just one. According to the FDA, “Januvia was examined in a total of 2,719 patients with type 2 diabetes, **in studies lasting from 12 weeks to more than a year.**”

And in November, the agency approved the marketing of silicone gel-filled breast implants “after in-depth evaluation.” The FDA’s decision was based on four years of evaluating women in clinical studies as well as review of the implants’ manufacturers, Allergan Corp. (formerly Inamed Corp.) in Irvine, Calif., and Mentor Corp. in Santa Barbara, Calif. The announcement from the agency stated, “Some of the complications reported in the core studies included hardening of the area around the implant, breast pain, change in nipple sensation, implant rupture and the need for additional surgery. However, the majority of the women in these studies reported being satisfied with their implants” (Note that breast cancer, the worse symptom, was not among the listed risks).

The agency is going to require 10 years of patient follow-up to test the implants long-term effects. The question rises as to why the FDA decided to approve the marketing of these devices before the 10 years of follow-up evaluation.

So how much can we trust something that is FDA approved? It would be interesting to note that the Rhus Tea available through the King Institute, Inc. is not FDA approved. And yet after just a few years, we're still hearing amazing stories and testimonies about its effectiveness in protocols against cancer, diabetes and overall body detoxification projects.

But don't take our word for it. Take ownership of your health, do the homework and find out what works best for you. After all, the only things that really end up in your body are "YOU Approved." 🍌



*Illustration by Christine Dao*

fyj good info to know!

## Weight loss can mean better gas mileage

As many Americans load up their plates for the holidays, some may want to keep in mind the consequences to their fuel tanks as well as their waistlines.

A new study says that people are burning more than 1 billion more gallons of gasoline each year than in 1960 because of weight gain. In short, more weight means lower gas mileage.

Experts say that while the calculations aren't exact, the study makes sense. It's the same concept for airplanes, and research from the Centers for Disease Control and Prevention found that heavier fliers have contributed to higher fuel costs for airlines.

The loss in mileage seems pretty small for a single driver. For the typical driver, who records less than 12,000 miles a year, could use about 18 fewer gallons of gas during the year by losing 100 pounds. At the national average of about \$2.20 a gallon, that's a savings of about \$40.

But put that figure across for all drivers, and the numbers are significant. Plus, there's the environmental benefit that cannot be measured in monetary values.

And for some drivers, it may not mean losing weight from their bodies. Literally cleaning out "junk in the trunk" can help.

## Attention All Current Members of the US Armed Forces

**Extraordinary Alternative (Natural) Medicine for Extraordinary Results**

The King Institute presents

**TKM®: Emergency Integrative Medicine Techniques**

**This is vital life saving information designed to fit into your field manual, provided free of charge to all active military personnel.**

All you need is to visit  
[www.kinginstitute.org/military.php](http://www.kinginstitute.org/military.php)  
 and print out the PDF file of your respective branch (USMC, Army, National Guard, Navy, Air Force, Coast Guard, and all other active branches). It fits right in your field manual!

## Pulse Puzzle

Pulse puzzle is a regular part of each *KIMA Journal* issue for graduates of Level II and above to help learn more about pulses. The following are some abbreviated examples used in the pulse puzzles, similar to demonstrations in class.

S = Silent

L = Loud

W = very weak pulse

R = Rapid

The numbers (1st -5th) represent the stratum texture.

FWT = Fluff with Tone. There can be combinations such as: W/FWT.

The study example is below and the observation and suggestions are on **page 11**.

R, L5th	Lg. Int.	Sm. Int.	R, L5th
R, L5 th	Lung	Heart	W
L 1st	ST	GB	3rd
S	SP	LV	S
W 1st	DIA	BL	S
W 1st	UMB	KD	S

Think of common denominators and processes of elimination to determine options before viewing the suggestions.

## Special Sequence for the Energy Sphere number (13b)

**\*New sequence from the new TKM Textbook!\***

This diagram illustrates one sequence that accomplishes both left and right revitalization. Refer to (figure A-13b).

**LEFT and RIGHT Sequence**, sit on the **Right side** of their body.

Procedures For Hands	(to)	Positions On Body E.S.'s
step 1 right	to	13 (center)
and left	to	between T-4 and T-5 (center)
step 2 left	to	between T1 and T2 (center)
step 3 right	to	right high-19 (front and back side)
step 4 right	to	left high-19 (front and back side)
step 5 right	to	sternum bottom (tip of xiphoid process)
step 6 right	to	right fingers (index and little- same time)
step 7 right	to	left fingers (index and little- same time)
step 8 right	to	pubic bone (center)
step 9 left	to	between T6 and T7 (center)
step 10 left	to	between T11 and T12 (center)

Note: Thoracic Vertebrae = TV or T

*Place the fingers to the back side and thumb to the front side simultaneously.*

**Important:** This special sequence balances the body's electromagnetic energy and can be applied for any condition. It has a powerful effect on mental/emotional stability.

The stratum color is **White** and the energy sphere color relation is **Greenish blue**.

The tone or musical note correlation is **G natural**.

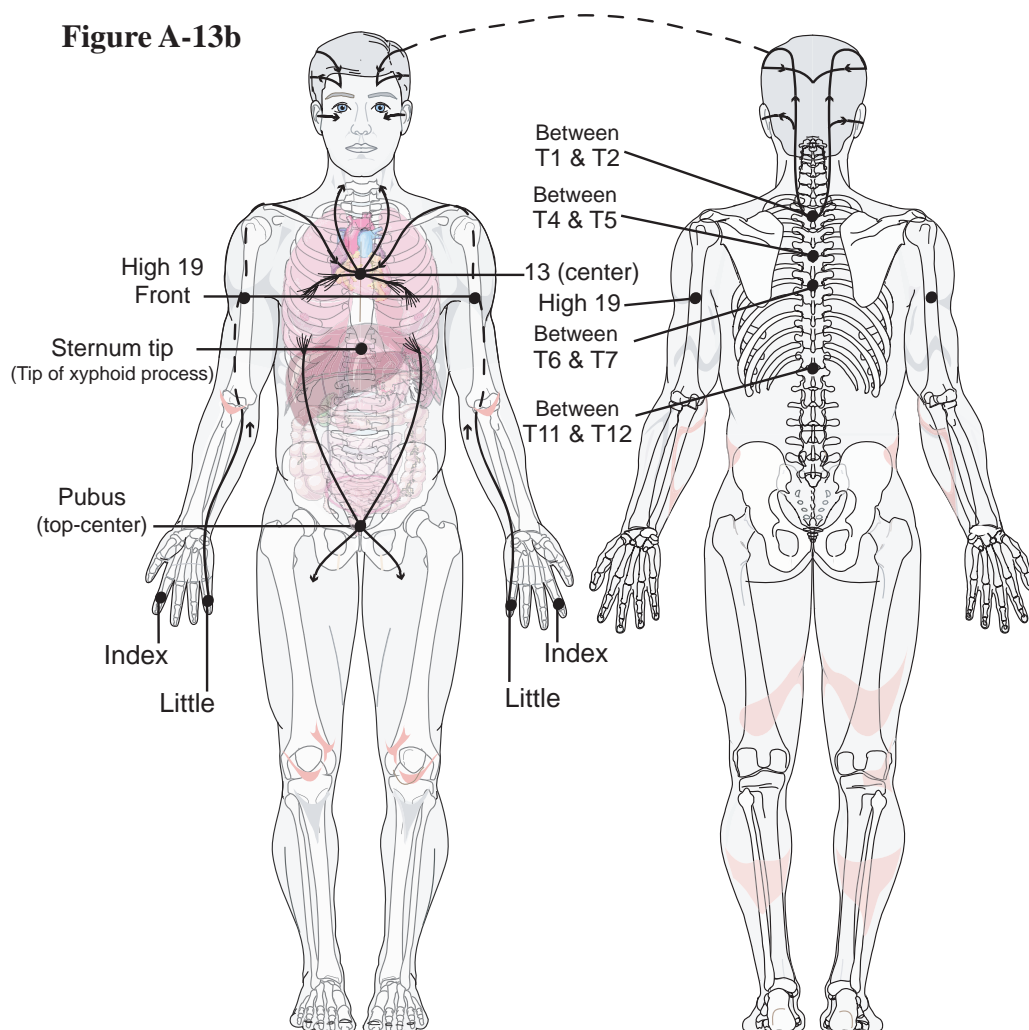
The emotion is **Sadness/Grief** (or possessive perspective).

The energy sphere is **Descend-ing energy**.

The finger or digit related is **Middle**.

The energy sphere number (13b) is vital for the proper functioning of the **Dermis** (deep skin), **Lung energy** and **Large Intestine energy**. Named the "fertility specialist." It helps to regain and maintain youthfulness, and bring balance mentally, emotionally, and physically. Very powerful for the immune system!

**Figure A-13b**





## Story and Photos By Glenn King

For the first time in our lives, Hillary and I had the wonderful opportunity to travel to the island nation of the Philippines to share TKM® with them. It has been a dream of mine for many years to visit and take this wonderful knowledge around the world, and I am so thankful that this opportunity arose. I thank each and everyone of you for your prayers and financial support in allowing us to go. And as promised, here is our report.

### The People

The one thing that stands out in my mind most is the people. I have never met such a warm and friendly people anywhere else. There is such a spirit of service on every person we came across at the Philippines College for the Advancement in Medicine (PCAM) conference. Everyone, from Dr. Edna Lao, the president of PCAM, to all the assistants made us feel so comfortable and welcomed with their genuine and joyful hearts to serve. For instance, it took us a long time to leave the airport, having to gather our luggage and go through customs and all. PCAM sent a team to meet us there and take us to our hotel, and they literally waited for us for HOURS. But they were so extremely patient and so nice about the delay. Now, imagine what *your* attitude would've been like if you had to wait for total strangers at an airport for hours? We were pleasantly surprised and so thankful for their patience.

I have also never met such attentive people as I did in the Philippines. It was almost like everyone could read your mind because they were able to get you exactly what you needed almost without having to ask for it. There was a taxi driver named Vincent who drove us around for three hours to tour the city. I didn't notice at first, but after a while I realized that he was watching me in the rearview mirror. Every time I raised my camera to take a picture of something, he slowed down even without my asking. And he was so happy to share everything he knew about the sights we saw. You would've thought we were on a paid tour rather than in a normal taxicab!

And of course, there was such a beautiful spirit of humbleness on everyone that I met there that I had only ever seen on rare individuals in the States. There were no egos and no spirits of pride whatsoever. Anyone

and everyone wanted to help us and each other. They were eager to please and did everything with such joy. One restaurant that we were invited to dinner at was called the "Singing Waiters and Cooks." And just as the name implied, the waiters and cooks would randomly burst out into song. Those were quite some talented people! As we listened to some of them, I thought in my mind, "Wow! If these guys were in the U.S., I wouldn't be surprised if some of them made it big!" That's how talented they were.

### The Conference

We arrived the second day of the conference and I spoke that morning. This wasn't just a small gathering of MDs. The top doctors in the nation attended, along with a few from other countries. I must admit that I was dealing with a great deal of jet lag and wasn't quite myself that morning. But the Holy Spirit seized the day, and this was confirmed by some of the people I spoke with after the conference. One individual told me, "The anointing here is thick," and indeed it was.

Speaking to and teaching the Filipinos was such an honor and joy for me because I had never met such an attentive and enthusiastic group before. I didn't see one eye roll or one funny look. They were so open and caught on so quickly. And I had such joy entertaining their questions, for they asked such excellent questions. And even when I went over my speaking time limit, Dr. Lao allowed me to continue until I finished.

"Time doesn't matter," she had told me. "We make allowances for good things."

And that was another quality of the people that I found almost enviable. While they were very eager and skilled at serving, they were also very laid back. I mean, things got accomplished in a timely manner, but nothing was rushed and no one was hurried. They didn't let terrible situations overstress them. I believe a strong reason that they were like that is because of their spiritual sensitivity. Many of them seemed so in tune with the Holy Spirit that nothing could hinder their joy.

And how the Holy Spirit moved! The morning after the Emergency Integrative Medicine Techniques (EMT) lecture, Dr. Lao told us that her son had suffered an asthma attack that morning. She said she used the Stop Asthma procedure, and it worked immediately. Mere minutes after







the attack, he was able to go back to sleep normally.

She told us that usually when he had an attack, a number of things would have to be done to get it under control again, including IVs. She said it usually took him two to four hours to calm down again. Imagine not being able to breathe properly for two to four hours! But this time, with the Stop Asthma procedure, she was able to bring him out of it in minutes! Praise God!

Another amazing move of the Lord involved Dr. Lao's assistant, Dr. Delia Maceda-Patawan. Various booths were set up at the conference, and Dr. Maceda-Patawan had stopped at one that promoted an electrical device used on the spine. She laid down at the booth and tried it, and she said she immediately started feeling pain and such intense nausea that she asked them to stop. She then went into a room to recover, but she wasn't getting better and said she felt like she was going to pass out and was very nauseous. Dr. Lao came and got me to look at Dr. Maceda-Patawan. I evaluated her and did a TKM session for her based on what I had learned happened and based on what I had read from her pulses.

After the session, she said she felt relief. Then a couple hours later, before the end of the day, she felt total relief as if it had never happened. God is good!

## The Poverty

The Philippines is a third world country, and if you've ever been to one, then you

know exactly what that's like. Words won't do justice to describe the poverty we saw over there, and even now it breaks my heart thinking about it. There is an unbelievable amount of homeless there. There was a bank that I could see from our hotel balcony. At night, when the bank closed, people and their children would spread their blankets, if they had blankets, on the concrete under the awning of the bank building and sleep there in order to have a little bit of shelter. In the morning, they would pack up their things and leave before the bank opened for the day.

Every neighborhood that Vincent drove us by made our government projects look like five star hotels. Few buildings had

windows or roofs that looked fit enough to keep any amount of rain out. Many looked like they were ready to crumble apart at the slightest breeze. Just from the looks of the outsides, many of those structures would've never passed any type of building code in the States.

Sanitation was virtually nonexistent. Children played in their bare feet in streets littered with broken glass. The children were very dirty. It wasn't just "new" dirt, like what your kids get from playing outside for a day and that you wash off in the bath. It was "old" dirt that these kids were covered in, as if they had never even been bathed at all, and many had missing and broken teeth.

And the air was in about the same condition as the streets. No emission codes for vehicles exist there, and the air in the cities is thick with smog. But unlike in Japan, where pedestrians walk around with disposable surgical masks on their faces to filter out some of the pollution, the Filipinos have to walk around covering their mouths and noses with just their shirts. It is a very unhealthy place to live.

The most crowded places were the hospitals. It was such a difficult situation to fathom. We were told that hardly anyone had any kind of health insurance. After all, when you're poor and can barely afford food, how on earth can you expect to afford health care? So what happens to these people when they get sick or fracture a bone or something? They deal with it as best as they can on their own. They only go to the hospitals when they are about to die.





But the hospitals are so ill-equipped that they can do little for the patients. The doctors and nurses are very willing to help, but they have very limited means to do so. It's like sending soldiers out onto the battlefield without armor or weapons. The doctors and nurses do the best that they can, but without proper equipment and supplies, their hands are virtually tied to offer effective enough health care.

But through it all, they still had their joy. That indescribable joy that could not possibly be linked to anything else other than their faith. They had nothing, yet they offered everything in order just to serve.

I was humbled by the things we take for granted in the U.S. Even something as simple as paper. I was surprised at first when I went to wash my hands and there were no paper towels to dry them on. Dr. Jaime DyLiacco, our hospitable and humble host through this entire trip, smiled and told me, "This is a third world country. That's what the back of your pants is for!"

I was even more humbled by people like Vincent, our taxi driver. He's homeless. He's been driving cabs for over twenty years, and most everything he made he used to send his two daughters to school. THAT's sacrifice. I was so touched by his story that Hillary and I have resolved to send him support money regularly.

### **"This needs to get out."**

While we were at the conference, the director for the country's largest radio broadcast company told me, "This needs to get out," and that she would do anything she could to get the word out about TKM. A pair of Filipino nuns also attended the workshop and said they saw the value in TKM and looked forward to more training. Also, scientific medical studies will be conducted over there on TKM, the kind of studies that I had hoped would be done here in the U.S. for ages but were never conducted because TKM was, "Too good to be true." Even now, just mere weeks after our return, we're hearing reports of TKM's effectiveness.

So we will return to the Philippines. There is no question about it. You know the cost of international plane tickets, especially to Asia. There is no way that most Filipino doctors can come to the U.S. for training, so we need to bring the training to them. There are too many people that need the help, and what better way to help then to show them how to heal themselves with the two hands with which God already provided them? These people can't afford medicine or vitamins or fancy electrical devices. There were doctors attend-



ing the conference that couldn't even afford the US\$2.50 entry fee into the EMT workshop. Highly skilled and trained DOCTORS not being able to afford \$2.50! Even if you're not a doctor in the U.S., you have much more than that in your pocket right now!

So we are going to return and train as many people as possible without cost to them. As that one individual said, the anointing is thick, and the people are open and willing to learn. But we are going to need help. There are so many people that are ready to learn, hundreds in fact, and we are going to need to bring some of our instructors and practitioners along with us in order to train everyone.

And we're going to need financial help. It is a sacrifice to ask our instructors and practitioners to close down their practices for a week in order to travel to a third world country and teach. It's approximately \$1500 just for one economy plane ticket from the U.S. to the Philippines. We don't want them to have to pay their own way. But you can help the Institute send us all. We plan on returning in April, and you can help us by making a tax-deductible donation towards the trip. Our goal is to be able to return with at least four instructors and practitioners, including Hillary and myself.

### **Changed**

I am forever changed by what I saw and experienced in the Philippines, and I can't even imagine not wanting to help them now. Their beautiful nature and their authentic joy are not like anything I've ever seen. And I am so humbled by how they can live in such dire situations and environments and yet still be so wonderfully joyful and real. They are an aptly named people, for the joy that they shared with us is undoubtedly the same joy with which Paul wrote his letter to the Philippian church.

I know I am only one man, but God is a BIG God, and I completely submit myself to be used by Him in every capacity to share this gift of healing with a people so in need and so deserving. I look forward to returning in 2007 and for many more years in the future. 📍



# Testimonial

## Corner

### *Thriving, not just surviving*

Hi, my name is Vicki Stoeckel. I live in New Jersey with my husband and seven year old daughter. I am honored to be able to share with you the gift of independence that TKM® has given me. I am 47 years young, and six months ago I was 46 years old.

Last February, I had reconstructive oral surgery to remove an abscessed tooth and correct a hole it created in my sinus cavity. After two months of feeling terrible and running fevers, they determined that I had a bone infection in my upper jawbone diagnosed as Osteomyelitis. The determined course of treatment was an IV antibiotic cocktail for two to four weeks. I received Gentamicin, Levaquin and Rocephin via IV for 30 days.

After about a week of treatment, the bottom of my feet and the back of my legs started to hurt. I would get dizzy immediately following each treatment. The dizziness would not last, but the foot/leg pain got progressively worse. After 30 days, the infection was gone, the IV's stopped, but the symptoms kept getting worse. I was so dizzy that I walked as if I was drunk and my vision started to "vibrate." The pain was constant and after two weeks, I was using a cane. As my symptoms worsened, I was using a walker and not able to drive at night.

After multiple visits to ear, nose and throat specialists, infectious disease doctors and neurologists, I was diagnosed with Bilateral Vestibular Disorder, Ototoxicity, Oculopgia and Neuropathy in my feet, legs and left arm. This was the result of Gentamicin poisoning and a possible allergic reaction to the antibiotic cocktail. Basically, the antibiotics permanently destroyed the hair follicles in my inner ear, which affected my ability to balance, diminished my hearing, gave me a bouncy vision (Oculopgia) and damaged the nerves in my feet, legs and arm.

I was told my symptoms would get progressively worse for three to six months and during that time, I would most likely be confined to a wheel chair and have to give up driving completely. I was told that with physical therapy, I might be able to improve my ability to balance, but there was nothing that could be done to help with the Oculopgia. For the neuropathy, I would need to take the prescription Lyrica and heavy doses of painkillers.

My vision was severely impacted by Oculopgia. When I walked or drove over uneven surfaces, my vision would seem to vibrate or bounce. I could not focus, read signs, recognize faces or walk straight. This made even assisted walking and driving very challenging. When I went to the beach, just looking at the motion of the waves would make me fall down. Going out at night was out of the question.

Two months into this, while visiting family in Florida, a friend told me about Dr. Jim Robertson, who had helped her brother overcome prostate cancer. It turned out to be a message from God. On a July afternoon, I skeptically wheeled myself into office. I was suffering terrible pain and

I had little hope. At 6:30 p.m., I WALKED out of his office in much less pain, and I drove home with all kinds of hope. By the next morning, I could stand on one foot!

Over the next 10 days, Dr. Robertson worked with me, doing TKM sequences and teaching me about this incredible gift. A gift that each of us has within us! The pain in my feet became manageable, I did not need the walker much except at night and my vision seemed to be less bouncy. I bought the Self Help Book and Textbook so I could go back home and continue my miracle of recovery.

That was only two months ago. By the grace of God, I was just told by my physical therapist and my ENT that I should be a poster child for Vestibular Disorders because they have never seen anyone recover as quickly or as dramatically as I have. I started taking small walks outside about one month ago. Just this week, I walked with my seven year old and our very excitable big dog. Three nights ago, I left a restaurant by myself (no walker, cane or companion), walked in the dark to my car and drove home. I have not been able to do that since I was first diagnosed!

When I first got home from Florida I was doing self help 3 to 4 hours a day, which became unrealistic, I engaged a friend to help. In faith, we learned together. There were times we weren't even sure we were doing the techniques right, but I just kept improving. Dr. Robertson told me that one hour of her working on me was equal to approximately three hours of self help. He guided us via e-mail and prayer.

The first few weeks we did at least five sessions per week and I did a little more than an hour of self help per day. We gradually reduced the amount of time significantly. Now we meet 1 to 2 times a week and I do TKM self help daily. By next week, we will start weekly sessions. I will continue daily self help. The dedication has been so rewarding. TKM is amazing! It IS progressive.

Additionally, I go to physical therapy to strengthen what little signal I have from my ears to my brain and I have Anodyne treatments 2 to 3 times per week (for neuropathy). These have been helpful, but I know the results I have achieved would not have been possible without TKM. My therapists continue to be amazed.

I am planning to take TKM classes. I would love to share this gift with other people. This has been an incredible journey. I am humbled and full of thanks. TKM has become a way of life for me. I am not just surviving anymore. I am thriving.

- Vicki Stoeckel

### **Emergency Procedures**

A teenage female patient in the surgery center where I work was having a popliteal nerve block done in preparation for her surgical procedure. I was in a nearby cubicle when I became aware of a problem in which the patient developed what sounded like a laryngospasm (closure of the larynx that blocks the passage of air to the lungs). The patient's respiration was very stridorous, and she was not fully conscious. The cardiac monitor showed a rhythm of SVT (supraventricular tachycardia) at a rate of 150. Her oxygen saturation stayed in the mid 90's despite her respiratory distress. I did not know the patient's medical history, but there were apparently issues that had possible drug contra indications. Without knowing the cause of her respiratory distress,...

*Continued on page 12*

# Healthy Eating

## Gluten-Free Cookies

By Hillary King

Among my favorite things to do at this time of the year is cooking and baking. And I love to see my house decorated with Christmasy things and the delicious smell of baking cookies or cakes.

Because we recently changed to eating gluten-free diets, I found a delicious cookie recipe by Namaste Products and I think you'll enjoy making these treats for the holidays. This mixture contains no gluten, no chemicals and no preservatives. Yes, it does have some sugar, but this is a season for exceptions, but in moderation! Enjoy!

### Ingredients needed:

(Approximately 2 baker's dozen)

1 Namaste Cookie Mix  
2 eggs  
1/2 cup of oil  
2 tblsp. of water (I substituted with goat's milk)  
Optional: 1 cup crushed nuts or chocolate chips

1. Pre-heat the oven to 350 degrees F. Lightly coat your cookie sheet with vegetable oil (not olive oil because it will burn).
2. Combine eggs, oil, water (or milk) and cookie mix in a bowl and blend well.
3. Drop approximately a table spoon of mixture on the cookie sheet. Space them about two inches apart.
4. Put cookie dough in oven and bake for 10 to 12 minutes or until the tops start to turn light golden brown. Now they're ready!

It is a really simple recipe, delicious and much healthier than cookies made with wheat, whether you are gluten- intolerant or not. May God bless you and your family with abundant joy, peace and protection this Christmas season and in the prosperous New Year!

## Pulse Puzzle Suggestions:

(From page 5)

**Observation:** The pulses are basically loud at chest level and decrease in intensity from chest down through hip level. All of chest level is rapid with 5th Stratum textures, while most of the rest are 1st Stratum or silent. Gallbladder has 3rd Stratum texture, but we see no clear relation to others so we will set that aside for now.

What is clear is that the person is in a high emotional state! It's not uncommon to see a similar pulse pattern with emotions high and the person is unsettled as to what direction to go with the issue. Emotional level is chest, which is where the rapid pulses are. All chest level also has 5th Stratum representing "feeling the need to get things under control."

Fourth Stratum is silent due to fear, and 1st Stratum is affecting 6th Stratum with worry and chaos. Gallbladder is showing a little anger in itself, possibly from the emotional issues having some hurt feelings involved, which often react as anger.

**Suggestion:** I think the obvious first approach would be to apply a #13 Sequence followed by a Mediator and/or #19 Sequence. And I would suggest plenty of clean water, a good meal and some extra rest. In this process they will have a better position and opportunity for reflection to work out the issue in their mind and heart. I would suggest another session, hopefully the next day to reapply #13 and follow with a #15 Sequence or 3rd MOC.



## E-mail Response Corner

**Q:** Has anyone had any success dealing with **Polymyalgia Rheumatica**. I have a lady coming to see me who is on steroids to help her with the disease. I will read pulses but am very interested in any suggestions or advice. - Alice

**A:** First allow me to mention that this request is a frequent one. Not specifically for Polymyalgia Rheumatica, but, "Is there any success stories for a particular disorder?" I don't feel it is the intention here whatsoever, although there are many that ask for help but will not act on what is suggested unless there are exact same case scenarios which were healed that they may speak with to verify whether there is benefit for their personally situation. I've seen hundreds over the years that need serious help that do nothing with TKM due to this very reason. On the other hand, I've seen many more that receive help and recovery because they do try something different (TKM) without a verification possible as I had just mentioned. This includes the "first" of cases like cancer, AIDS, genetic disorder, suicidal tendencies, chronic depression, stopping a heart attack, arteriosclerosis, brain tumor, herniated disc, ruptured appendix, seizures and so many other first cases. The basic principles apply to all of them and many that don't even have a medical term.

Now, what about Polymyalgia Rheumatica, which I have never worked directly with? It is a disorder involving pain and stiffness in the hip and shoulder area. It can involve fever, general muscle pain, neck pain, anemia, fatigue, face pain, joint pain and malaise (general ill feeling) and other symptoms. Symptoms are typically more prevalent in the morning.

*Continued from page 10*

### Testimonies continued...

I placed one hand on the top three Thoracic vertebrae and the other on her upper sternum. In less than one minute, the stridor suddenly stopped and the heart rate dropped to a sinus tachycardia with a rate of 100-110. Dr. King advised me that placing the anterior hand on the supra sternal notch may have had an even more rapid response. Still, the patient recovered from this episode sufficiently that it was determined that it was safe to proceed with the surgery.

In another instance, a patient in his 30s arrived to the preoperative holding area. He was active in sports and his resting heart rate was 44. While I was starting his IV, the patient became increasingly pale and stated he did not feel well, not an uncommon vasovagal response to having an IV started. I finished the IV insertion and increased the IV flow rate. His heart rate slowed to 30. I held his thumb's with my hands while continuing to talk to him. Within seconds, the heart rate increased to 51, his color returned to normal and he stated that he felt much better.

- Anonymous

The normal medical treatment is the candy of the current age: prednizone or other related steroids.

My first insistence is for consistent good hydration with clean water. This is generally a 4th Stratum project that affects other functions. Therefore, apply #23,25, Bladder, Kidney, R&R 4th Stratum, SFE of 4th Stratum, #8 and other 4th Stratum related and supportive applications. It is important to include 3rd MOC and Mediator and include special attention to pulses and responses of #2, #23, #9, #10 and #3. This is where the symptoms seem to start and/or be more intense, and all of them are on Bladder pathway. Thanks Alice for asking a good question.

**Q:** I've had great success using many of the sequences in my *TKM®: Self Help Book*, and *TKM® Video* I purchased from you some three years ago. **Nystagmus**, an uncontrollable eye movement, is not specifically addressed in either the book or the video. Does TKM have specific sequences that could be helpful for Nystagmus or similar eye conditions? I understand that any response by the King Institute is for information only and not meant to diagnose,

treat, or cure any symptoms or health conditions. - Joe

**A:** Again, here we are looking for the symptoms and seeing how they correlate to energy functions that are responsible for the physical functions of the symptom. This is the only real approach unless we have more history, pulses and personally see the individual to assess additional information. The symptom is eye and uncontrollable movement. Symptomatically, we know this involves the eye (3rd stratum), movement which requires muscles (4th stratum), and communication involving nerves or CNS (1st stratum). There are many more details of the different symptoms that can occur with this disorder, but for the sake of space, let's go to applications.

I suggest applying the Eye Sequence, #4 Sequence (opposite), R&R 4th Stratum, Stomach, Spleen, Gallbladder and Liver Sequences. I would obviously check pulses, but without them, I would help support recovery with #20,21,22, #5,6,7,8 and Mediator Sequences.

# KIMA to get revamped in 2007; How can you help?

By Christine Dao

## What's \$20 a month to you?

Is it four cups of coffee? How about a nice meal at your favorite restaurant? Maybe it's all that loose change cluttering up your car ashtray or weighing down your purse.

When you really think about it, it's not very difficult for the average American to find \$20 somewhere.

## The Dilemma

Have you ever planned on attending a TKM class, only to find out later that it was cancelled because not enough people were registered to attend it?

How about wanting to purchase some books and videos using a KIMA Journal coupon only to realize that you've already used yours for the quarter?

Or, have you ever needed to visit the Institute for an evaluation by Dr.

Glenn King, but simply didn't have the funds to afford the trip to Texas?

For those who have forgotten, the King Institute, Inc. is a nonprofit health organization, meaning that it was originally designed to survive using financial contributions from generous sponsors. Using these contributions, the Institute would be able to fund projects and support those who desperately need help but can't otherwise afford it.

Although we have a handful of sponsors that contribute on a regular or one time basis, it simply isn't enough to pay even the bare-bone bills to keep the Institute operational. **That's why it is necessary to charge for sessions and class tuition in order to keep the Institute running.** And many times, when necessary, the Institute's practitioners and instructors have forgone session fees and class tuition payments for individuals who need the help but simply can't pay, another flexibility afforded to us due to our nonprofit status.

Time and again, God has been faithful

in providing the funds the Institute needs to maintain itself. However, its mission and ministry were meant to accomplish so much more. This is evident in the recent pre-sale of the new Textbook, a project that has been in the works for a very long time.

The new Textbook was incepted years ago. However, projects of that magnitude require substantial capital to even get started. Software must be purchased. Computers must be upgraded or purchased as well. Hundreds, even thousands, of man-hours must be put in to design it, write it and edit it. And that's all even before printing and binding costs are factored in.

Another monumental project was the Energy Sphere DVD, which was also promised sooner but unable to manifest until last year. Production crews had to be hired and equipment rented. Time had to be taken from normal work schedules and the Institute itself had to be shut down for a few days to

**Time and again, God has been faithful in providing the funds the Institute needs to maintain itself. However, its mission and ministry were meant to accomplish so much more.**

allow for filming.

All of this requires money, even before the finished products see the light of day and are available for purchase. But with so much need and so little support, the Institute's hands are tied as to what projects it can afford to take on at a time.

And then there was the Philippines trip. We thank everyone who sponsored Dr. King to travel to the island nation and share The TKM® with them. The Filipinos' response was phenomenal, and they have requested him to return.

**But that may not be possible.** With the financial support of a handful of people, we were lucky to send him this time. We can't be positive that we'll be able to send him again to the Philippines or any other country that needs the help but can't afford even a plane ticket to the States. This organization has had a vision to reach the world since the beginning, and the size of our ability to help those around the world depends supporters like you!

## KIMA 500

You've seen what TKM® can do. You know how it has helped you and your loved ones. And you know that this knowledge is priceless.

That is why, starting in September 2007, The King Institute Method® Association, or KIMA, is going to do what it was originally designed to do. Next year, KIMA will become KIMA 500.

We've done the math. If 500 people contribute \$20 or more a month for an entire year, then the Institute will have sufficient funds to cover its basic operational needs and more. Not only will we be able to cover the rent, but we can also start taking on more projects, such as the children's book, the music therapy CD, and translation of all the materials into foreign languages for missions. Although we have wonderful volunteers ready to translate, we need to purchase the necessary software and equipment for them to use and to get books printed. And, with the volume of work, the need to hire more full time staff arises.

This foundational support will also free the Institute from current restrictions, such as allowing us to lower the required minimum number of people to hold a class

outside of the Institute (the current minimum is 25 registered students).

This will also allow the Institute to keep its current class tuition prices

and not have to raise them (our tuition has been the same since 1995, and we don't want to raise it if we really don't have to!).

And, most importantly, it will allow us to help more people who can't afford it.

People who are sick just want to get well, and we want to help them without burdening them with financial strain. The King Institute, Inc. has a heart to reach out to these people and we often reduce or waive their session fees or class tuition. We want to be able to do this for every single person who comes through our doors in that situation, and the ongoing support of members from KIMA 500 will allow us to do so.

## What's \$20 a month in the King Institute, Inc.?

Twenty dollars a month can help us help those in need, and by contributing financially, you are a part of our mission as much as we are: helping people restore their health through TKM.

With your \$20 a month, we can get the books published and sent to people around the world to help themselves get well. With your \$20, we can take the mission trips to the Philippines and other countries whose people can't afford any type of health care. With your \$20 a month, we can train more practitioners who we can send to help those who cannot make it to the Institute.

Your \$20 can do a lot.

## The Benefits

We haven't set in stone what the exact benefits for being a KIMA 500 member are yet. Much of it will depend on the responses that we receive from you, so please take the time to fill out the inserted Feedback Form and send it in the self-addressed envelope.

But here are some of the options we are seriously considering.

Members will receive a free T-shirt as well as the KIMA Journals every quarter. Not enough, you think? How about FREE SHIPPING on ANY TKM product that you buy? KIMA 500 Members can also have access to a special online message board like KIMA-Talk, our online community, where you can bring all your TKM questions and share your stories.

And best of all, members will have a new special discount percentage off classes across the board. No more having to worry about coupons. You'll automatically receive the percentage off the tuition balance (anything owed beyond the nonrefundable and non-negotiable deposit) of any class you take for just being a member!

And, as long as you are a member, NONE of these benefits will expire or be limited.

## Take Action

If you believe in our cause and our work, then we encourage you to bring this matter before the Lord and see how you can help. And please fill out your Feedback Form and return it promptly to let us know if you are willing to become a member of the KIMA 500 and to share some of your ideas as well. And tell others about it and ask them to support this organization's outreach.

Make it possible for us to continue our work and do so much more. If everyone does just this one small part, we can make this happen.

*So, what's \$20 a month to you?*

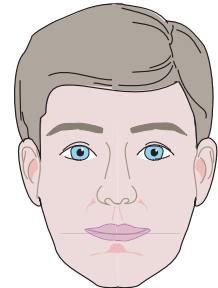
## Body Biography Corner

### The Mouth Reveals More Than Words!

The mouth angle reflects how a person listens and chronic state of their pH. To determine the mouth angle, draw an imaginary dot at each corner of the mouth and one in the center, then mentally connect the dots with a line. Most relations correlate with 1st stratum functions.

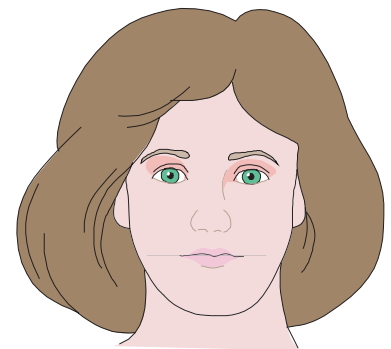
#### Mouth turn up (when relaxed)

**Optimist:** This reveals an optimist in listening. They chose to hear the best in what they are told. This is very rare, because most of us with any life experience do not enthusiastically believe whatever we are told. This can also represent a chronic acidic pH. Holding the thumb or applying acidic correcting applications can balance pH. Applying the Stomach sequence is excellent.



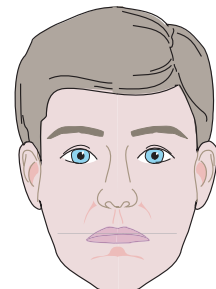
#### Mouth is straight (when relaxed)

**Objective and reflective listener:** An objective listener can be a good source for feedback from a realistic impression of what is said without a spin for better or worse. Their pH should be fairly balanced and should not be preoccupied (worried) about their general perspective. Holding the middle finger will help produce more balance.



#### Mouth turns down (when relaxed)

**Prepared to hear the worst and often mistrust what is heard:** They tend to mistrust what is said. The positive side of this is they are not so disappointed when things don't turn out as told, due to low expectations. The challenge is that they screen out positive information about themselves such as a compliment, and may hear the worst in what is said even when it is not intended. Example: someone appraises their work and says it is "alright" or "fine" and they may take it as criticism. If they didn't say it was great or wonderful it could be understood as "not good enough." This is often due to multiple incidents in the past that have caused a tending towards mistrust. This can also represent a chronic alkaline pH. Holding the little finger or applying alkaline correcting applications can balance pH. Applying the Stomach sequence is excellent, plus #13, #9 and Mediator.





# Gifts Fit for a King

*“When they saw the star, they rejoiced with exceedingly great joy. And when they had come into the house, they saw the young Child with Mary His mother, and fell down and worshiped Him. And when they had opened their treasures, they presented gifts to Him: gold, frankincense, and myrrh.” – Matthew 2:10-11 NASB*

By Christine Dao

Many learned in Sunday school of the significance of the wise men’s gifts to the Child Jesus when they found Him in Bethlehem. Gold represented royalty, a fitting gift for the King of kings and the Lord of lords. Frankincense, which was used for worship in the temple, was proper for His role as our High Priest. And myrrh, an oil used in embalming, was an odd gift to give to a child. However, it was fitting for the Man who was born specifically to die.

But what many didn’t know is that two of these three ancient gifts of the Magi have therapeutic properties that we can find useful today. Here are some interesting facts about the these gifts fit for a King.

## Frankincense

Frankincense is from the botanical family burseraceae, which consists of about 540 species of flowering plants. Burseraceae, also known as the torchwood family or incense tree family, includes both trees and shrubs native to the tropical regions of Africa, Asia and the Americas.

Frankincense is an extraction from the resin of a genus of trees called *Boswellia*, which are known for their fragrant resin that has many pharmacological uses, particularly as anti-inflammatories. The specific species of tree that Biblical frankincense came from is most likely the *Boswellia carteri*, which is found in Somalia. The resin is tapped from the tree by slashing at the bark and allowing the sap that it exudes to harden.

The name “frankincense” was derived from the Medieval French word literally translated “incense of Franks” since it was reintroduced to Europe by Frankish crusaders. It also goes by the name “olibanum,” which can be derived from the Arabic word *al-lubán*, meaning “the milk.” This most likely pertains to the milky sap tapped from the tree. Some believe olibanum could also come from the Arabic word for “Oil of Lebanon,” since it was widely sold and traded in Lebanon with the Europeans. And then there’s the Exodus 30:34 reference that names frankincense *levonah*, meaning “white” or “Lebanese,” in Hebrew.

Frankincense was used most popularly as an oil, as it is today, made by distilling the dry resin for use in perfumery and aromatherapy. It was and still is considered the “holy anointing oil” in the Middle East and has been used in religious ceremonies for thousands of years. The Bible makes over 52 references to its use, taking into consideration references to “incense” that is translated

from the Hebrew and Greek to mean the same oil. In Exodus 30, “pure frankincense” was among the ingredients to make an holy incense specifically for worshipping God and for no other use. In Leviticus 2, frankincense was burned with the grain offering. And of course in Matthew, it was among the three gifts given to Christ by the Magi of the East.

Frankincense’s value far exceeded gold’s in ancient times, and only those with great wealth and abundance possessed it.

Researchers today have discovered that frankincense is high in sesquiterpenes, a class of compounds that go beyond the blood brain barrier and help stimulate the limbic system of the brain, or the center of emotions, as well as the hypothalamus, pineal and pituitary glands. Because of its effect on the hypothalamus, the master gland that controls hormone releases, it can help with depression by stimulating and elevating the mind to perhaps help in overcoming stress and despair. It can also help support the immune system, and the essential oil of frankincense can be used to help with asthma and ulcers. Some of its other uses include aiding with allergies, insect and snake bites, bronchitis, cancer, respiratory infections, diphtheria, headaches, hemorrhaging, herpes, high blood pressure, inflammation, stress, tonsillitis, typhoid and warts. Because it contains sesquiterpenes, it can increase the activity of leukocytes in the body’s defenses against infection.

Frankincense oil can be diffused in the air or applied topically. It can also be added to food or water as a dietary supplement. However, as with any dietary or nutritional protocol, it is always wise to consult your physician before using it.

## Myrrh

Myrrh comes from the same botanical family Burseraceae as frankincense but from the genus *Commiphora* that is native to Somalia and the eastern parts of Ethiopia. It is harvested in a similar manner, by allowing the sap from the *Commiphora myrrha* tree to harden before harvesting. And like frankincense, the oil is steam distilled from the resin. Its name is derived from the Hebrew *murr* or *maror*, meaning “bitter.”

Myrrh was traditionally used by the Arabian people for many skin conditions, such as chapped and cracked skin. It was also used for wrinkles.

Myrrh was used in perfumes and incense and was worth more



*The Three Wise Men in a late 6th century mosaic at the Basilica of San Apollinare Nuovo in Ravenna, Italy. Image courtesy of Wikipedia.org.*





Above: 100g of frankincense resin. Image courtesy of Wikipedia.org.



Above: 100g of Myrrh. Image courtesy of Wikipedia.org.


than its weight in gold and about five times more than frankincense in ancient Rome. Romans burned myrrh at funerals to cover the smell of burning corpses. Some historic accounts say that the Roman Emperor Nero burned a year's worth of myrrh at the funeral of his wife, Poppaea. Myrrh was also used as an embalming ointment up until the fifteen century.

In the Bible, myrrh was among the gifts Israel ordered his sons to bring to Joseph with them during their second trip to Egypt. It was also used in the 12 months of beauty treatments that Esther had to undergo before

she could go before King Xerxes with her request. The Song of Solomon makes numerous references to myrrh. And both the gospels of Matthew and Mark mention that Jesus was offered wine (or vinegar) mixed with myrrh to dull the pain of crucifixion, which He denied. And John wrote that myrrh was among the embalming spices and oils that Nicodemus had brought to prepare Jesus' body for burial.

Myrrh can be used pharmacologically to help treat bronchitis, diarrhea, dysentery, hyperthyroidism, stretch marks, thrush, ulcers, vaginal thrush and viral hepatitis. It

may also help with asthma, athlete's foot, candida, coughs, eczema, digestion, fungal infection, gingivitis, gum infections, hemorrhoids, mouth ulcers, ringworm, sore throats, skin conditions (chapped and cracked), wounds and wrinkles.

It may be applied topically on location or used during a massage. It may also be added to food or water as a dietary supplement. However, as with any dietary or nutritional protocol, it is always wise to consult your physician before using it. 

### ***We Three Kings***

*We three kings of Orient are  
Bearing gifts we traverse afar  
Field and fountain, moor and  
mountain  
Following yonder star*

**CHORUS:**  
*O Star of wonder, star of night  
Star with royal beauty bright  
Westward leading, still proceeding  
Guide us to thy Perfect Light*

*Born a King on Bethlehem's plain  
Gold I bring to crown Him again  
King forever, ceasing never  
Over us all to reign*

### **CHORUS**

*Frankincense to offer have I  
Incense owns a Deity nigh  
Pray'r and praising, all men raising  
Worship Him, God most high*

### **CHORUS**

*Myrrh is mine, its bitter perfume  
Breathes of life of gathering gloom  
Sorrowing, sighing, bleeding, dying  
Sealed in the stone-cold tomb*

### **CHORUS**

*Glorious now behold Him arise  
King and God and Sacrifice  
Alleluia, Alleluia  
Earth to heav'n replies*

## THE CLASS / EVENTS SCHEDULE

Additions and changes in schedule are subject to change without prior notice.

Please check the up-to-date schedule online at: [www.kinginstitute.org](http://www.kinginstitute.org)

You may register for the Institute's classes / events online at [www.kinginstitute.org](http://www.kinginstitute.org)

Or, you register or inquire about any events by calling the King Institute, Inc. at

**1-800-640-7998**

Thank you for stretching yourself to learn valuable information!

### Everyone's Talking on **KIMA-TALK!**

We've all experienced it. TKM® (TKM®) overload! We're excited! We're ready to go. Then it hits us – we no longer have someone to talk with about TKM®. What do we do when we have questions? Once we start working on people, we start having incredible results. Where do we share all the exciting reports? For those who want to talk with someone who understands, there's good news!

If you completed Level 1 and 2 training, there is a forum just for you. Current members of the forum say it feels like the training seminar never ended. It's a great way to share stories, **ask questions**, learn something new, problem solve together, rejoice with one another and pray with over a hundred people who have a passion for TKM®.

Join us today! Contact the King Institute, Inc. to be added to KIMA-Talk. The discussions are great. The fellowship is excellent. And the thirst for more talk about TKM® is satisfied.

**Note:** When you e-mail the Institute, include your Level 1 and 2 training locations, approximate date and your phone number.

### What is TKM®?

It's a complimentary form of natural medicine from a physics understanding of the bioelectrical systems and functions of the human body.

This gentle method is a non-invasive, light touch approach to re-establishing homeostasis in the body that even a child could apply. Use of this nurturing practice restores bioelectrical circulation (conductivity) and balance (coherence).

It promotes rapid healing and has shown to be highly effective to help reverse critical health issues and chronic diseases as it activates a resurgence of vibrant health.

The King Institute, Inc. embraces its client as a "whole person," addressing the cause from a physics point of view rather than symptoms of disease or pain (which is simply bio-energy that is not circulating properly).

This approach produces measurable and remarkable improvement in physical, mental, and emotional health.

Our greatest handicap is lack of knowledge and the lack of acting on correct knowledge!



## *Rhus Tea*

\$29.95 plus S/H \$4.50 or  
3 for \$74.95 plus S/H \$7.00 (Save \$15!)

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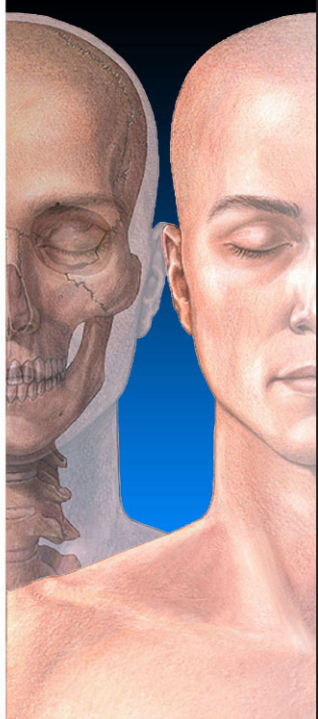
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