

Extraordinary Alternative Medicine for Extraordinary Results

K I N M A

The Journal of
The King Institute Method® Association

Issue 13

Pain

**Increased painkiller use fails to
resolve the problems**

Plus!

**Energy saving lights
pose health and
environmental
problems**

**E. coli scares and how
to naturally address
food poisoning**

**TKM® Missions:
Delta Junction, Alaska**

**Vitamin E: one of nature's
most powerful antioxidants**



Contents

Issue 13, September

cover

9 Killing pain doesn't resolve it - Painkiller use has doubled in the U.S., according to recent figures, showing that they don't resolve the pain, as well as cause additional problems.

features

4 Energy saving lights pose health and environmental hazards - Consumers favor compact fluorescent bulbs to save energy and money. However, the lights may not be as healthy and environmentally friendly as they seem.

13 E. coli scares - Normally associated with rotten meat, E.coli has recently been found in other foods, some of them produce. Learn more about this bacteria and effective ways to deal with food poisoning.

15 Missions: Delta Junction, Alaska - Dr. Glenn King and a dedicated team of TKM® students traveled to the 49th state to share TKM® with a secluded and self-sufficient community.

18 Supplementing your health: Vitamin E - Dr. Glenn King discusses how one of nature's most effective antioxidants is a supplement from which everyone can benefit.

in each issue

1	Staff
2	Director's Note
3	Editor's Corner
5	Pulse Puzzle
5	FYI - Good Info to Know!
7	New TKM® Sequence
8	New TKM® Sequence Symptom Relations
12	E-mail Response Corner
17	Pulse Puzzle Suggestion
19	Body Biography
20-21	Testimonial Corner

KIMA

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Association

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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

Greetings KIMA 500 Members!

I gratefully welcome you to this support membership for the ministry and operations of the TKI organization. This is the first issue of the new KIMA 500 Journal, and we thank you for your patience while we go through this process over the next several issues to fine tune a higher quality journal for you. We invite your feedback and suggestions as well as any articles or topic suggestions you would like to submit, which you can do so by e-mailing us at info@kinginstitute.org.

We have received much feedback concerning the new applications in the TKM Textbook (Volume 3) and the new EMT procedures. We have numerous reports concerning the new Shoulder Sequence, some saying it has helped resolve chronic shoulder pain patients on just the first application. Others say that the procedure for slowing down a rapid heart beat has been consistently effective and long-lasting.

I have been asked how I came up with these procedures. In the past, most were developed by a combination of research, practical application, experience, and trial and error. These latest procedures have taken a very different process, through great inspiration from the Lord.

Some of them I wrote down before I could go to sleep at night. Others woke me up in the night or morning with the urgency to write them down. Some even came while I had delayed flights at the airport, and I would compulsively write them down on napkins or anything handy.

Overall, this past year has produced more new applications than over the past 20 years, and it has been a humbling experience. God is doing some great things in and through this organization, and we are grateful and appreciate your participation and support in helping us help others in their need.

You have a foundational part in the healing and saving of lives. You are a source of hope and help. God will bless you abundantly as you are storing up treasures in heaven.

Your servant in Christ,

Glenn King, PhD, CDN, CN
Director



Editor's Corner

“I can't hear you over the voices in my head”

I have to admit I'm a bit resistant to new technology. I tend to avoid “one hit wonders” that you purchase one day and find it's out of warranty or completely obsolete the following month.

For instance, when I was shopping for a new computer, I kept in mind the advice of several guys working at my Alma Mater's Computer Corner. Of all the computer brand on the market, they noticed that students brought mostly one brand to them for repairs. I won't name the brand here, but I think you can figure out which one. (Starts with a “D,” rhymes with “swell.”)

Purchasing a new cell phone was a daunting task for me, too. I specifically looked for a phone that didn't have a camera or MP3 capability in it. The sales team at Best Buy seemed a little confused when I asked for a simple phone rather than an all-in-one multimedia wonder machine. I admit those iPhones appear pretty neat. But I plan on waiting at least three or four generations before I consider purchasing one.

While I don't immediately embrace new technology, I'm amazed at how life seems to revolve around it nowadays.

Blackberries earned a place of acknowledgement, I admit, but I debate whether they belong on a vacation. My friend, who is an investment banker, had to constantly check into her office with hers during our ski trip in February. While it was handy for her office to reach her on the slopes, it did seem odd to be answering an e-mail with one hand and propping up her snowboard with the other.

I find those portable game consoles hilarious. I've seen kids walk into store displays because of those. I wonder if those are necessarily for their gaming pleasure or my amusement.

But of all the technology out there that is marketed as making our lives easier, I find Bluetooth® perhaps the most ridiculous. Just as the kids with the portable game devices, I marvel at the people who wear those wireless headsets. I see them in the shopping mall, in the bookstore, and in restaurants, and it amazes me how many of the ones I see seem to carrying on conversations with themselves when they are in fact talking on a headset.

We've discussed the health dangers of wireless devices in previous issues of the Journal in terms of harmful electromagnetic frequencies. However, I think drivers should also be added to the list. The headsets and built in Bluetooth® capabilities in cars are marketed as hands-free options to holding a cell phone to the ear while driving, which poses a traffic risk. (And yet I counted seven people still doing this at a stoplight just the other day.)

However, I don't think holding a cell phone up is necessarily the problem, but not keeping one's mind on the road is. Multitaskers will argue, but I think a significant amount of concentration has to go into receiving information by the ears, processing that information, and then formulating and delivering a response by voice, making the primary task of driving not the primary focus. And I'm sure most law enforcement and EMT personnel would agree that most, if not all, traffic accidents happen because one or more parties involved were not paying attention to the driving.

So, I wonder if technology is necessarily better for our health. We try to find “better ways” to use it, as we will discuss in this issue's feature on compact fluorescent lights. While technology does make certain aspects of life better, like the publication of this Journal, perhaps we need to remind ourselves that technology is a tool, not a god.

Christine Dao
Editor

Energy saving lights pose health and environmental hazards

By Christine Dao

Compact fluorescent light bulbs, or CFLs, have gained recent popularity for their energy saving qualities and resultant contribution to reducing greenhouse emissions. However, like all fluorescent bulbs, they contain mercury, a proven neurotoxin as well as an environmental safety hazard especially when it comes to their disposal.

In the US, lighting manufacturers that are members of the National Electrical Manufacturers Association, or NEMA, voluntarily placed a cap on the amount of mercury used in CFLs. Effective since April 2007, NEMA members committed to putting no more than five milligrams (mg) of mercury in CFLs of less than 25 watts and no more than six milligrams of mercury in CFLs of 25 to 40 watts.

Environmentally conscious consumers are encouraged to adopt safer disposal practices for CFLs by either returning used bulbs to the place where they were purchased so that the store can recycle them correctly or taking them to a local recycling facility.

The disposal process often involves crushing the bulbs in a machine that uses negative pressure ventilation and mercury-absorbing filters or

cold trap to contain the contaminated gases. The remaining glass and metal is then packed and shipped to other recycling facilities. Most municipalities have either purchased or are in the process of purchasing such machines.

However, most household users have the option of disposing of CFLs the same way they do other solid wastes, by simply tossing them into the garbage can with other domestic waste. The state of Maine's "safety" standard for mercury disposal is 300 nanograms of mercury to every cubic

meter. Based on the NEMA members cap of five to six milligrams, a single CFL bulb would require 16,667 cubic meters of soil to "safely" contain the mercury within it.

Some institutions, like the Alabama Department of Environmental Management, consider mercury levels over 2 ppm (parts per million) to 1 microgram over one milliliter) hazardous. Based on that limit, landfills containing more than one compact fluorescent light bulb would be considered hazardous.

On the other side of the energy equation, the Environmental Protection Agency estimate that the mercury released from coal power plants to power an incandescent lamp is the same

for a compact fluorescent bulb of the same luminosity for the same period of time. The EPA has promised to implement policies to reduce mercury emissions, requiring plants to reduce their emissions by 70 percent by 2018. If CFLs are recycled properly and the mercury in them reclaimed, the equation tilts in favor of fluorescents. If non-coal sources of electricity are used, then incandescents are favored.

But while environmental issues from dis

Some institutions, like the Alabama Department of Environmental Management, consider mercury levels over 2ppm hazardous. Based on that limit, landfills containing more than one compact fluorescent light bulb would be considered hazardous.



fyj good info to know!

Study suggests link between attention problems and early TV viewing

A long-term study found that watching television more than two hours early in life can lead to attention problems.

The study, published in the journal *Pediatrics*, followed more than 1,000 children born in Dunedin, New Zealand between April 1972 and March 1973. Between the ages of 5 and 11, the children watched an average of 2.05 hours of weekday television. The 13 to 15 age group watched about 3.1 hours a day.

The children showed symptoms of attention problems in adolescence, wrote the study's author, Carl Landhuis of the University of Otago in Dunedin.

It is possible that the rapid scene changes of many TV programs may overstimulate a child's developing brain, which can make reality seem boring by comparison. TV also doesn't require as much concentration, such as reading, games and sports.

While the study does not prove that TV viewing causes attention problems because children prone to attention problems may be more likely to watch television than others.

However, previous studies have linked the sedentary habit of TV watching to other childhood problems, including obesity and diabetes. Up to 98 percent of TV ads promoting foods to children were either high in fat, sugar or sodium, a University of Illinois of Chicago study found.

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Pulse Puzzle

Pulse puzzle is a regular part of each *KIMA Journal* issue for graduates of Level 2 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 17**.

W 5th	Lg. Int.	Sm. Int.	5th W
5th	Lung	Heart	5th
W 5th	ST	GB	5th W
5th	SP	LV	5th
W 5th	DIA	BL	5th W
L 5th	UMB	KD	5th L

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



Different straight ballast configuration compact and regular fluorescent bulbs. Image courtesy of Wikipedia.com.

caused by X-rays, radiation therapy for cancer treatment and tanning beds, all of which use fluorescent bulbs.

Another and perhaps more serious health hazard involves mercury leakage from broken bulbs. Cracked ballasts will release the mercury into the air and can be inhaled.

Mercury is a neurotoxin that tends to settle in fat cells of organic tissue, such as lipids that make up most of the brain. It has a half-life of 35 to 90 years inside most human tissue and 25 years longer in the brain.

Classic symptoms of mercury poisoning are Alzheimer's disease, kidney dysfunction, autoimmune disorders, infertility, Polycystic ovary syndrome, neurotransmitter imbalances, food allergies, multiple sclerosis, thyroid problems, chronic fatigue, and many others.

posal may have a few concerned, even fewer understand the health implications even before the bulbs burn out.

All fluorescent lamps operate by using electricity to excite molecules in a gas, such as mercury or argon. The resulting plasma produces short-wave ultraviolet light, which is absorbed by the phosphor-containing powder and re-radiates the energy to produce visible light. Fluorescents require ballasts, and the most common are tube fixtures with the ballasts within them. In compact fluorescent light bulbs, the ballasts are inside the coiled fixtures that are made to fit into most incandescent sockets.

Malfunctioning fluorescents can cause radiation burns. Higher voltage bulbs, like the kind used in school gyms and other large spaces, can crack and expose people to short-wave radiation. Similar burns can be

Malfunctioning fluorescents can cause radiation burns. Higher voltage bulbs, like the kind used in school gyms and other large spaces, can crack and expose people to short-wave radiation.

Mercury gas can also hinder the immune system's ability to fend off other diseases. And once in the system, mercury molecules are very hard to remove. Other notorious places to find high concentrations of mercury are in mercury tooth amalgams as well as the methyl mercury solution used to preserve most common vaccines.

With the energy situation in the world today, energy and money-saving properties of fluorescents are attractive over incandescents and halogens, both of which have their own environmental and health disadvantages.

There's no easy solution, other than simply doing

away with all light bulbs and therefore all sources of harmful electromagnetic frequencies. We can help, however, by implementing more conservation habits. Turning out the lights when not in use will not only save money on the electric bill, but it can also help your health. 🌱

On the left is a compact fluorescent flood light popular for use outdoors. On the right is a compact fluorescent straight bulb that, like the spiral configuration is used mostly indoors. Images courtesy of Wikipedia.com.



Sequence for Revitalizing the Arm (Paralysis)

This diagram illustrates left application only. Refer to illustration.

LEFT Sequence, sit on the **Left side** of the body.

Procedures For Hands	(to)	Positions On Body E.S.'s
step 1 right and left	to left	wide 22 (place all finger pads in cuff)
step 2 right and left	to right	23
step 3 right and left	to left	11
step 4 right and left	to left	thumb, index, middle, ring and little fingers (one at a time)
step 5 right and left	to left	9
step 6 right and left	to left	thumb, index and middle, then ring and little fingers
step 7 right and left	to right	10
step 8 right and left	to left	thumb
step 9 right and left	to left	9 on scapula
step 10 right and left	to left	thumb, index and middle, then ring and little fingers
step 11 right and left	to left	10 on scapula
step 12 right and left	to left	thumb, index
step 13 right and left	to left	4
step 14 right and left	to left	19
step 15 right and left	to left	3
step 16 right and left	to left	26
step 17 right and left	to left	palm center

RIGHT Seq. sit on Right side

- 1 L - R W-22 (all in cuff)
- R - R 23
- 2 L - L 11
- & R - R T, I, M, R, L (each)
- 3 L - R 9
- & R - R T, I, M then R & L
- 4 L - L 10
- & R - R Thumb
- 5 L - R 9 scapula
- & R - R T, I, M then R & L
- 6 L - R 10 scapula
- & R - R T, I, M then R & L
- 7 L - R 4
- & R - R 19
- 8 L - R 3
- 9 L - R 26
- & R - R Palm

This application is most effective when applied by another person.

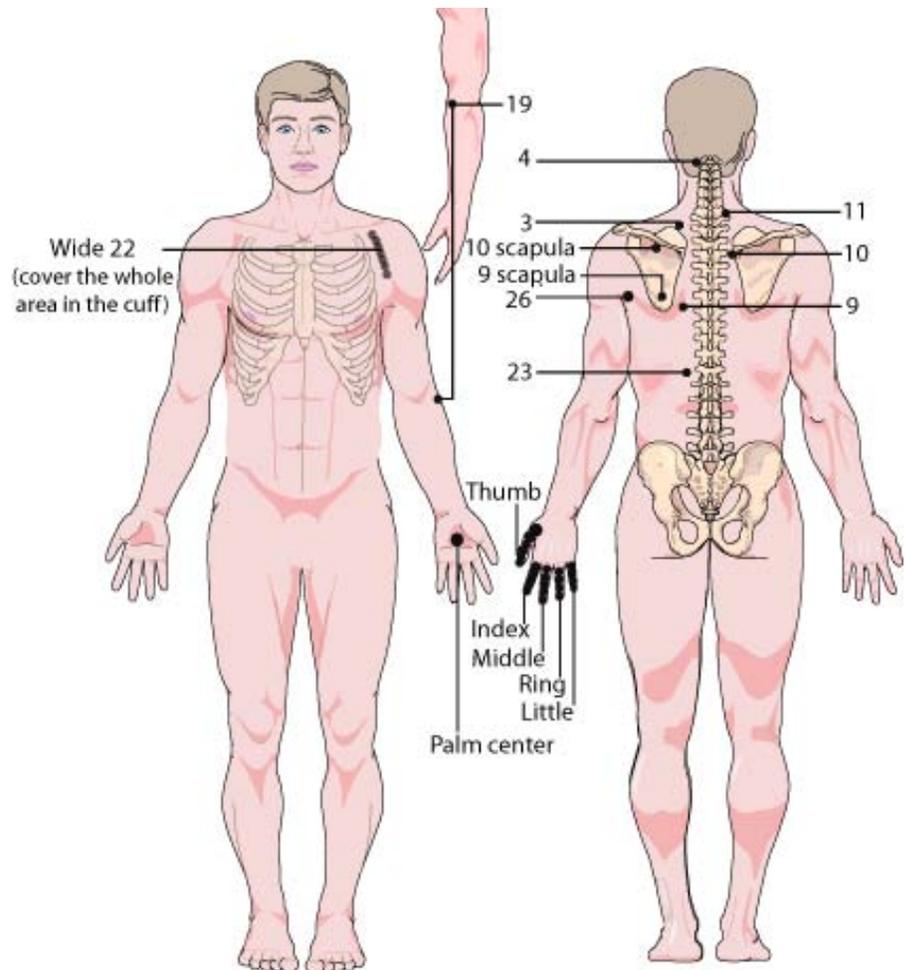
Preparation: Sit, or preferably lay, in a comfortable position. For best results remove all metallic objects from the body and from clothing. One hundred percent cotton clothing is best suited. You may position pillows beneath arms as needed in order to completely relax while applying each step of the procedure.

Length of time: Hold each step (*location*) a minimum of four to five minutes or up to twenty minutes if needed.

Application: Use the finger pads (*palm side down*) of your first three fingers (*index, middle, and ring*) on any location. Or, you may use all finger pads if you wish.

Always hold two locations when applying any step.

Important: Pressure is not necessary to achieve results, in fact, it may inhibit the process. Only contact is needed to stimulate energy circulation.



This sequence is primarily a Third Stratum relation for either arm. The Gallbladder and Liver Energy correlations are related to the proper functioning of the **blood and eyes** and interacts with Mediator Energy. It stimulates **Ascending and Descending energy**, helping everything in the body. It relates to all five strata through finger correlations. The stratum correlations are related to 3rd Stratum, but there are relations to all five strata (listed on the next page).

Symptoms and Relations to the Shoulder

The Stratum color is **Green** and the Energy Sphere color relation is **All inclusive**
The tone or musical note correlation is C
The emotion is **Anger**
The Energy Sphere is relation **#16 -#22 - Ascending and Descending energy**
The related finger or digit is **Middle**

Mental/Emotional:

Mental stress (All), especially repressed anger and/or frustration
Frustration (especially right shoulder = 3rd stratum)
Performance oriented (especially left shoulder = 5th stratum)
Stubbornness / willfulness - include all 5th Stratum applications
Repressed emotions (chronically and or severe)
Rigidity (3rd and 5th strata)

Physical:

Arm pain, injury or paralysis (Left) - include Small Intestine, Mediator and Heart Sequences
Arm pain, injury or paralysis (Right) - include Gallbladder, Mediator and Liver Sequences
Carpal tunnel syndrome - include Large Intestine Sequence
Scapula (shoulder blade) issues - include Mediator, #9, #10 and Bladder Sequences
Rotator cuff issues - include Large Intestine, #23,25 and Mediator Sequences
Digestion - include #23-25, #9, Stomach and #5,6,7,8 Sequences
Heart palpitations (usually related to left arm) - include #15, #13 and Diaphragm Sequences
Neck pain - include #11,12, #4,12,11,3, #9 (opp) and Umbilicus Sequences
Thumb issues - include Include #10 (opp), #9 (ss), Stomach and Large Intestine
Parkinson's disease (when shoulder) is pulled in or has pain) - include Small Intestine, Heart, #9, #13 and Mediator Sequences
Accident prone (left shoulder related) - include Small Intestine, Heart and #13 Sequences
Sinus issues - include #9, #20,21,22 and Mediator Sequences
Numbness (arm or shoulder) - include #24,26 Sequence
Joint pain (shoulder or elbow) - include R&R 3rd Stratum, Q. hold E.S. #5 and #16
Liver - include R&R 3rd Stratum and Liver Sequences
Nerve pain (shoulder or arm) Spleen - include left #14 and Spleen Sequences
Limbs (ss arm or leg) - include Mediator, Large Intestine and #3 Sequences
Rigid body - include 5th and 3rd Strata applications
Stiff shoulder - include #10, Mediator, #16,17,18,19 and #5,6,7,8 Sequences
Raised shoulder - include (opp) #5,6,7,8, (opp) #8 and Umbilicus Sequences
Shoulder cupped (pulled forward in an introverted posture and does not lay flat when lying down) - include Umbilicus, #10, #22 and #20, 21, 22 Sequences

Important:

Sequence helps (ss) energy. For example, left sequence helps left energy.
A Quick Step for arm pain, stiffness or paralysis: Place one hand's fingers on #9 and thumb on #26 while holding each finger (from thumb to little finger) with the other hand.

VITAL: This sequence is the primary source of help for all arm or shoulder projects. Plus, anything related to the rotator cuff, elbow, wrist or finger projects are aided by this sequence.

Killing Pain does not resolve it

By Christine Dao

Americans' use of painkillers has nearly doubled, according to an Associated Press analysis of statistics obtained from the Drug Enforcement Administration. Sales on five major painkillers rose 90 percent between 1997 and 2005.

More than 200,000 pounds of the five major painkillers codeine, morphine, oxycodone, hydrocodone and meperidine were purchased at retail establishments in the latest year represented in the data. The total averages out to more than 300 milligrams of painkillers given to every person in the country.

Of the five, oxycodone, the chemical used in OxyContin, is responsible for most of the increase in usage. "Hillbilly heroin," as it's also known for being bought and sold illegally in Appalachia, increased nearly six-fold between 1997 and 2005. Its highest rates of sale now occur in places such as suburban St. Louis, Columbus, Ohio and Fort Lauderdale, Fla.

Retail sales of hydrocodone, sold mostly as Vicodin, are the highest in the nation. Nine of the 10 areas with the highest per-capita sales are in mostly rural parts of West Virginia, Kentucky or Tennessee.

The AP analyzed DEA figures that include sales and distribution of drugs across the country by hospitals, retail pharmacies, doctors and learning institutions. Federal investigators study the same data to try to identify illegal prescription patterns.

One major reason cited for the increase is an older population. The need for pain medication increases with age. In 2000, 35 million Americans were older than 65. The Census Bureau estimates the number of elderly to reach 54 million by 2020.

Another reason is the unprecedented drug marketing

campaigns. Congressional investigators found that drug manufacturers spent \$11 billion on marketing in 1997 and nearly \$30 billion in 2005. The marketing schemes proved successful, for profit margins in the leading companies routinely have been three to four times higher than other Fortune 500 industries.

And finally, pain management philosophy has shifted over the past three decades. Doctors once advised patients to view pain as part of the healing process. But since the early 1980s, many are now viewing pain management as a part of overcoming illness.

Pain management, however, does not resolve the pain, and those with chronic pain may have to rely on pain medications constantly. Painkillers only seek to suppress

symptoms, while pain itself should be viewed as an indicator to prompt sufferers to address deeper and more seri-

More than 200,000 pounds of the five major painkillers codeine, morphine, oxycodone, hydrocodone and meperidine were purchased at retail establishments in the latest year represented in the data. The total averages out to more than 300 milligrams of painkillers given to every person in the country.

ous causes.

Pain is a symptom that the human body experiences to alert us to a more serious cause. Most of Western medical philosophy, based on a biochemical approach to illness, only aims to treat pain symptomatically, and therefore true health restoration cannot be found on the biochemical level. However, a biophysics approach can address the cause, and more often than not the cause can be traced to emotional sickness.

While the United States and other industrialized nations boast some of the most advanced medical knowledge and technology, the citizens are some of the most emotionally sick people on the planet, as suggested by increased anti-depressant over the past few years.

Most of the chronic pain that we experience has emotional correlations, emphasized when combined with a less than healthy lifestyle of poor diet and little to no exercise.

Dependency and rogue pharmacies

Most painkillers carry the risk of dependency, and people addicted to them have to find creative methods of obtaining medication. In the Information Age, illegal online pharmacies have sprung up, preying upon greed and/or financial instability of both legitimate doctors and pharmacies.

Joseph Rannazzisi, deputy assistant director of the DEA's Office of Diversion Control, described how rogue pharmacies work in a testimony before the Senate Judiciary Committee in May 2007. Web sites

approach doctors, usually retired or in debt, seeking extra income. The doctors write the prescriptions after reviewing online questionnaires filled out by the customers, and they are paid between \$10 and \$25 per prescription they write.

The sites then approach small pharmacies, targeting the struggling ones, to fill the prescriptions and pay them an additional fee above the cost of the medication.

Shipments from rogue pharmacies were once so frequent in Appalachia that shipping companies had to add trucks to their routes. Law enforcement has cracked down on such deliveries, yet hundreds of illegal prescriptions are filled everyday for medications such as hydrocodone, sold mostly as Vicodin, according to a recent study by the National Center on Addiction and Substance Abuse at Columbia University. The center also found that in May, 581 Web sites offered controlled prescriptions drugs, compared with 492 in 2004.

A Drug Enforcement Administra-

tion investigation found 34 rogue pharmacies had dispensed more than 98.5 million dosages of hydrocodone alone last year in the U.S., enough to give 410,000 patients a one-month supply.

While prescriptions can be legally ordered online, illegal pharmacies ignore rules that legitimate pharmacies follow, and the differences can be confusing. In an effort to distinguish the two, the National Association of Boards of Pharmacy created a voluntary verification process for online pharmacies to show that they

Shipments from rogue pharmacies were once so frequent in Appalachia that shipping companies had to add trucks to their routes.

comply with the law and only ship prescriptions to patients who have been examined by doctors. So far, 13 sites have received verification, including those of Walgreen Co. and CVS Caremark Corp.

It's impossible to know exactly how many sites exist, with estimates from a few hundred to well over a thousand, and sites, mostly portals that point to anchor sites that sell the actual drugs, can shift and operate under different URLs quickly. The National Center on Addiction and Substance Abuse study found 187 anchor sites, 157 of which did not require prescriptions.

In addition to feeding addictions, another danger experts warn about is that customers don't always know what they are getting. Almost half of the anchor sites were located outside of the United States, where safety standards for medicine are often different. Cases of deaths from overdoses on drugs obtained from pharmacies in other countries and without prescriptions have been

reported.

Some states have passed laws to try and curtail the import of illegal pharmaceuticals. Since the passage of a 2005 law banning drugs from unlicensed online pharmacies, the Kentucky Bureau of Investigation has seized more than \$1.5 million worth of controlled drugs.

Popular painkillers

The most well known painkiller is morphine, the active agent in opium. Named for Morpheus, the Greek god of dreams, morphine directly acts on the central nervous system to relieve pain, particularly at

the synapses of the nucleus accumbens.

In the management of severe pain, no other narcotic analgesic is more effective or superior to morphine. However, the drug is extremely addictive compared with other substances, and physical and psychological dependences develop very rapidly.

Due to morphine's habit-forming nature, other painkillers have been developed. However, the risk of developing dependencies on them is still present.

Hydrocodone is a semi-synthetic opioid derived from two naturally occurring opiates, codeine and thebaine. It relieves pain by binding to opioid receptors in the brain and spinal cord, and common side effects include dizziness, lightheadedness, nausea, drowsiness, euphoria, vomiting and constipation. Less common side effects include allergic reaction, blood disorders, changes in mood, mental fogging, anxiety, lethargy, difficulty urinating, spasm

of the ureter, irregular or depressed respiration and rash.

Hydrocodone can lead to physical and psychological addiction, dependent on biological differences varying from person to person. The substance, when sold commercially in the U.S., is always combined with other medication, such as aspirin, ibuprofen and certain antihistamines. Pure hydrocodone is not offered by any U.S. drug companies.

Hydrocodone is also commonly combined with acetaminophen, which is said to increase the effectiveness of the drug without increasing the risk of opioid-related side effects, such as nausea, constipation and sedation, as well as helping limit the potential of drug abuse. However, acetaminophen in large quantities is fatally toxic to the liver. Addicts consuming 10,000 to 15,000 milligrams of acetaminophen in a 24-hour period typically suffer from hepatotoxicities. Doses ranging from 15,000 to 20,000 milligrams a day can be fatal. Still, users are only a simple 30-minute process away from removing most of the acetaminophen from the hydrocodone solution.

Viewing pain as a friend instead of a foe

Pain is congested energy, or energy that is not circulating properly. It can be both a sign of constructive and destructive efforts. We encourage you to read Dr. Jim Robertson's feature "Pain: Friend or Foe?" in the KIMA Journal Issue 7.

A constructive effort is demonstrated by athletes when they experience pain as they train in their respective sports. As they keep working and training, the pain starts to lessen, and soon the benefits of the training far outweigh the pain. An example of a destructive pain is if you have ever burned your hand on a hot surface, such as a stove or a clothes iron. Chances are it was not a pleasant experience. The pain from the burn alerted you quickly to remove your hand from the hot surface in order to not damage your hand more seriously.

The same concept applies to all forms of pain, even chronic pain. But rather than view pain as a friendly "alert system," many of us try to treat the pain so that we can't feel it, rather than resolve it, which can be dan-

gerous. If pain weren't unpleasant, all of us can easily be superstar athletes. If pain hadn't alerted you to the danger of the hot surface, then you probably wouldn't have reacted and your hand would burn to a crisp.

Habitual use of painkillers more often than not accompanies the presence of chronic pain, or pain that is experienced overtime but never addressed on the cause level. Chronic pain sufferers, as the current pain management philosophy encourages them, "deal with it" in a variety of ways, from constantly taking pain medication to simply ignoring it.

As you can see, painkillers only mask the problem by affecting our natural God-given "alert systems" in our nerves. When we experience pain, our nervous system is properly functioning, alerting us of a problem. People without functioning nervous systems are not so fortunate.

Many leprosy sufferers, who are still present in many places around the world, have few to no nerve endings and therefore no ability to feel pain because of the physical decay they experience from the disease. Bits of their fingertips can break off little by little and they can't feel it because their alert system is not functioning.

A thorough understanding of the human bioelectromagnetic system, as well as a look at our respective lifestyles through a fresh pair of eyes, can help us trace the cause for the problems and more effectively address them. And based on empirical observation, almost 70 percent of a chronic disease must be resolved before any noticeable relief is experienced.

All TKM® works with pain to one degree or another. But the #20 Sequence can address all pain issues, from mild to severe. With persistent and diligent work, pain issues can resolve in a relatively short amount of time. However, we are each responsible for our health, and the choice is up to us whether we want to resolve the pain or not.

Thankfully, we have a loving and mighty God ready and willing to help us every step of the way as well as the support and encouragement of family and close friends. The best medicine doesn't come in the form of a capsule, tablet or syrup, but it comes from within (Proverbs 4:23 and 17:22). 🙏

Watch over your heart with diligence, for from it flow the springs of life.

- Proverbs 4:23

A joyful heart is good medicine...

- Proverbs 17:22

Testimonial Corner

Your stories...your victories!

Muscular Dystrophy

This is a “praise the Lord” report! We have been working on a nine year old boy for muscular dystrophy, and he had his semi-annual check up yesterday and has improved in every category of testing. He has been in a slow but steady decline in his physical and behavioral check ups since 1999. This was the only time that “any” improvement has been seen and the doctors stated that he must have had an “off” day at the previous testing. Fortunately, we know that God has touched that young man in a way the doctors could never do.

He had been walking on his toes for the past three years and is now walking with his heels again. He had a bed wetting problem that has gone, behavior problems in school that are gone, and sleep issues that are gone. He has started to grow even though his mother took him off the prescribed hormones that had not been working anyway. His diaphragm was so contracted that he had a “pidgeon” chest and that has even flattened out quite a bit.

The doctors were upset that the mother had taken him off the growth hormones and steroids and even suggested they could get him a scooter if the parents would like. And he had just ran down the hall during the testing. The doctors at his previous check up had stated that by the time he had this check that he would probably need assistance of some sort in walking, but the boy is walking fine, running a little and climbing stairs normally.

The mind set of the doctors was that he could not improve and it seems they refuse to even acknowledge this right before their eyes. God does very good work don't you think? We are glad He let us watch while He did the hard part.

- Jana and Roy Smith

Learning and helping along the way

My mom has arthritis, constant back pain, a hip replacement from seven or eight years ago and then surgery at lumbar 4 and 5 two or three years after that. She had her appendix removed at age 12 and her gallbladder removed sometime in her 30s, as well as a hysterectomy, varicose veins stripped, and her tonsils and adenoids removed. And her upper teeth had all been pulled when she was in her 30s.

She had a heart attack about 10 years ago, and she is currently dealing with a right torn rotator cuff.

I have been begging her to not have surgery. Her left shoulder hurts alot since she is favoring the right one. Oh, and she broke her tail bone as a teenager. She has lots of allergies to pollen and a few food allergies. With all these problems, I am so thankful that she is alive and not wheel chair bound. But She is probably addicted to painkillers. She is on other prescriptions for blood pressure and now on Plavix. Probably, some other stuff too.

She is unable to do the Median Sequence because of her shoulder. But I have encouraged her to hold her fingers for five minutes each instead. She has done that every day since the end of January. She also holds her E.S. #15's for 10 to 20 minutes each day. I am kind of embarrassed to say the next one as I have no idea if it has helped, but I told her to hold her right E.S. #22 and her right E.S. #15 hoping that it would help the right torn rotator cuff. Because of her arthritis in her hands, it is difficult for her to lay her finger pads down. So all this is done with her finger tips.

My mom and dad have been my special projects to help me learn TKM®. They have been very willing and have seen results. I have worked lots of Third and Fifth Stratum especially at the beginning. I have used the 3rd MOC several times and lots of other sequences. I have worked on every Stratum on my mom at one time or another. Just recently, I was trying to figure out the Chest, Waist, and Hip stuff and how it correlates with the pulses and had been using the combination sequences on my mom.

My mom is now home from the hospital. I checked her pulses and they were 5th Stratum with 5th and 3rd being silent at deep. My husband and I worked on her together. He used the #5,6,7,8 Sequence, and I used the Umbilicus and Gallbladder. At the end of the session, 5th and 3rd were singing with the rest of the choir, still an underlying current of 5th Stratum but even.

I am learning and have lots to learn. I am sure that I get 5th and 2nd textures and tones mixed up at times. But, I am grateful for this method and I give thanks that I don't have to know it all to have a good effect! It gives me confidence to just decide to do something and know it will help somewhere! I do long for better understanding so that I can be more effective. As far as body bio goes, I need to learn more! It's something I am very interested in. Thank you so much!

- Andrea

Continued on page 20.

E. coli scares and how to deal with food poisoning

By Christine Dao and Glenn King, PhD, CDN, CN

Bagged lettuce testing positive for *E. coli* prompted a mass recall and triggered produce fears in May 2007, almost a year after a nationwide spinach scare.

Dole Food Co. voluntarily recalled 88 cases, or 528 bags, of Hearts Delight salad mix distributed in Canada and 755 cases containing 4,530 bags from the U.S., a company spokesman had said. The recall affected packages sold in Ontario, Quebec and the Maritime Provinces in Canada as well as in Illinois, Indiana, Maine, Michigan, Mississippi, New York, Ohio, Pennsylvania and Tennessee.

Dole contacted the FDA the night of September 16 as soon as the company received word of a contaminated bag in Canada. The FDA and the Canadian Food Inspection Agency said they would work with Dole to try to find out how and where the product picked up the bacteria.

The romaine, green leaf and butter lettuce hearts used in the blend were grown in California, Colorado and Ohio before processing at Dole's plant in Springfield, Ohio on Sept. 6, according to the spokesman.

Last year, an *E. coli* outbreak traced to bagged baby spinach from Dole was blamed for three deaths and making hundreds of others ill across the U.S. Officials later identified a central California cattle ranch next to spinach fields belonging to one of Dole's suppliers as the source for the bacterium.

E. coli, or *Escherichia coli*, was discovered in 1885 by Theodor Escherich, a pediatrician and bacteriolo-

gist. The Gram-negative, rod-shaped bacteria are one of many types of bacteria known as "gut flora," located in the lower intestines of mammals. When in the small intestine, it helps in food absorption and vitamin K production. In the large intestine, it helps in waste processing. The strain O157:H7 is one of hundreds that causes illness in humans.

Since *E. coli* aren't able to sporulate, treatments such as pasteurization or even boiling is sufficient to kill the bacteria. *E. coli* prefer the warm

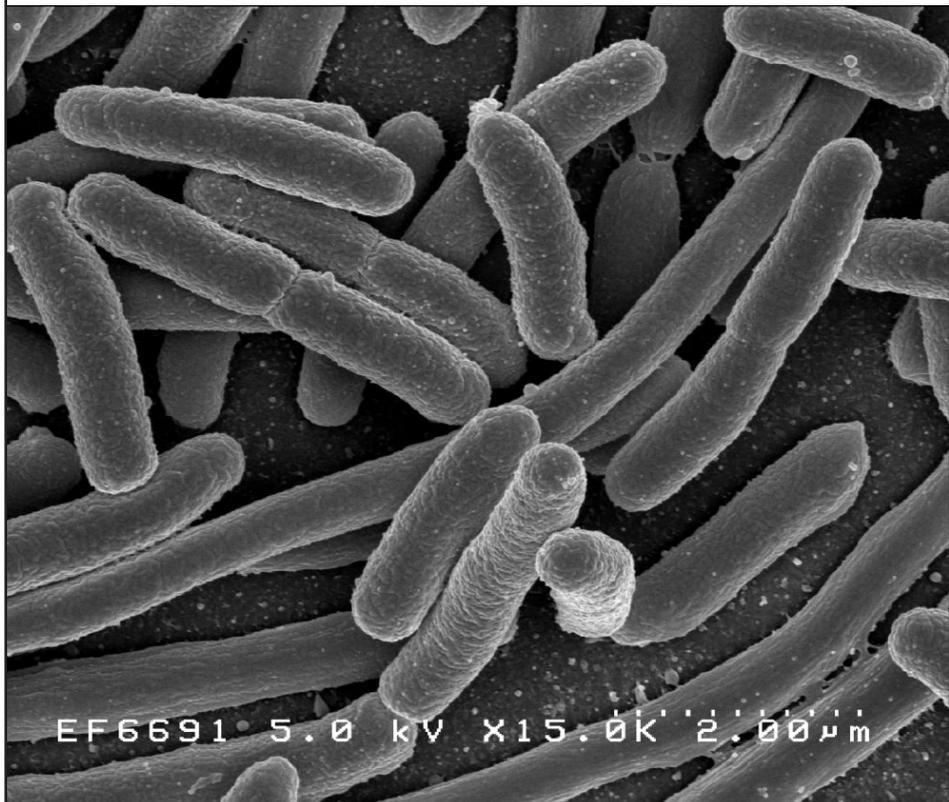
conditions found in mammalian intestines and similar environments rather than the cooler temperatures in soil and other environments.

E. coli can be responsible for a variety of intestinal and extra-intestinal complications, including gastrointestinal problems, urinary tract infections, diarrhea, meningitis and others. People with particularly weaker immune systems and other digestive problems are more susceptible. Other factors, such as poor hygiene and not washing hands thoroughly after using the restroom, can also help the bacteria spread.

Certain strains of the bacteria, such as O157:H7, O121 and O104:H21, are toxic and can cause food poisoning usually associated with eating cheese and contaminated meat. Meats

Last year, an *E. coli* outbreak traced to bagged baby spinach from Dole was blamed for three deaths and making hundreds of others ill across the U.S.

Scanning electron micrograph of Escherichia coli, grown in culture and adhered to a cover slip. Courtesy of Rocky Mountain Laboratories, NIAID, NIH.



often become contaminated during or shortly after slaughter or during storage or display.

The *E. coli* O157:H7 strain is notorious for causing serious and even life-threatening complications.

The usual countermeasure against *E. coli* includes cooking meat until it reaches an internal temperature of 160 degrees Fahrenheit, or “well done.”

Slaughtering and butchering methods to make sure the animals’ colons aren’t punctured are practiced as well, but mistakes can get overlooked in inspection.

Bacteria’s resistance to antibiotics is a growing problem, and phage therapy, or treatment with bacteria-eating viruses, has met some resistance by critics, despite the FDA’s recent approval of using bacteriophage mists and washes on pre-packaged meats as well as on animals that will be slaughtered for human consumption.

What to do for food poisoning by *E. coli* contaminated food

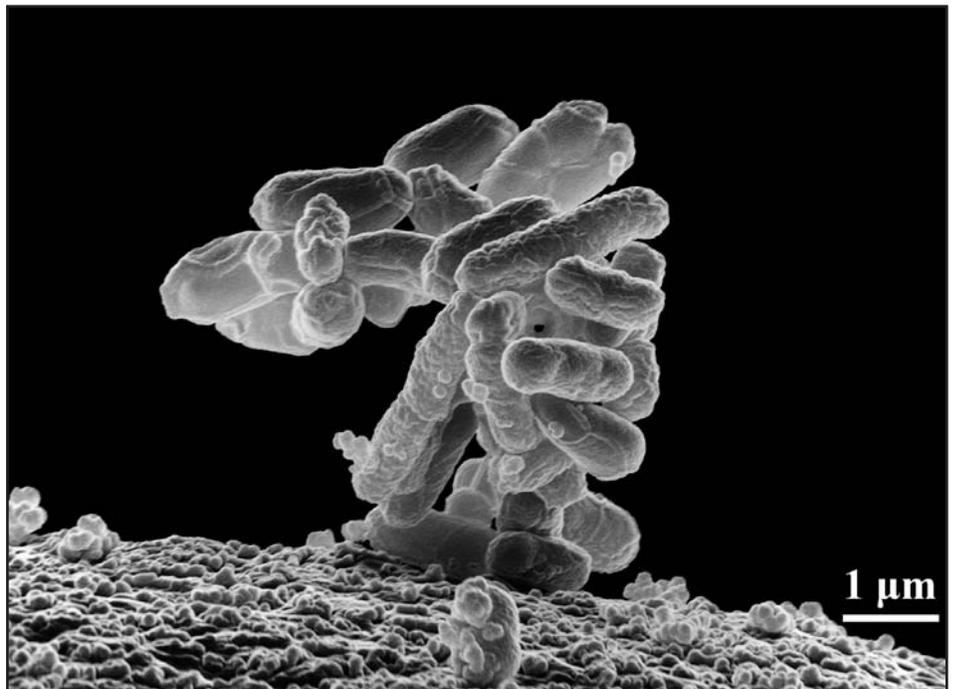
If you or someone you know should become

infected with *E. coli* by food poisoning, the first thing is to try and regurgitate as much of the contaminated food as possible.

Then take a heaping teaspoon of buffered Vitamin C powder (Life Extension or a similar brand) mixed in about four to six ounces of clean room temperature water.

Then drink more clean water to help get the Vitamin C absorbed into the system faster and to help flush out more of the harmful bacteria.

If you have essential oils available, take peppermint (at least three to five



*Low-temperature electron micrograph of a cluster of *E. coli* bacteria, magnified 10,000 times. Image courtesy of the Agricultural Research Service, a research agency of the United States Department of Agriculture.*

drops), cinnamon (two drops), lavender (2 drops), tarragon (2 drops), patchouli (2 drops) and rosemary

(water and electrolytes). We recommend only vegetable soup and slow cooked chicken broth as well

***E. coli* can be responsible for a variety of intestinal and extra-intestinal complications, including gastrointestinal problems, urinary tract infections, diarrhea, meningitis and others. People with particularly weaker immune systems and other digestive problems are more susceptible.**

cineol (2 drops) placed in a capsule or any emptied-out capsule available and wash down with water. You could take the peppermint separately without a capsule to leave more room in the capsule for the other oils. Take another capsule three to four hours later.

Use the TKM® Spleen, #15 (left then right) and then #3 (left then right) Sequences. After this, apply Stomach, Kidney and Liver Sequences followed by another Spleen.

The affected person will need plenty of sleep and plenty of liquids

as other easy-to-digest foods along with more fluids. Plenty of rest and TKM® can also help all the pulses to balance.

Preventative medicine and a healthy immune system are the best medicine to combat bacteria like *E. coli*.

You can keep your immune system strong through healthy diet, regular exercise and detoxification.

For effective immune-system-friendly protocols, we recommend you consult your trusted health practitioner. 📍

Missions: Delta Junction, Alaska



Whitestone Farms community. Photo courtesy of Mike McCorkle.

In September, Dr. Glenn King and a small group of dedicated TKM® students traveled to Whitestone Farms near Delta Junction, Alaska for a TKM® missions trip. Whitestone Farms is a small community dedicated to caring for one another in the rugged country of the United State's last great frontier.

We have assembled some of the comments and images here from this wonderful TKM® training experience.

If I were to sum up my impressions of the TKM® class in two words, they would be “astounding” and “life-changing.”

We were a motley crew; most of us from Whitestone, a massage therapist from Fairbanks, a former community member now operating a health clinic in Georgia, and an assortment of friends from other communities.

That first day at 8:00am we assembled in the main room of the school, many in trepidation as to whether or not we would be able to assimilate the enlightenment coming, and our intensely concentrated teaching/learning encounter began.

Dr. King was a sensitive and engaging teacher. He could sense when we needed time to let the information

settle into our hearts, so he would tell another amazing story of complete recovery from cancer, seizures, coma, bone injuries, blood poisoning, and on and on. In the middle of class, he would slip in some personal ministry for several of us -- gently building our confidence and building our faith.

As the days went on and we became more comfortable with each other, the exchanges became freer, but always Dr. King held us to principles, brought us back to the basic premises, drilling us and giving us the tools he knew we would need to know how to use once he was gone.

continued

“You’re at the scene of an accident; you’re the first responder; if you don’t do something, they’ll die. So, what do you do? What do you do?” he had said.

The “hand on” times I can only describe as holy. We genuinely ministered to one another. Visions came. I believe seeds of deep healing were planted.

So now here we are, no longer on our own, because we are connected to all of you out there, nevertheless having to trust God for direction as we help one another find healing. On the last day of class, Dr. King gave us lots of recipes. But we’re beginning to know just how vital it is for us to trust God’s moving through each of us individually to trust what we’re feeling in the pulses and choose the sequences that will hit that day’s bull’s eye, sequences chosen from the amazing smorgasbord laid out for us.

The class was a time apart, a world of its own enclosed in a five-day parenthesis. We came away exhausted, overwhelmed, inspired, genuinely daring to believe that against the proclamations of doom by the medical profession over our incurable diseases, we are God’s projects that can be eternally helped and healed. May we all have fluff with tone.

Blessings,
Pam Selvaggio

This was a remarkable time for me. The five days flew by. There were 20 of us, not including the support team that came with the Kings: Pam Gorman, Mike McCorkle and Christina Jandecka.

What a group! There was a continual flow of questions in an attempt to extract as much understanding as possible in the time provided. After the class was over and the crowds had left, the questions that could have been asked began to surface.

Now what? It was just wonderful to see all the manifestations of the testimonials given during the class time when laying hands on one another. We took one step at a time.

Dr. King and Hillary set a tremendous atmosphere for learning. They worked together beautifully.

Hillary set a secure atmosphere for those being worked on. She was quick to meet each situation as the need required. She wrapped her

arms around those in need of comfort.

Christina kept records for the patients treated. Pam coordinated the patients coming in, rescheduling and facilitating communications. She even had some time to visit with family.

Mike was a tremendous constant. He worked on one situation after another. Mike, Christina, Hillary and Pam were the ministering team. Such a peace ministered hope to each man, woman or child.

During a break, I quietly walked down to the lower floor to see what was happening. There were at least four tables set up on each side of the room. It was wonderful to see the faces at rest of those being ministered to with hands-on applications. The atmosphere was heavy with washing and receiving. It was a magnificent sight to observe. Our hope is that we will not remain the same. Our thanks to the team. We are grateful to become a part of this team.

About a month before the class, I heard, “Enlarge the place of thy tent, and let them stretch forth the curtains of thine habitations” (Isaiah 54:2 KJV). We are in the process of doing this.

Sincerely,
Anne Hayes

We were recently privileged to have Dr. Glenn King teach an introductory TKM® class to a handful



of students in Delta Junction. Most of us in the class were starting with only a sketchy knowledge of TKM. By the time the classes were finished, we felt, well, exhausted.

However, we walked away with a much clearer understanding of the foundation of TKM, and it laid the much-needed groundwork for treating root projects rather than just symptoms. Not a day after the classes ended, we found ourselves already employing TKM.

The timing was perfect and we were so grateful for the opportunity to share with us. A heartfelt “Thank You” to Dr. King and all the others who made the time here most enjoyable. We are very grateful for the time invested and are already reaping the benefits.

Sincerely,
Evan Gorman



Dr. King and Hillary meet a new friend at a sled dog kennel in Fairbanks, Alaska. According to their handler, people often rely on these dogs to get through the winter, when snow and ice conditions prevent travel in motor vehicles and by foot. Some of these dogs can travel upwards of 30,000 miles in the first few years of their lives.

Pulse Puzzle Suggestions:

(From page 5)

Observation: This is an interesting set of pulses that, according to the textures, may not be that rare. A closer look could reveal a more precise issue. It is obvious that all 12 pulses have 5th Stratum texture, but there is a clear difference between the surface pulses and deep pulses. All surface pulses are weak and all deep pulses seemed fairly regular in intensity, except for Hip Level which is loud. Combining the body biography with the pulses and possibly including some symptoms would really clarify to what this appears similar.

If I were looking at the body biography, I would look to see if the feet are pointed forward as though the descending energy was not able to ascend. I would also look to see if the feet turned out due to lumbar tension.

Looking at the textures on the ascending level. It appears that the congestion would primarily be Waist Level. This assumption is made from the Hip Level being very loud and all surface pulses being very weak. This leads me to think that there could be a spinal problem in the lower thoracic or upper lumbar. I would ask questions and feel the spinal vertebrae, the energy spheres and the muscle tissue in the area to help narrow the physiological reason for the pulses representing this pattern.

We shall assume that the spinal problem is true, which would also account for much of the 5th Stratum texture present (relating to bone). With physiological difficulties due to possible spinal injury or surgery, it could produce much effort in the person’s life to deal with the situation in moving forward.

Suggestion: I would apply 3rd Method of Correction and Bladder Sequences. Additional applications would depend on if the congested area was the lumbar level or the thoracic level, such as Median (lung version) for thoracic or R&R 4th Stratum for the lumbar section. A Regeneration Sequence would also be good. For the bone correlation and the emotional/mental reason, I would also include a Small Intestine Sequence.

Supplementing your health

By Glenn King, PhD, CDN, CN

Vitamin E One of nature's most effective antioxidants

Vitamin E, technically known as tocopherol, is a supplement from which everyone can benefit. It is a fat-soluble antioxidant, and although it is well known and widely used, different forms and sources can make a great difference in the affect for an individual.

Discovered in 1922 by Herbert McLean Evans, vitamin E is a general name for a whole family of compounds that is one of today's most popular ingredients in oral supplements and skin care products, and for good reason -- it is an indispensable member of the body's antioxidant system. Many cosmetic and skin care products include it as a preservative because of its effectiveness in helping the health and appearance of skin. This is due to Vitamin E's cell regeneration properties, which are not limited to only the skin.

A study published in a 2002 issue of the American Journal of Respiratory and Critical Care Medicine examined vitamin E's affect on children diagnosed with asthma. The participants were given either a daily supplement of a combination of vitamins E and C or a placebo for a period of nearly two years. The lung function of all the children was tested twice a week during the study, and the children taking the vitamin supplement had improved lung functions at the conclusion of the study. The results suggest that the use of a daily vitamin E and C supplement can help to reduce asthma and alleviate the effects of ozone and other harsh air pollutants.

In additional studies, vitamin E supplements had a role in reducing in both systolic and diastolic blood pressure and heart rate in people with hypertension.

The use of antioxidant vitamins, including vitamin E, has shown to help minimize the effect on the body's functions due to aging. Specifically, the use of vitamin E is linked with improving immune system function, reducing fractures and helping to deter Alzheimer's disease. Vitamin E daily can also help to protect against the cognitive decline associated with aging and possible help inhibit cancer cell growth, reducing the risk of cancer and other chronic diseases. This is especially true for people who are aging, or who do not receive adequate nutrition.

A study published in 2003 by the Irvine Vascular Laboratory and Physiology in London showed vitamin E was beneficial to the treatment of diabetic microangiopathy. Vitamin E was examined for effectiveness on free radicals in diabetics. Forty patients with diabetic microangiopathy had a vitamin E mousse applied to one leg once a day, while the other leg was not treated. At the conclusion of the study, it was found that vitamin E mousse improved the microcirculation, decrease freed radicals and subsequently improved metabolism.

Many chronic renal failure patients are treated with regular dialysis and become uremic during treatment, and oxidative stress is evidenced. Studies have shown that vitamin E has a protective effect against DNA breakage, suggesting that vitamin E helps protect against some of the complications of dialysis. Of course, I would recommend avoiding dialysis, if possible.

Vitamin E supplementation has also shown to improve sperm mortality. Studies suggest that vitamin E and selenium can help improve sperm quality, especially for men who are infertile. Vitamin E and regular exercise has also shown to improve physical fitness level, lower oxidative stress, blood pressure and weight. Sedentary adults studied also had reduction in blood pressure and oxidative stress, suggesting that daily vitamin E helps all adults, sedentary or not. Vitamin E also helps to protect against muscle damage after changes in an exercise program and should be used by all athletes. Also, according to the Department of Epidemiology and Surveillance Research of the American Cancer Society, vitamin E is associated with a lowered risk of bladder cancer and can help to protect against bladder cancer.

Do not take more vitamin E than is package. Too much vitamin E could sion, I still never recommend over

The vitamin E most often referred form of vitamin E called dl-alpha-togreat antioxidant benefits and has, in away from the other seven forms of do not recommend synthetics.

Vitamin E labels are often very products labeled "natural" have been synthetic vitamin E or only part natu-E carefully. ConsumerLab.com tests products that don't contain the labeled ucts were tested and are available to

The Dr. Graham Burton, for-Research Council of Canada, is an in-E research. He studied the body's re-to synthetic vitamin E and the study natural vitamin E to synthetics. He



Illustration by Christine Dao.

prescribed for you or directed on the be dangerous. Even under supervi-1,200 IUs daily.

to and sold in stores is a synthetic copherol. This specific tocopherol has the past, shifted much of the research vitamin E. But it is a synthetic, and I

misleading. Some marketed vitamin E tested and found to contain either all ral vitamin E. So choose your vitamin will provide information about some amounts. Thirty-four vitamin E prod-help guide you in product selection. merly a group leader in the National ternationally known leader in vitamin sponse to natural vitamin E compared strongly shows that your body prefers found that:

Natural Vitamin E was retained 5.3 times longer in the brain.
Natural Vitamin E was retained .6 times longer in red blood cells.
Natural Vitamin E was retained 2.6 times longer in the lungs.
Natural Vitamin E was retained 2.4 times longer in the plasma.
Natural Vitamin E was retained 1.9 times longer in the heart.
Natural Vitamin E was retained 1.7 times longer in the muscles.

In nature, eight forms of vitamin E have been identified. And while all forms of vitamin E are active antioxidants inside our bodies, these so-called isomers either belong to a sub-family of four tocopherols (alpha, beta, gamma and delta) or a sub-family of four tocotrienols (alpha, beta, gamma and delta). Extensive published research papers, scientists and nutritionists agree that tocotrienols are a natural more potent vitamin E.

Research focusing on specific tocopherols and tocotrienols, rather than just “vitamin E,” suggest tocotrienols, found in rice bran, palm, and barley oils are a very important part of vitamin E.

Some feel that a form of vitamin E that contains a mixture of tocopherols and tocotrienols may be needed to protect against disease and provide maximum benefits. Check your vitamin label for Gamma Tocopherol, one of the mixed tocopherols not found in most vitamin E supplements although abundant in nuts such as walnuts and pecans. It is also found in peanuts, but due to peanuts’ toxicity, we do not recommend them.

Vitamin E is essential for good skin, vascular system, immune system, anti-aging and so much more. If you are not taking at least 400 IU daily of quality natural vitamin E, then why not? I suggest you add vitamin E to your routine, and therefore add years to your better health! 🍌

Body Biography Corner

Hand Gestures

Hands are our most mobile communicator. They are also a metaphor for how we hold on, reach out, or withdraw from life. The gestures we see, with hands, express ongoing clues as to what is passing through a person’s mind at any given moment, usually unconsciously. In understanding gestures, it is important to notice which hand is being used to make a gesture.

Hiding Left Hand

Meaning: Hiding Something Personal

During a conversation, if a person hides his or her hand, noticing which hand is hidden is important. For example, if the left hand is in his or her pocket, consciously or unconsciously the person may not want to reveal something about his or her relationships, personal life or personal feelings. For clues, look at the context of the conversation or events surrounding this gesture.

Hiding Right Hand

Meaning: Hiding Something External

If a person suddenly hides his or her right hand, the person may be guarding some aspect in his or her external or professional life. For example, if I asked the price of a used car and saw the salesman suddenly put his right hand in his pocket before answering, I would wonder what was not being said. Was there a problem that was being concealed?

E-mail Response Corner

Where Dr. King takes the time to answer your e-mail questions!

Q. I just found your web site and am very interested. I know others who learned your techniques and I would really like to start, also. I know you can't give advice through an email, but, in general, if a person has stainless steel implants in their body, such as the rods used for scoliosis correction, is it advisable to have them removed for purposes of energetic flow? My intuition seems to tell me YES!

If they were made of the newer titanium metal, which does not vibrate under the magnetic resonance of the MRI scan, as does stainless steel, perhaps these titanium ones do not interfere with energetic flow. Can you comment on this matter?
- Elise P.

A. All metallic objects interfere with proper bioelectromagnetic energy circulation and coherence, whether on or in the body. Internal metallic objects interfere to a much greater degree and constantly. Many are stating that titanium is better than stainless steel, but it is not true in re-

lation to bioelectromagnetic energy coherence and circulation. In fact, titanium is far worse for congesting bioenergy circulation.

It is similar to the craze for titanium eye glass frames. They say they are much better and healthier. The only relation to that is they found that there is a slight lesser degree of allergic reactions to titanium, but it has a greater effect on congesting bioenergy (something most scientists do not study and compare).

Q. Recently, my wife and I had Life Screenings. My wife only showed to have Osteoporosis. But, I have an Aneurysm of the Abdominal Aorta (3 cm or greater). The type is Fusiform and the recommendation is to seek advice from my medical doctor. I also have a carotid artery on the left side with Mild/Moderate amount of plaque build-up not affecting blood flow velocities. But on the right side, the findings of possible significance show a large amount of plaque and/or high blood flow velocities. I was encouraged again to see

my primary doctor. The left readings and PSV 92 cm/sec and EDV 26cm/sec while the right readings are PSV 166cm/sec and EDV41 cm/sec.

Do you have any suggestions? Are there any sequences that would help these two situations? Please reply ASAP. Thank you very kindly!

- Richard H.

A. Your cardiovascular condition is very common and very easy to resolve with the right approaches. TKM® is the best and longest lasting approach. I would apply the blood recipe: #15, #23,25, #5,6,7,8, #10 and Diaphragm Sequences. I would apply them in that order and daily. Make dietary corrections, and you can start simply by drinking enough clean water daily (6-8 glasses), eliminate caffeine and alcohol from your diet, start a low cholesterol diet, which includes eating raw vegetables daily (the best ratio is 80 percent raw vegetables to 20 percent cooked). Get exercise daily in accordance with professional guidance. Just with this, you should see dramatic results in about three months.

Continued from page 12.

EMT for slowing heart rate

I tried the new EMT procedure for increased heart rate. For a few years, I have been on a medication that has a side effect of increasing the heart rate to alleviate some slowness from Chronic Fatigue Syndrome, so my heartbeat is quite fast most of the time. (I am trying to get off that as soon as I can, but it's not easy.) When I tried the application, it immediately slowed my heart rate. I held the position for 10 minutes, during which time I felt several small twinges of pain in my left ovary (which is unusual for me). It made me wonder whether this hold focuses on the hormones that regulate the repro system in addition to the heartbeat. I felt that the effect of the EMT lasted about 18 hours, until the next morning.

- Tammy

If you would like to share an amazing story of how TKM® has helped you or someone you know, we would love to hear from you at info@kinginstitute.org! Remember to put "KIMA-testimony" in the subject line.

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

You may register for the Institute's classes / events online at 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® 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 several hundred people who have a passion for The King Institute Method®.

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 bioenergy 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!

Healthy Eating

Gluten-free Cornbread Dressing or Turkey Stuffing

By Hillary King

*healthy eating
for healthy living!*

My husband LOVES cornbread dressing! In fact, he jokes that he can have an entire Thanksgiving meal without the turkey and other dishes if he only had cornbread dressing. But since he doesn't eat gluten, it's been a challenge for the past couple years to find a good gluten-free cornbread dressing recipe. Well, I think I've got it this year, and here it is!

Ingredients needed:

(makes approximately 10 servings)

- 1 box (12 ounces) of gluten-free cornbread flour (I use Pantry brand, but any organic mix will work)
- 1 cup of finely chopped onion
- 2 cups of chopped celery
- 2 beaten eggs
- 2 tblsp. of extra virgin olive oil
- 1 tsp. of sea salt
- 1 tsp. of ground black pepper
- 1 and 1/2 tsp. of dry sage
- 3 cups of organic chicken broth (not canned!)
- 1 tblsp. of potatoe starch

1. Make cornbread according to directions on the package. This can be done the night before.
2. Preheat oven at 350 degrees F. Then in a stainless steel skillet, combine extra virgin olive oil, celery, onions, salt and pepper and cook for five minutes. Then set aside.
3. In a separate glass bowl, combine potato starch and chicken broth.
4. In a large glass baking pan (no need to grease), crumble the already made cornbread into medium-size pieces. Then add in the celery and onion mixture and blend lightly together. Then add in the chicken broth mixture and blend lightly together. Then add in the beaten eggs and blend in lightly.
5. Put pan in 350 degree oven and back for 45 minutes. Then turn off the oven and leave it for 15 minutes.

After it's been in the turned-off oven for 15 minutes, you can then remove the dressing and serve it. The "chunkiness" of the dressing will depend on the size of your cornbread crumbles, so you can make it as chunky or as smooth as you prefer. Also, since this recipe doesn't contain gluten, the dressing tends to crumble and not stick together as most people are accustomed. But I encourage you to try this healthier alternative to a traditional favorite!

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