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Healthy with ADIY ©

Guide to General Asymmetropathy@



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Asymmetropathy Treatment Plan

Analysis of Personal State of Health Divergence from the "Should-state" Treatment with ADIY Reaching the "Should-State"

Preface

Many years of research and empiric testing have prompted us to publish this guidebook on General Asymmetropathy entitled "Healthy with ADIY". By doing so we are now able to introduce it to a larger audience. The guide you have in your hands completes and builds upon the already published book entitled "Der Heimliche Favorit" (ISBN: 3-929338-31-9) which presents all kinds of asymmetropathies and movements to treat them.

Our group of Asymmetropaths, organized in an "Asymmetropathy" working group and professional association (AFA), with the website <u>www.Renner-Methode.de</u> are, in contrast to the basic approach of being interested in sickness, interested mainly with **"being healthy"** and **"staying healthy"** in it's most elementary form.

A determining factor for this healthy state is **movement** in itself. This can be developed even further in saying that the whole world in and around us is in perpetual movement. If this universal movement were to stop, life in all of its forms would cease.

At first sight we live in a symmetrical world where the flora and fauna around us seem wonderfully symmetric. Almost every form of life in the animal and plant kingdom creates symmetrical forms. We perceive these as both well proportioned and beautiful. Upon close inspection of the interior of these seemingly symmetric forms we observe a clearly asymmetric construction. The symmetric outer appearance hypothetically induces a symmetric movement sequence. If this is true then shouldn't the asymmetric core induce, an equally asymmetric part so that it can guide the asymmetric core? The question is; what is more important in nature; the inner or outer symmetric form? In the end human health depends on this question's answer. Since outer symmetric form can only come about with appropriate inner function, it seems wise that inner variations of form be less important than the external ones, and that asymmetric movements with small amplitude be more important than large symmetric ones!

People have been using asymmetric movements since the beginning of time and they have become part of our genetic constitution. They have undoubtedly become part of daily life. Each person must own a distinct set of peripheral movements (external) in order to be able to translate informational orders coming from the outside to the inside. This supports the steering of a very small but important part of out internal body and thereby the ANS (autonomic nervous system).

That is why each creature has unconsciously used very specific external asymmetric movement sequences that steer a small but very important part of the inner vegetative mechanism, stimulating and enabling it since the beginning of time.

Would it not be highly useful if each individual were to be able to steer this process consciously? Such mechanisms have been know and used for the aim of healing for quite some time in the context of HMT (Holistic Manual Therapy), a part of the Renner Method. Of course such asymmetric movement patterns can also be used to stay healthy and we could even call them the biophysical fingerprint of human health.

Asymmetric movement patterns function like activation switches. They are probably vital to the maintenance of inner and external order and orientation.

Age is another deciding factor for the individual. Human life takes its course in two distinct phases. The first phase spans from birth to menopause/andropause. In this stage we find "young" individuals. We find "old" people in the second phase which spans from menopause /andropause to death. An increasing number of people are in this category, even if they don't feel like they fit into this group.

Specific anatomic structures and physical processes as well as asymmetric movement processes are relevant for each age group. That is, human NN structures of the STATOF group (see appendix), structures with a non-neutral effect are more relevant for the first half of life while N structures of the LISFACT group, when seen from a functional aspect, are more relevant for the second half of life.

But there absolutely are young people whose health problems make them seem definitively older (take the example of rheumatism) and older people who are faced with problems that are usually attributed to the first half of life (for example, allergies). ADIY-users need to be informed about this reality if they want to be successful and efficient in keeping healthy.

The next deciding factor is the **shape (form)** in which the signal variety of nature is expressed. It is the sphere form that is relevant as nature's informational vector during the first half of life while the rod shape is relevant for the second half of life. The egg shape and other forms that cannot be classified are relevant in the transition phase between the two periods. In this context it is interesting to observe the form of various pathogens.

The term *Information* means: to bring or keep something in form: to in-form something. "*Information*" is transferred from creature to creature not only through sound, sight (mimic, gestures, movement patterns) and smell (pheromones) but also according to various aspects of form. This unconscious process is of exceptional importance. The form is imprinted. Spherical forms are most relevant as information carriers within the first period of human life. All forms that cannot be classified (the egg form for example) are important within the transition phase between the two. Rod shapes play a decisive role in the second period of life. The aspects of form take an important place in both our health and in our evolutionary destiny. (Form needs movement needs form).

Health, seen from the usual point of view, is self evident, non-influenceable, a question of fortune, and that « lucky something ». Up until now, no one has tried to quantify or weigh the health of an individual, thereby making it visible.

Until now the causal reason for the conservation and preservation of health has not been taught under this light.

Many aspects of the traditional Chinese medicine (TCM) are used to illustrate and therefore enable a better understanding of these relationships.

In your first half of life the emphasis is on what is deepest and highest, meaning the psyche, the head and mental development. In this time frame you are prompted to *react* to the stimuli of your environment. This is the realm of the *Inner High Tide*. Here everything exists in abundance (the spherical form). (*Please

see "Ebbe und Flut", in <u>Der Heimliche Favorite</u>, pages 113-115, "Bewegungen der nonneutrale Körperwelt", pages 115-118). *Further references with a * always refer to this title*. During the second phase of life it is more a question of your lower and outer body (static, the musculoskeletal system, wisdom, experience). In this time period you are prompted to compensate and adapt.

Reactions become your worst enemy (fever for example). The *Internal Low Tide*, dryness, cold and emptiness direct your life (rod form). Serenity dominates. You have learned to wait and see. (Please see "Bewegungen der neutralen Körperwelt", *page 89-93).

The last important factor is **gender**. It plays an essential role and is of formative importance for the autonomic nervous system.

The male gender demands constant stimulation of the autonomic nervous system to function faultlessly (plus state) and thus to correspond to the male movement pattern while the female gender demands constant sedation (minus state) to correspond to a female movement pattern. If a member of the male gender has a female movement pattern, perfect health will not be possible and vice versa. The search and elimination of such dysfunctional patterns is one of the main preoccupations of asymmetropathy.

Conclusion: *Being healthy* and *staying healthy* are subject to their own widely known and established laws. This has nothing to do with the absence of disease. On the other hand, serious diseases can only be avoided if one has knowledge of and consistently stays on one's individual path to health. Condition: knowledge of one's "should state" (see appendix). Here there is no speculation, only the right decisions. This small guide should help you be able to make the right ones.

Greeting

"We live in a period in which a lot of controversy and division exists between what is considered to be conventional medicine and the more alternative methods of healing. The resulting polarity might be the reason that many people wish to be recognized and treated as a whole individual. There are also many ways to treat diseases and ailments, to relieve or heal, outside of the traditional paradigm of medicine. An uncommon approach asks question about the individual, whose health depends upon on his or her constitution and the awareness that good health is something that can reached and conserved.

In our times of cost cutting within the health field and the extra incurring personal costs or reduction in care there is an ever increasing wish for patients to be able to take control of their own health. The book you have in your hands, "Healthy with ADIY" presents a form of self-help that is easy to understand. It also enables the medical layman to find fitting asymmetric movements to stay healthy based on individual constitution, body traits, age and gender. The layout, with numerous images, drawings and exercise instructions, is also especially appealing. I was convinced of the effectiveness of these exercises through an awkward predicament and can highly recommend this book through complete personal conviction."

Prof. Dr. Katharina Neukirchinger

Basic Principles of Asymmetropathy

The "Neutral World" (N-World)

The abbreviation "N" stands for "neutral". The word "neutral" functionally describes and includes all that takes place in a upright and extended body position, that is, in a body position that is inclined towards extension. We distinguish a "neutral standing position" a "neutral sitting position" and a "neutral supine position".

In the "neutral standing" and "neutral sitting" positions one respectively sits or stands upright and slightly extended. The lumbar and cervical spine are both equally in lordosis. The position of a lordosis (hollow back and neck), is an important characteristic of the N-World. The entire inner N-World would present a dysfunction without a lordosis.

In the "neutral position" one is supine without pillow and without a roll under the knees. To reinforce the neutral position we suggest that you put a rolled towel under both the lumbar and cervical spine. The hands are open, fingers extended, eyes closed, exhalation is forced. (* also see p. 28-29)

All actions and functional movement sequences typical for the N-world use this lordotic position and are reinforced through the use of asymmetric movements or asymmetric static aids (see examples on pages 32 and 33). Their effect on the human body are determined by the parasympathetic portion of the ANS. These characteristics are denoted as the *P-principle* (* see page 51, Tabelle: Charakteristik des P-Prinzips).

1. Affected Body Structures

The "N" world spatially consists of a very specific group of body structures called the LISFACT group. The most important structures are:

Lumbar spine, Ilium, Sphenoid, Femur, Atlas, Coccyx, Temporal bone (*Please study pages 75-79, 83-85). We have already briefly mentioned the external regulation with the help of asymmetrical movements. The three most important elements in the N area of the body are the

Feet

Coccyx

Lumbar spine

At the same time these are the important areas that we must pay particular attention to in the second part of our lifespan to be able to expect a faultless functioning of our N-world.

1. Age

The N world is the "rod world" and is important for older people. Therefore, these people should have a slender "rod-shaped" body and not be overweight. Overweight is, among others, a sign that a person still should still functionally belong to the NN-world and that this would be more relevant for them at this time.

The N- world needs rest to function. Constant overwork, injuries and traumas (physical, mental and emotional), damage the alkaline body milieu over time. Healing is best possible within the N-environment. The optimum altitude for the older person is between 500 to 1000 m above sea level. The N-environment is a proportionally less oxygen rich environment. The oxygen need for older individuals is naturally lower than for the younger individuals and women. Older people should drink enough, especially carbonated mineral water, which is good for this age group. The idea here is to acidify.

How is the N world reflected in the second period of life?

The "Personal Favorite" (see appendix) is dominated by the behaviour of "NSI" ("deficiency in the deficiency-world"). Deficiency is more appropriate for an older person than excess. He/she ultimately moves towards the end of life and death just happens to be the biggest possible deficiency that ends every life. Thereby the state of "deficiency in the deficiency world" becomes understandable. The counterpart, "excess in the deficiency world" is unfavourable because of this. Lingering excess is not of advantage for an older person and only stresses him in an abnormal way.

2. Women

Women, in contrast to men, need the "NN-World" much more urgently. Example: monthly menstruation, pregnancy, birth.) For this reason when we have to choose between the N and the NN world, women can fundamentally be attributed to NN.

By the way the transition from the "NN-world" to the "N-world" is easily recognized. As long as menstruation takes place the "NN-world" dominates. Women can be positively influenced through the "N- world" as soon as the monthly periods cease; whether through of menopause, hysterectomy or other hormonal problems.

4. Men

The "N-world" is of significance for men (rod-world). In the case of doubt we always assign "N" to the male gender. This decision can be important (impotence can be an "N" error.)

The gender-specific classifications mentioned in the introduction are to be understood as set rules.

5. Transition Phases

The age of a person in the transition periods only lets us draw imprecise conclusions. As a rule of thumb we can say that: all individuals under the age of 50 can initially be seen as young. As a basic principle this group is dependant on a well functioning NN-world. Individuals between 50 and 60 years of age find themselves in the transition age and are generally equally dependant on both the N and the NN worlds. In this manner of observation, all persons between 60 and 80 are seen are seniors and as old. Their lives and health are strongly dependant on the proper functioning of the N-world. This then conditions how young and healthy you remain, how well you will travel through the years and how old you become. The transition phases of puberty and menopause are influenced through the N-world.

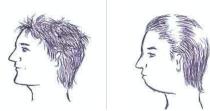
6. Form

The "rod-world" can be optimally influenced through rod shapes of diverse origin. (example: rod shaped vegetables, fruits, slender fish, healing plants, long part of meat like the back, loin or filet, long grain rice, grains like wheat).

7. Facial Characteristics

The quality and quantity of the N-world can easily be seen by looking at the form of a person's chin.

A prominent chin form denotes much available N and we call it an NSI chin. Functionally we can also talk about designated "deficiency in deficiency". (TCM).



A receding chin or a more vertical chin form (retro-chin) denotes little available **N** and we call it a NSr chin. Functionally we could talk about designated "fullness in deficiency" (TCM).

Illustration 1:

The NSI chin (male attribute) counts as the "Personal Favorite" **3** of this age. This disposition (setcondition) would be ideal to be able to go through the years without too many symptoms. The NSr chin (female attribute) is considered as the "Opposite of the Personal Favorite" **4** of age. This disposition demands substantially more care on the side of the bearer.

Generally, the bearer of an NSr chin will not go through the years as easily and as symptom free as his "NSI" counterpart. He should take much better care of himself so as not to miss important aspects that have to do with his health.

Rule 1.

If there are doubts as to the form and spatial position of your chin then you should generally attribute it to the "NSI-chin".

Summary of Facial Characteristics:

The existing "Should-state" of a person's N-world can be determined by studying the form and spatial position of the chin. A prominent forward jutting chin suggests a very positive constitution for the aging process. A chin that recedes (retro-chin) makes keeping healthy through the years a little more difficult. These two visual variations of genetically determined deficiency or excess are identical to the "set-condition" planned by nature when age is taken into consideration. An "NSr chin" is more of a burden, especially for the male gender.

Rule 2

If you discover an "NSI chin", the functioning of the N-world must be intact in the peripheral movement direction of **NSI**. (That means that left side-bending of N-structures in the N-position must be unrestricted.) A person with an N-chin is very sensitive when the left side bending of N-structures are hindered. Restricted (N-structures are then blocked in a real or relative right side bending position- *fixed NSr-movement direction*).

Everything mentioned above can be turned around and done in the opposite direction if you discover an "NSr-chin". (A person with a retro-chin will be very sensitive and react to a fixed NSI-movement direction.)

Rule 3 Everything mentioned above can be turned around and done in the opposite direction if you discover an "NSr-chin". (A person with a retro-chin will be very sensitive and react to a fixed NSI-movement direction.

8. Dysfunction (Asymmetropathy)

If the chin form tells us something about a person's *biophysical* disposition we are still lacking a comparative diagnostic pattern with which we are able to make visible real differences. This pattern can be found through the comparative observation of the eye line slant with help of both a frontal and profile image of the face.

A left eye slant (frontal face image) only fits to a prominent chin (profile image). *NSL-should demands NSL-is*.

A right eye slant only fits to a retro-chin. *NSr-should demands NSr-is*.

The absence of an eye slant fits to both chin forms.

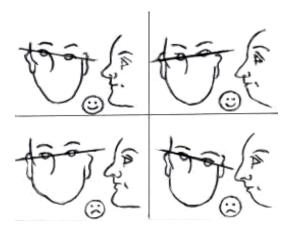


Abbildung 2: Disposition und Realzustand

We can conclude that:

NSI-chin + NSI eye slant = no disorder! NSr-chin + NSr eye slant = no disorder!

NSI-chin + NSr eye slant = disorder! NSr-chin + NSI eye slant = disorder!

Summary of the "N-World"

Posture	
Erect sitting and standing posture, flat supine position, lordosis, darkness, closed eyes,	N-
elongated body, stretched and spread fingers,	environment
Body Structures	
Spatial structure is the LISFACT-group (see page 8)	N-world
The three most important areas: feet – coccyx – lumbar spine, N-world	
Age and Characteristics	
The second part of life, meaning over 60, amenorrhea for women,	N-world
Rest, not too much physical exertion, avoid stress! The N-world is a healing world.	N-
Force exhale! Drink more (carbonated water), spend time in the mountains	environment
Dominance of the parasympathetic, Mrs. P's STORY(*page 49, 50)	N-
	environment
Facial Diagnosis	
NSI = a prominent chin (emptiness = favorable), NSr = retro chin (fullness = unfavorab-	
le)	
If in doubt = NSI chin	Should-state
Left eye slant and NSr chin –disorder	Is-state
Right eye slant and NSI chin –disorder	Is-state
Form	
All rod forms that occur naturally like food and healing plants, organ forms and pathoge-	N-
nic agents (mycotoxins and rod formed bacteria).	environmemt

Of course we could observe many more details of the N-world but we would surely drift from the general observations and thus we must limit our reflections to these. For those of you interested in deepening this subject you can read pages *45-67 of "*Der Heimliche Favorit*": (Die Vegetative Mitte des Menschen, *pages 45-67: Vegetative Mitte des Menschen, *pages 89-93: Bewegungen der neutralen Körperwelt, *page 113: Ebbe und Flut, *pages 170-171: Der heimliche Favorit der Peripherie, Die NSI-Kombi-Bewegung).

Now the following constellations should determine your action:

You must act:

You can act:

You should act:

illustration: 3

Comment:

If you discover, you have an "asymmetropathy" then you should act. Age amenorrhea and stiffness are longterm reliable parameters.

When there is no discrepancy between the profile and the frontal view image then you can work. If you discover an asymmetropathy in yourself then you **must** work. If there is no discrepancyin your profile or frontal view then you can work. If you think you fit into the "N" category, and have a receding chin for example, then you **should** work on yourself.

The "Non-neutral World" (NN -World)

The abbreviation "NN" stands for "Non-neutral". The word "non-neutral" functionally includes a state that comes about in body position that is; forward bending, rolled together or rolled up in a ball.

We still need terminology to be able to specify between the "non-neutral (NN)" standing position, from the "non-neutral (NN)" sitting position and the "non-neutral" supine position.

In the "NN" standing and seating position one is bent forward, the cervical and lumbar lordosis has disappeared and has made place for a kyphosis of the entire vertebral column (rounded back and neck regions). This kyphosis (convex bending) is of utmost importance for the "NN- World" and is essential for assuring faultless function. This spinal kyphosis is the landmark of "NN".

The "Non-neutral" supine position consists of a kyphotic supine position, as "round" as possible (with a high pillow under the head and a large roll under the knees), eyes open, both fists tightly closes, and an inhale that is forced as compared to the exhale.

All actions and asymmetrical movements that are done in this posture will have a functional influence on the "NN" world. (see page 28 and 29 and page 33 and 35 for examples.) The vegetative aspect of the "NN"-world are defined by the vegetative aspect of the sympathetic portion of the ANS which defines the S- principle. The functions of the three large organs, liver, heart and kidneys depend on the "NN" principle for their proper functioning.

1. Body Structures Concerned

In which region of the spine is kyphosis useful? There are three distinct areas: the upper cervical spine, the thoracic spine and the sacral area. These three areas are also the most important "NN" sites. Should there be dysfunction hidden in these regions, then the nature of the entire "NN" world will be affected. (* page 51, table, left, Characteristics of the S-Principle.)

The spatial aspect of the "NN-world" consists of a specific group of body structures called the STATOF Group, of which the main structures are:

Sacrum Tibia Axis Thoracic spine Occiput Frontal Bone (skull) (*Please study pages 79-84 as well as pages 86 and 87.) The four most important elements of the "NN" part of the body are located both above and below: Occiput Axis Thoracic spine Sacrum

These are the fundamental elements of a non-neutral external regulation. Neither the principle of the sympathetic nervous system nor the NN-world will function seamlessly if there is a problem in any of these body parts. (*See pages 60-61) Such a deficiency can result in threatening consequences and must be taken seriously (sympathetic stimulation).

2. Age

The "NN World" is very important in the long-term for women and for the first period of a growing child's life (children, teenagers) and important in the short-term for the male gender and for very old people. There is a strong NN dominance in small children of both genders, which continually decreases as they reach adulthood.

The "NN-milieu" demands increased continual movement for optimal functioning. Sports, competitive sports, physical overexertion, and stress and movement of any kind fit to this pattern. The sympathetic system functions the best in an acidic NN-milieu. If this all takes place at as low as possible near sea level (0m - to about 300 m above sea level), then conditions will be excellent for children and teens.

The "NN-environment" is a very oxygen rich milieu, explaining why the oxygen needs of young people are clearly higher by nature. People with an "NN" dominance must drink enough water (water without carbonation), but not excessively. A reduction in water intake is far less damaging to younger people than to older ones. (Exception: with physical extreme endurance performances.) Large numbers of carbonated beverages should be avoided (for example soft drinks or light drinks).

3. Women

A pregnant woman is already subject to the "NN-principle" shortly after fecundation. The "NN-principle has a very strong influence during the entire pregnancy and starts to taper off near the end of the lactation phase.

Many questions can be asked in conjunction with gynecology: Can fertility, sterility and infertility be bio-physically influenced? Do embryonic and fetal development problems depend on NN-disorder? Are miscarriages, premature births, complications during pregnancy and childbirth as well as lactation problems signs of the existence of an N- dominance?

What is the significance of this for the gynecological medical practice? Does anyone concern themselves with the NN principle in this period of life? The answer to this is known. Pregnant women and foetuses are unfortunately largely left on their own and thus left to lucky or unlucky chance. The NN principle in

the body of mother and foetus is the requirement for these events as well as for the essential milieu for all normal growth.

The NN principle in the body of a woman and her fetus is the condition for all these processes and prepares the causal environment for normal growth.

4. Form

The "sphere-world" can be informed through spherical forms of divers origins such as round types of fruits and vegetables.

5. Facial signs

How the NN-world is reflected in each person depends on the genetic quality and quantity and can be easily "read" by looking at the form of a person's forehead:

A forehead that juts forward, looking more vertical = an "NNSI-forehead (deficiency in the excess world) =a female attribute





A forehead that is retro and flatter = "NNSr-forehead" excess in the excess world = male attribute.

Illustration 4: NNSI forehead

and NNSr forehead

The "NNSI forehead" is the personal favorite of young (female) individuals. This disposition is the valid "Should-state" to keep symptom and disease free during the first years of life. It especially concerns all children up until puberty. It weakens the strong tendency towards excess (or fullness) and has a correcting effect

The NNSr forehead" is the Opposite Personal Favorite (OPF) of children and teenagers. This disposition causes many problems in the teen years. "Excess in excess" means that the teen body has a tendency to heat up too quickly and thereby has a tendency to extreme over-reactions (allergies, susceptibility to infection, children's diseases, hyper motor states and irascibility).

This rather negative situation turns to a positive one in young adults (from around the age of 25). The strong dominance of "excess" slowly tapers down. Excess can suddenly have a correcting effect. That is why the "NNSr forehead" is the personal favorite of young (male) adults under the age of 50.

Rule 4

If there is a doubt when determining the forehead form, it can generally be attributed to the "NNSr forehead".

Summary of facial signs:

The genetic "should state" is determined according to the shape of the forehead. A high, forward jutting, vertical forehead area (NNSI) indicates a favorable situation for children, teens, and the feminine organism (Personal Favorite of children up to puberty), but not for the body of young adults. Here the disposition has the effect of the Opposite of the Personal Favorite (OPF).

A forehead that has a flatter form (NNSr) indicates a positive disposition for the young male adult.

Both of these visual hereditary signs of excess and deficiency, during the first phase of life, are identical to the nature planned "**should-state**" of a person at this period in life. The logic of the temporary state of "deficiency in excess" (NNSI) or "excess in excess" (NNSr) can only be understood through an understanding of the transformational phase from child to adult. There is no loser since nature always brings about balance with the appropriate course of events.

If we see an "NNSr" forehead, then we also know that the movement direction has to function seamlessly. One is thus very sensitive with regards to an NNSI-fixation and the opposite is true in the case of a "NNSr forehead". There is a tendency to over reaction with an NNSr fixation (all of this naturally depends on the current phase of life and the person's gender).

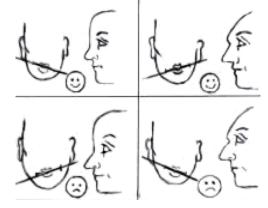
The importance of a fault free functioning of a person's NN world now induces the question of the second important parameter, which is the "**is-state**" of a person.

6. Dysfunction

If the forehead form expresses the natural genetic constitution of a person then we need a diagnostic comparative pattern to discern and to determine *real discrepancies* in the "NN-world". The observation of the *mouth line slant* is helpful for this.

A left slanted mouth line ((NNSI-is) frontal photo fits to vertical forward jutting forehead. (Profile). An "NNSI-should" needs an "NNSI-is"!

A right slanted mouth line fits to a receding forehead (Profile). "NNSr-should" needs "NNSr-is".



No mouth slant line fits to both forehead types.

Illustration 5: Disposition and Actual State

From this we can conclude:

NNSI - forehead and NNSI - mouth slant = no error = advantageous NNSr - forehead and NNSr - mouth slant = no error = advantageous

NNSr - forehead and NNSI - mouth slant=error! = disadvantageous NNSr - forehead and NNSI - mouth slant=error! = disadvantageous

If you find such ab "Assymetropathy" on yourself or your child, (which is very common), you have found an important causal error.

Remark: Errors in the "NN- world" are worse than those in the "N -world" because the NN world decides on your emotional and psychological reactions. These errors generally affect one's intellectual capacity. The effects of such errors have a very deep impact towards the inside (from emotional imbalance to neurosis and psychosis) and always appear above (head, brain, thinking mechanism, intelligence).

NN errors mainly touch the *inner (psyche) and upper part (intellect) of the body*. Furthermore, "NN- mistakes" have an effect on metabolism (liver and gallbladder function) and the body's water balance (kidney and bladder function) as well as the central and peripheral blood circulation (heart and vessels).

Since the "NN- world" has to do with the beginning of every life such errors are often compensated a whole life long until the day that adaptation occurs. Because of this we often find old uncorrected "NN- errors" (stemming from childhood) that people have carried with them their whole life long.

Posture	
Flexion in sitting and standing position, flexed supine position with kyphosis.	NN-
Light, open eyes, rolled up in a ball with both fists clenched	Environment
Body Structures	
Spatial structure is the STATOF group (see page 14)	NN-World
Symptom Area: Inner and upper body (internal organs, head, psyche, mental	NN-World
The 4 most important areas: occiput - axis - thoracic spine - sacrum	NN-World
Age and Behavior	
The first period of life, children, teens, pregnant women, adults under 50.	NN-
	Environment
Movement in every form, sports, physical exertion, stress, forced inhale, not drinking	NN-
too much, stay at sea level	Environment
Sympathetic dominance, The NN- World is the immune and reaction world = Alcaline	NN-
milieu	Environment
Facial Signs	
Feminine = NNSI forehead favorable, male = NNSr forehead favorable	
If you have a doubt = NNSr forehead	"Should-state"
Left mouth slant and NNSr forehead = error	"Is-state"
Right mouth slant and NNSI forehead = error	"Is-state"
Forms/shapes	
All spherical forms of natural origin such as food and healing plants, organ forms and	NN-
pathogenic agents (viruses, coccus-type forms).	Environment

7. Summary of the "NN-World"

If you would like to deepen this knowledge please have a look at the following passages in the book *Der Heimliche Favorit* (*pages 45-67 : Vegetative Mitte des Menschen, *pages 115-146: Bewegungen der nonneutralen Körperwelt).

The *Personal Favorite* of youth is especially dependant on the behavior of NNSI ("deficiency in the excess world"). A state of fullness corresponds to youth but not in excess. We are talking about development but not development at all costs. "Deficiency in the excess world" is a counter-steering regulative element.

The same principle apply to the *Personal Favorite* of the male adult, who is dependent on the behavior of NNSr ("excess in excess"). The diminishing fullness inherent in the aging process in the middle years should not occur to an extreme state (male credo).

Physiologically the highest level of fullness belongs to the small child, the diminishing fullness to the adult and emptiness to the elderly. From this law follows : "NNSr" can only be beneficial for a <u>male</u> adult under normal circumstances and of detriment to the <u>female</u>.

The following constellations should influence your actions:

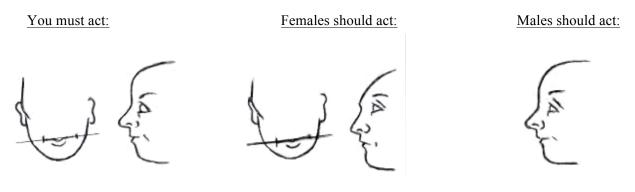


Illustration: 6

Remark :

The young, the female gender, menstruation, pregnancy, the first week after birth, are also very reliable long-term parameters. The result of the General Test to the Right (see pages 47 and 48) should be positive here. Forward flexion in the morning should also be comfortable. The other parameters are valid only in the short term.

If you discover a NN type divergence in yourself (by way of the profile and frontal photos), then you **must** act (NN is more important than N).

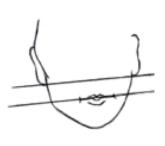
If there are no divergences in the profile and frontal photos you can act.

If you are still young or a female and have a NNSr chin then you **should** act. The opposite is also true: If you are a young adult of male gender and have a NNSI forehead then you **should** act!

Dysfunctional Main Body Structures

Friend or Enemy?

Another phenomenon lies hidden within the "NN-world" and it can be made visible with the help of a frontal image of the face. We are talking about a very significant relationship.



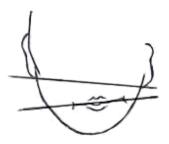


Illustration 7: Normal Mouth / Ear-Line

Dysfunctional Mouth / Ear-Line

We must look at both of these important lines in relationship to one another. It must be noted that the mouth line represents the sacrum line while the ear line represents the occiput line.

The normal behavior of the "NN world", respectively the vegetative part of the sympathetic nervous system (the sympathetic portion of the VNS) reveals itself through both lines running parallel to each other. (=normal mouth /ear-line). If you should find that both lines diverge or even cross within the frontal image you have discovered the second important discrepancy. This denotes the presence of sympathetic disorder.

This second *biophysical* source of error in *asymmetropathy* is often confused with endocrine or other pathologies and inevitably leads to therapy resistance.

Both leading structure within the STATOF group (*see page 81) should behave more or less in synchronicity. Only then will the autonomic nervous system (ANS) exhibit the proper function.

Such an undisturbed vegetative behavior can ideally be observed in the parallelism of the mouth - ear line already mentioned; a faulty functioning will show itself in the divergence of these two lines and a dys-functional one will show the lines crossing when observed in a printed image.

Here the sympathetic principle is damaged. An interesting phenomena develops here: while functional sympathetic quality is repeatedly lost it will be replaced with more quantity = a boosting of the sympathetic portion of the ANS.

We call this biophysical "accident" a "*Symptony*". The consequences of this "accident" are very important and go beyond medical imagination.

When the functional quality of the sympathetic has been successively reduced, the body is forced to raise the quality of the damaged portion of the sympathetic nervous system until the deficiency in quality has been balanced with quantity. The lesser quantity can never be replaced by more quantity in reality and quality then becomes a tricky compromise. This can easily be illustrated by the following example: 5 rotten apples don't get fresher or more perfect in that we add 45 similar ones. The body is, just like in this example, forced to increase the sympathetic part of the ANS with lesser quality: Instead of a high quality sympathetic input there will now be a higher quantity but with an inferior sympathetic quality - a source of confusion for the body.

The body's only choice of reaction, damaged by the drive for quality and the lack of quality, will be to increase the antagonist parasympathetic partner, little by little, as a counter-regulation. This vegetative counter-regulation will become fixed and a chronic state of illness will therefore develop. Such a state proves to be extremely therapy resistant (for example; allergies, high cholesterol, hypertension, diabetes, vessel restriction, fear, panic attacks, feelings of coldness, tendency towards diarrhea, etc.). A treatment with normal means becomes impossible.

Example 1: High blood pressure with parallel mouth / ear lines

A rise in blood pressure of diverse etiology needs an increase sympathetic part (sympathicony) as in this example. Here the "S principle", the ergotrope (stimulating, performance increasing) quality is functioning correctly. The sympathetic system reacts normally and the higher blood pressure has other origins. Blood pressure lowering medicine, (beta blocker or Rauwolfia alkaloids, for example), are effective. The sympathetic portion can be lowered through medicine.

Example 2: High bloods pressure with a divergent mouth / ear line

The origin of high blood pressure is a mistakenly increased sympathetic nervous system and thereby its dysfunctional behavior. (less quality that leads to more quantity). Here the "S principle" does not function correctly ("*Symptony*") and the ergotrope quality is subject to a faulty regulation. The sympathetic nervous system reacts in an abnormal way and can even be seen as the origin of the increase in blood pressure. Taking medicine to lower it will not work here and will only further increase blood pressure, further increasing the counter-regulation. Because of this, sympathetic influence can no longer be reduced.

The "*Symptony*" is a common disorder and in our example would only lead to higher blood pressure when the parasympathetic counter-regulation is insufficient or has not kicked in. Some other examples of "*Symptony*" symptoms are fear states and panic attacks, hot flashes, increased sweating, dry mucous membranes, heart problems, thought and concentration problems, cold hands and feet, white fingers, body sensations of feeling hot on the inside and cold on the outside, high blood sugar, hair loss, thyroid problems, constipation, short breath, delicate health, and much more.

Bigger problems arise when such symptoms are mistaken for those of other *real diseases* and treated as such and the following suppression that would result.

That logically leads to an increase in the proportional level of the sympathetic influence and will end up in a vicious cycle leading to organic disease in the long run. The biggest enemy of people in such situations is the conventionally trained and active therapist that does not have this biophysical knowledge.

Which slant (mouth or ears) functions as your "friend" or your "enemy"?



In this illustration you see a divergent mouth / ear line. The mouth slant line veers clearly to the right (NNSr), the ear line veers only slightly to the right. (NNSr). The profile image shows the tendency towards a receding forehead (NNSr) forehead. If compared, the mouth slant (NNSr) would be your "friend" and the slight slant of the ears and the resulting lack of NNSr quality would be seen as your "enemy".

Illustration 8: Friend or enemy

Stated otherwise, we see that the sacrum functions well but the occiput, that has less of a slant, exhibits a functionality that is not optimal. Seen from a biomechanical standpoint we can say that the sacrum tilts towards the right side while the occiput shows a restriction in the same direction. You should now motivate your "enemy" to become your "friend" (*see exercise page 142: Occiput NNSrR1, illustration 72).

This is also valid in the opposite situation: If the right ear slant line had more of a slant and the mouth line almost parallel or even towards the left (this is also possible), then the "enemy" would be the sacrum and the occiput your "friend" (*see exercise page 142: vertical sacrum NNSr, illustration 96)

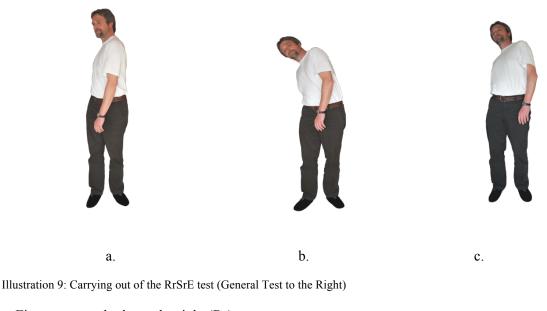
Of course this can be transposed to the opposite situation, one being a left slanted ear and/or mouth line in conjunction with a forward jutting forehead (NNSI- forehead). The question of "friend" or "enemy" remains the same. Other diagnostic possibilities are also possible.

Tip: The body must be checked for a "*Symptony*" before reaching for measures that reduce the influence of the sympathetic nervous system!

Important Tests for the Biophysical Diagnosis

A. General Test to the Right

RrSrE = **R**otation to the right, side-bending to the right, extension, (meaning to lean back).



a. First turn your body on the right (Rr)

- b. then side-bend to the same side (Sr)
- c. and finally go into extension (lean to the back) (E)

Is the test comfortable or uncomfortable ?

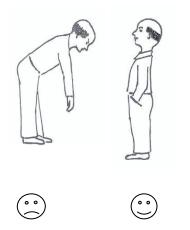
If the General Test to the Right feels unpleasant, uncomfortable or painful, this means that you should influence and work on your **"N world"** right now (LISFACT structures 1).

A General Test that feels comfortable means that you should influence and study your **NN world** (STATOF structures 2).

You can do this test all your life and it will give you fairly accurate information as to which spatial body part would best be influenced at the present time.

B. Flexion and Extension Test

A further feature that helps to find out whether you would be better at home in the "N-world" or the "NN-world" is the flexion and extension test. Is it increasingly difficult to put on stockings and socks, in other words, are you stiff when you bend forward? If so you would feel at home in the "N-world". Stretching backwards becomes more comfortable and also more important for this age group. The "N-world" is relevant!



In this image you see an older slender person. The forward bending position leads to a reduction in size and has an NN-quality, which would sedate the strong presence of the Nquality.

Illustration 10: Flexion is difficult, extension is easier = N

Bending, rolling together and bad posture feel good or comfortable. You have no problems bending forward. Then the seamless functioning of the entire NN world would be very important for you! The NNworld is relevant!

Your Own Personal Bio-Physical Diagnosis

- Gather information
- Analysis of your personal case
- Personal bio-physical diagnosis

Let us mention the most pertinent points in this handbook again:

"Planned maintenance of health" comes first!

Disease should be avoided, already existing changes in the milieu and precursors to disease can be recognised and eliminated. Every disease is dependant on certain preconditions. ADIY cannot reach other goals. Otherwise one would go above the capacity of this system. That means that an asymmetrical check-up must have the goal of correcting the body's milieu as early as possible to ensure that the goal of individual health prophylaxis. The term "bio-physical diagnosis" does not necessarily infer a diseased state because it includes the prerequisites for which a disease could possibly develop at a later time. It is the earliest possible form of diagnosis.

An example:

Female, 30 years old, lower body very slender, upper body full (large breasts), underweight. Monthly period strong and painful, migraine on the right side.

Should state according to gender = NNSI.

Should state according to age (young) = NSr

Face profile : NSl chin, NNSl forehead,

Face frontal view : clear eye slant to the right (NSr) = no dysfunction! slight right slant to mouth (NNSr) = dysfunction



Illustration: 11

The fifth lumbar vertebra and the sacrum (eye and mouth lines) should normally show opposing functional behavior (*see page 74). = dysfunction

Left ear slant (NNSI) = Occiput (STABOF) = no dysfunction

This denotes a "*Symptony*" since the mouth and ear lines do not run parallel but diverge. "*Symptony*" = error The enemy is the sacrum (female gender). The friend is the occiput (NNSI)

The General Test to the Right is not comfortable or pleasant – working on the N-world is relevant. "Should-way": NSr The age would be NN (young), should-state = NNSI)

N is relevant at this time (NSr)

Biophysical Diagnosis at an Early Stage and the Milieu of Fullness or Excess (NSr):

With time, a fixation of the "NSr" state will lead to the tendency towards expansion, either on the outside (for example female breasts) or below (body region below the umbilicus). The most dangerous years are in the period of menopause.

A fixation of "NNSr" below could well be momentary cause for the migraine attacks cited above. The NN-world is disturbed and is going in the direction of a "*Symptony*" (excess milieu) and the immune reaction of the body is lowered because of this. The immune system is weakened.

At the age of 54 a breast carcinoma, (right upper quadrant) with metastasis in the axilla nodes has been identified. The prognosis is not favorable. The tendency towards being underweight has increased. It is too late to get rid of the pre-disease state. The ignorance of this pre-disease state at age 30 shows its consequences now.

Evaluation:

The biophysical term "NSr" means "excess in the deficiency world" and was already relevant at the age of 30 (see General Test to the Right). "Excess in the deficiency world" requires constant overweight as a counter- regulative health impulse but by no means a tendency towards underweight. External excess helps to regulate, control and counter-regulate local excess. If, in this case, the immune system would have been more vigilant, the carcinoma might have appeared anyway but would have probably remained encapsulated.

This example makes the importance of timely health prophylaxis clear. Leaving life to lucky chance seems to be a questionable with this information in mind. It is not necessary that every biophysical preliminary stage will end up in a catastrophe but the chances of getting sick do clearly increase.

The following bio-physically relevant factors must be cleared up in order to be able to objectively shed light upon your own state of health:

1. Determination of the N or NN - relevance factor (age, gender, General Test to the Right, pregnancy).

Existence of a "Symptony"? Determination of friend or enemy (Is it a "friend" or an "enemy"?)
 Determination of personal constitution and actual state (biological "should-state").

4. Determination of a discrepancy with regards to the "should-state", a fixed inclined plane (personal "Is- state") assessment of the existing symptoms (distribution of symptoms) (= inform the body about the "is-state").

5. Determination of the personal normal weight (PNW), and either overweight or underweight serves as corrective (counter control mechanism) against inappropriate excess or deficiency.

6. Diagnosis (determination of the biophysical origin) = the essence of pre existing illness.

These factors lead to the choice of the local movements((LISFACT-or STATOF - system) = areas to be worked on).

1. Determination of the N or NN- Relevance Factors

The essentials are already known (page 3-13). Proceed as follows:

- 1. Female gender = NNSI- "should-way"
- 2. Male gender = NNSr- should-way"
- 3. Menopause= NSr- "should-way"
- 4.Young = preferably NN- "should-way"
- 5. Elderly = preferable N- "should-way"
- 6. Children and women = NNSI--"should-way"
- 7. Senior citizens = NSI- "should-way"
- 8.Old woman and men = NNS1--"should-way"

General Test to the Right: (page 48)

If the General Test to the Right is comfortable: The "NN-world" is relevant for the exercise process (STATOF- group), the area to be worked on usually being close to the symptom.

If the General Test to the Right feels uncomfortable or unpleasant: The "N-world" is relevant for the exercise process (LISFACT-group), the area to be worked on usually being close to the symptom.

Remark:

If you should find yourself in the "NN-world" (with, for example, a "General Test to the Right" comfortable), then your exercise regions will generally only be STATOF- structures (*page 81), and you should not work on LISFACT structures at this time. If you happen to find yourself in the "N-world" (with a "General Test to the Right" which is uncomfortable), then you should only work on your LISFACT-structures (*pages 78-79) and no STATOF structures at this time.

Example 1:

Male, 45 years old, which should normally be NNSr, but the General Test to the Right is not comfortable which denotes the "**N-world**".

Solution: Work in the direction of "N" = movement direction "NSI-should"- way.

Explanation: The "Personal Favorite" (PF) is made up of NNSr (PF in NN) from young to middle age. Its neutral partner is NSI (PF in N). See the Handbook "Der Heimliche Favorit"!

Practice in the direction of NSI within the LISFACT group and near the symptom at the present time and only until the General Test to the Right starts feeling comfortable. Then keep working in the direction of "NNSr-should" way within the STABOF group near the symptom (continuation).

Example 2:

Female, 42 years old, with very strong menstrual period. Normally this is **NNSI** but the General Test to the Right is comfortable and denotes the NN-world = exercise in the direction of **NNSI** "should-way". Momentary working of the structures of the STATOF group in the vicinity of the symptom in the direction of NNSI would be correct.

Example 3:

Child, male or female, 9 years old, which is normally NNSI (young) but the General Test to the Right is not comfortable and this denotes the N-world. Solution: practice in the direction of the Nsr "should-way" at this time.

Explanation: Opposite Personal Favorite (OPF) is made up of NNSI. Its neutral partner is Nsr. (OPF in N).

Movements in the NSr direction within the LISFACT group near the location of the symptom for as long as the General Test to the Right begins to feel comfortable. Practice in the direction of NNSI should-way after this, within the STATOF group and near the symptom.

Summary:

With the help of the N/NN relevance factor (age, sex, ADIY test), you can determine the "is-state", the bio-physical "should-state" as well as the area that needs to be worked on.

These examination steps do not give you information as to the momentary functional world that you should be in but shows you the fitting asymmetric movements that you need ("should-way"). At the same time you will receive information about the location (LISFACT or STATOF group) where you will have to do your asymmetric correcting movements.

The N/NN factors of relevance will give you a clue as to **WHERE** and **HOW** you must precede to be in complete control of your health again.

A further factor of capital importance is the environment in which the relevant body processes take place. The milieu of excess is an extremely acidic, aggressive and dangerous milieu. The milieu of deficiency is more alkaline and "friendlier". It is in this milieu of excess in which expansion (infection for example) develops while in the deficiency milieu it will be more reduction, an example being arthrosis.

2. Existence of a "Symptony"?

You will find the important information on pages 15-17.

Follow these directions:

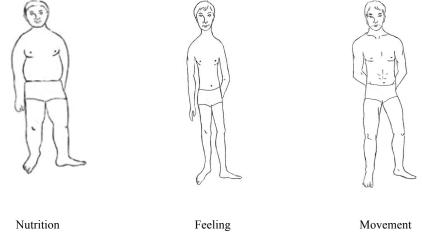
Determine your "enemy"; either it is your sacrum or your occiput. These hostile functional circumstances must be eliminated by all means. Here the handbook "Der heimliche Favorit" can help you. You will find relevant exercises for the behavior of the occiput (ear slant not ok) and for the sacrum (mouth line not ok) on pages 142-143.

Remark :You **must** take care to **eliminate** the origin of a "Symptony" whether you are in the N or the NN world (General Test to the Right). Just add **your movements** for the sacrum and occiput to your daily routine. This is a fundamental requirement.

3. The Next Examination Step

The next examination step has to do with the intended "**should-state**". How should you be, what does nature have planned for you? A small part of this answer will be given to you in this third step.

Illustration 12: Constitutions



A. Your Body Constitution

If the form of your face is round and, your neck is short, your figure full, tendency towards overweight, you can consider yourself to be a "nutrition natural body type*"(*see page 209-211).

If your face is oval and elongated, a long (swan-like) neck, a slim figure, tendency towards underweight you can consider yourself to be a "feeling natural*" (*see p. 212-214).

But if you have a square face form with a well-developed neck and athletic figure and normal weight you must see yourself as a "movement natural*". (*see p. 214-217)

Please pay attention to the following behaviour phenomenon:

The "**nutrition natural**" projects symptoms towards the front and the external outer side (defensive behavior).

The "**feeling natural**" projects symptoms towards the back and to the side internally (flight behavior). The "**movement natural**" projects symptoms on the outer sides (combat behavior)

If your symptom or complaint appears at another location, your behavior is disturbed and a precise signal must be set. Further details later, in the practical part of this book.

Please just note:

Disturbed defensive behavior and/or flight behavior and/or fight behavior.

B. Your actual disposition:

The procedure for this exam is already known to you. It has to do with the observation of the form of your forehead (NN) and chin form (N) by means of profile photos.

Summary:

Note the type of disturbed behavior (defensive, flight or fight)

Note the form of your chin, your forehead and whether your nose is large or small.

4. Determination of your actual "Is-state"

The actual "Is-state" is the result of the divergence from the "should-state". The blocked inclined plane in the body will also become visible (frontal photo) with this fourth step.

The investigation process is already known to you as well. (see page 8 = N mistakes, page 14 = NN mistakes). Write down your discrepancies now. You will thereby find your personal asymmetropathy.

Remark:

If you have to classify yourself in the N-world (General Test to the Right uncomfortable), then the observation of the chin form and eye alone become relevant. If you have to classify yourself in the NN-world your mouth line and forehead form are most relevant. Please note one mistake and never two.

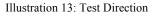
Examination of the Iliac Crests:

Place your thumbs on the iliac crest with the thumbs facing towards your back and compare the level of your right and left iliac crest. Ask yourself if they feel level (normal) or if they feel slanted (not normal).

In the case that they are slanted please note the following: lower on the left = NSI, lower on the right = NSr Remark: If you show a clear anatomical shorter right or left leg (more th

If you show a clear anatomical shorter right or left leg (more than 2.5 cm), then you should do this test anyway





Summary:Note your asymmetropathy (for example : a NNSI- forehead and NNSr- mouth slant = "NN-mistake" or Nsr- chin and NSI- eye slant = "N-mistake"

Note the slant of your iliac crests (NSl or NSr).

5. Determination of Personal Normal Weight

To determine your own "normal" body weight you must respect certain personal factors and gradually incorporate these.

Proceed as follows: The body height minus 100 = metrical normal weight = base weight Early morning weight (on an empty stomach) = actual weight Starting weight + 5% for men = gender weight Starting weight - 5% for women = gender weight Oval or angular facial form: subtract 5% from the gender weight. Round face form: add 5% to the gender weight = constitutional weight. Forward jutting chin: subtract 5% from the gender weight = personal ideal weight. Receding chin: add 5% to the gender weight = personal ideal weight.

6. Determining the bio-physical Cause, Making a Diagnosis

At the end you will list the found results. From these you can quite surely find the bio-physical cause and with that the final bio-physical diagnosis of your momentary state of health.

Example:

Woman, 40 years old, menstruating, body weight of 58 kilos, 165 cm tall, feeling natural, NNSI forehead, NSI chin. Symptoms near the right inguinal region, right shoulder. General Test to the Right is comfortable.

Step 1: Determine the N or the NN relevance factors. Age = NNSI, General Test to the Right = comfortable, gender = NNSI. "**Should-state**" = **NNSI**

Step 2: Existence of a "Symptony"?

Right mouth slant, no ear slant denotes "*Symptony*" (the enemy is the NNSr sacrum). Sacrum exercises in the direction of NNSI, "should-way" at the sacrum = NNSI.

Step 3: Determination of personal constitution and actual disposition: Oval face form, long, denoting the "feeling natural" and thus a troubled flight reaction = NNSI.

Step 4: Determination of a discrepancy between the "should-state" and fixed slanted plane.

NNSI forehead and mouth slant on the right result in a divergence (Asymmetropathy). **"Is-state"= NNSr.** Right iliac crest lower = NSr (relevant for diagnosis, neutral partner of NNSI). NSr = therapeutically not relevant here (N world), see General Test to the Right

Step 5:

Normal weight (GNW) = functionally legitimate

Step 6:

Diagnosis: NNSr is fixed (Is-state), NNSI ideally should be the "should-state".

Because of the relevant NNSr "is-state", a reduction of NNSr is necessary. This can be reached with the NNSI "should- way".

The area to be worked on is the STATOF group and in the direction of NNSI, the "should-way" being NNSI (in the region of the symptoms, which are the groin area and the shoulder). The "*Symptony*" must also be taken into consideration.

Relevant exercises:

Symptom area of the groin + Symptony" = which would be the sacrum exercise NNSI (done in **the oppo-site direction** of *page 142, image 96).

Remark: The way back to total health is brought by the given exercises. At the same time one is controlling the precursors to possible pathologies in the future.

A general but very helpful method is the observation of the slant direction of the iliac crests. If you take in consideration that the pelvis (=N-world) is lower on the left side = NSl, the "should-way" will be NSr and automatically the NN-way "should-way" will be NNSl, since the two movements fit together.

The inspection of both iliac crests leads to a Quick Basic Test that can be done several times a day.

Quick Basic Test: Three General Movements to the Right

"OPF- should-way" (Is-state NSI): NSr and/or NNSI should-way):



 Illustrations 14-16:
 NSr-movement
 NSrRl-movement

 Nsr-movement
 NNSl-movement
 NSrRl-movement

 These three movements should be done several times a day (NSr, NNSl, NSrRl) (see the following practical section).
 Section (NSr, NNSl, NSrRl) (see the following practical section)

Quick Basic Test: Three General Movements to the Left

"PF should-way" (is-state NSr): NSl and/or NNSr should-way)



NSI-movement NSIRr-movement Do these three movements several times a day (NSI, NNSr, NSIRr). Please see the following practical section. Remark:

Do not let yourself get confused by seeming contradictions when you make your personal diagnosis. The important thing is always your "should-state". It is easy to this and when you have it, your goal has just about been reached. If in doubt, follow your gender: female = NNSI (OPF), male NNSr (PF). If you are still not sure, you can get help from our self-help service. For this you can go onto our website www.renner-methode.de, and then click on "Do you need help?

You can also get help with any of the ADIY/ADIY-PC-mediators. To find them go onto our website and click on the category "ADIY-teachers". Don't hesitate in taking advantage of this service. Only one thing is important for us and that is keeping you healthy with the proper strategies and thereby avoiding major errors.

Body Weight

Normal, under- or over-weight from the bio-physical perspective

(Help, why is my weight going crazy?)

People with normal weight usually are critical of very over- or underweight individuals and think that it is because of their eating habits. But the reality of the situation looks different. Really starved looking (thin models) or over- eaters are a minority among those who are too fat or too thin. There must be other steering mechanisms that have been unknown until now. If looked at closely, pathological over- and underweight as well as normal thinness or fullness are also dependant on certain physical laws. These function under very individual circumstances and are sometimes tied to vital control mechanisms of your own individual biological system. Over- or underweight are often the only and best watchdogs of our own personal biological order.

Now the question must be asked as to which genetic premises are given with regards to your being slim or full-bodied?

Are you perhaps condemned to real over- or underweight? Can you make a durable change within a certain framework?

The answer to this question can only be found with the knowledge of the triggering factors and the mechanisms responsible. These can explain why your fluctuating weight and body proportions of your figure.

1. Bio-physical Prerequisites for Being Slender: the Deficiency Types

Illustrations 20 - 22



NN- world (NNSI forehead) N- world (NSI chin) Deficiency type (NNSI + NSI + small nose)

A. **NNSI- forehead** (NN-world) means "**deficiency** in the excess world", meaning the "female" (NN -deficiency type):

If the STATOF parts (**NN**-structures) of the human body are moved in the direction of left side-bending this will simultaneously activate the "Water element" (we include knowledge from Traditional Chinese Medicine to bring about a better understanding) as compensatory behavior. When we speak of the Water element in this way we go far beyond the compensatory process because it is a functional type ("should-way"). Thus all structures and behavioral patterns that have to do with the Water element in any way will be affected by such stimulation and the NNSI type (bearer of an NNSI forehead) will be affected the most.

The following structures, behavior patterns and characteristics belong to the *Water element* (blue color):

- Bones, skeleton, teeth, body hair, body static, ears, kidneys, bladder, lower body openings,
- (external genital organs, anus) and sympathetic nervous system deficiency.
- Forward bending posture, willpower, wisdom, fear, dread, reduction and breakdown of body tissues. NNSI- forehead (NN-world) means "deficiency in the excess world", meaning the "female" (NN -deficiency type):
- All that is congenital: hearing, listening, inhalation, vitality, sexuality, end of life (old woman and men), compensation, adaptation, winter (felt sense of cold), midnight, water balance, cold, tumes-cence.

The Five Most Important Factors:

- Structures, which do not decay (bone, teeth, hair),
- Inhalation,
- Hearing,
- Fear and dread,
- Fertility

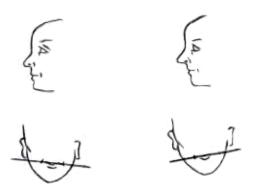
The *Water element* marks the end and the beginning of a new life (conception, pregnancy). The two processes of dying and birth are therefore dependant on its constant presence. The presence of water in its dynamic form is decisive for the female menstrual period (Water principle) and for the growing up of the child (the Wood principle).

Should a person show a "NNSI-forehead" then the Water element must function especially well and must not, in any case, be disturbed by a mechanical mistake of the "fixed NNSr" type in the STATOF region (*see page 81). This would be a male pattern.

Bearers of an "NNSI-forehead" show a great tolerance in regards to being slender or thin (fashion models) and are absolutely not sensitive to being underweight. The upper body is mainly affected (small thorax, normal, smaller breast in women, slender long neck, dainty arms and hands, elongated face form). The lower body, belly, hips, legs and feet) are not subject to the Water principle but to the principles of Metal and Wood (please also refer to the prominent or receding chin).

Summary:

A left slant (NNSI) results in an activation of the Water element (Blue function) within the non-neutral world of movement (STATOF Group). This activation does not solely pertain to organic structures and functional processes but also to psychological and mental behavior as well as other phenomena (for example, permanent disturbances). Bearers of an NNSI-forehead are particularly sensitive in this respect. The correct, undisturbed functioning of the Water element shows itself in phenomena of weight loss in the upper part of the body. The upper body seems slimmer than the lower. Weight gain of the upper body (large breasts, for example) can lead us to think that the Water element needs to be worked on.



Bearers of an NNSI-forehead should not show a right slanted mouth line. This would also be considered as wrong behaviour of the Water element. The seamless functioning shows itself through the presence of a left mouth slant. The lesser the slant, the better the function of the water balance will be. If a person with an NNSI-forehead is overweight (above and below) then we call this error "**blue Blue**".

Illustrations 23 und 24: normal behavior on the left, dysfunctional behavior on the right

NNSI is always identical to the inner function of "deficiency in the excess world". At the same time this is the disposition of people who have an NNSI forehead. Such a body will not "overheat" or "overflow" when everything is abundant and full (as in childhood, pregnancy and in women with menstrual periods). Negative examples of such "overflow" are heart attacks, strokes, epileptic seizures, nosebleeds, miscarriages, heavy period bleeding etc.

According to Traditional Chinese Medicine, everything is in constant transition and is furthermore connected to one another by way of the transition between the elements. NNS1 ("deficiency in the excess world") means that the functional state will change with time (assuming that the biological system is appropriately flexible) and will sooner or later inevitably bring about "excess in the excess world". If this flexibility is reduced or blocked the body will be forced to increase its weight; fixed inner deficiency always needs an increase of outer excess (weight gain) to exist. The weight will first develop only on the upper body and later also on the lower body. The blue overweight has come into existence. You now see before you the first classical physical weight error.

If the flexibility of a person is once again optimal and undisturbed, then the body will attempt to try to lower its weight because flexible inner deficiency in times of excess creates a need for increased deficiency to be able to transform correctly.

Summary :

Individuals with a clearly visible "NNSI-forehead" should be slender! This slenderness pertains mainly to the upper body. Existing overweight is an indication for a serious disturbance of the Water element for these individuals.

B. NSI - chin (N world) means "deficiency in the deficiency world", meaning "masculin", N -deficiency- type:

We give the neutral side- bending ("NSI") the color violet. Violet is the color of Metal in our explanation, or better yet, the Metal element. (*see pages 154-158)

Left side-bending within certain LISFACT areas of the "N-world" of the human body (*see pages 78, 79) stimulate the activity certain elimination processes. If we speak of the *Metal element*, this type of stimulation goes beyond the normal extent of what is physiologically known. Affected are are all structures, functions and behavior patterns that have anything at all to do with, or are interwoven into, the *Metal* element (TCM model).

The following structures, behaviour patterns, and characteristics belong to the *Metal element* (*Violet color*):

- Skin and body hair, lungs, bronchi, nose, sinus cavities, larynx, vocal chords, large intestine, rectum, appendix, immune system, sweat glands.

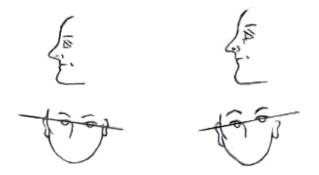
-Lordosis of the spinal column, back extension (N), grief, sorrow, crying, exhale, bowel movement, immune strength, smell, scent, intuition, reflectiveness, cold sweating, weakness, worrying.

-Autumn of life.

The Five Most Important Factors Are:

-Grief and sorrow, -Excretion (exhale and bowel movement) - Skin function -Function of the nose -Tone of voice The *Metal* element marks the *ageing process*. The presence of *Metal* in its dynamic form is important for this period of life.

If a person has a NSI chin form then the Metal element must function especially well and that is valid for all ages and in particular for seniors. In any case there should not be a mechanical error of the type "fixed NSr" in the LISFACT group because it would impair function. This is a prerequisite for 100% health.



Bearers of an NSI chin should not exhibit an eye slant (NSr) to the right. This would also be considered as a dysfunctional behavior within the Metal element. The seamless functioning can be seen by a discreet left eye slant. The more discreet the line is, the better the function of excretion in the body. If a person with an NSI chin suffers from overweight (above as below), then we call this "violet Violet"

Illustrations 25 and 26: normal behaviour on the left, faulty behavior on the right

Bearers of an "NSI-chin" are not only tolerant to being slender and underweight but are also not sensitive to being underweight. It originates mainly in the lower body (area below the navel, belly, buttocks, hip region and the legs).

Summary:

A left side-bending movement (NSI) leads to the stimulation of the Metal element (violet function) within the neutral movement world (LISFACT -group). Organic structures and functions as well as psychic and mental behavior patterns as well as certain time processes are influenced by this stimulation. Bearers of an "NSI-chin" are especially vulnerable to these influences. The normal functioning of the Metal element shows itself in the phenomenon of *weight loss in the lower body*. The lower body seems very thin compared to the upper one. The malfunction of this element is expressed through *weight gain in the lower body* (full legs, swollen legs, fullness in hip and gluteal area).

"NSI" is identical to the inner state of "deficiency in the deficiency world". At the same time this is the disposition of people who exhibit an "NSI-chin". Such a body would, by proper functioning, (normal reduction of old age) never fill up or heat up in times of deficiency. (Erroneous functions pertaining to this would be: fever, lung infection, constipation, bronchial asthma, pain syndromes.)

Unhampered "deficiency in the deficiency world" means that this functional state must be able to transform at the appropriate time and make space for "excess in the deficiency world". If this flexibility is reduced or blocked then the body will be forced to increase its weight. Blocked inner deficiency needs an increased amount of outer excess (weight gain), to be able to continue. This fullness originates only on the bottom in the beginning, and above later on. The *Violet overweight* has come into existence ("violetViolet"). You see before you the second classical physical weight error.

If the flexibility of the person is good and undisturbed then the body will try to reduce weight because flexible inner deficiency needs outer deficiency to be able to transform correctly.

Summary:

Persons with a clearly visible "NSI-chin" should be slender! This slenderness mainly pertains to the lower body (legs, hips, abdomen). The existence of too much weight is the indication of a disturbance in the Metal element for this group of persons and should be taken seriously.

Remark:

Each person has his/her own disposition, and his/her own physical companion. It is interesting that a biological biofeedback system, with all relevant measurements, is contained in the human musculoskeletal system (possibly in animals and plants too) and created for the "inner physician".

With the help of this disposition we are very capable of distinguishing how our weight should be. If there is a tendency towards slenderness is present (NNSI-forehead combined with NSI-chin = *deficiency type*), the suggestion is made to counter this with the help of asymmetric movement systems.

2. Bio-physical Prerequisites for Being Full Figured The *Excess* - Types

Illustrations 27 - 29:







(NSr) Excess-Types(NNSr + NSr + large nose)

NN – World (NNSr)

N – World

A. NNSr - Forehead (NN world) = EXCESS in the excess world = "Masculine"

(NN - fullness - type):

We attribute the non-neutral side-bending to the right, "NNSr" the color red. Red is the color of fire, more precisely the *Fire element* (*see pages 158-165) Side-bending to the right within the STATOF-region of the NN-world of the human body stimulates blood circulation and circulation in general. If we speak of the *Fire element* then the effects go far beyond the mere physiological processes. All structures (heart, vessels) and behavior patterns that have to do with *Fire* in any way are concerned.

The following structures, factors and behaviour patterns belong to the *Fire element*:

-heart, circulation, small intestine, brain, tongue, sweat glands, sympathetic +

-the feeling of desire and joy, hectic, nervousness, expansion of organs and body tissue (inside and above), communicative, control of will and intellect, charisma (shining eyes), hot sweating.

-digestive processes middle-age adults, the summer of life, the south, heat, daytime, memory, the thought process, the function of the tongue (tasting, articulation).

The leading five factors are:

- -joy, desire, charisma
- middle age (men)
- -the thought process
- -tasting, speaking, articulation

The *Fire* element marks the process of becoming adult, i.e. maturity. It is the central part of all human life and is especially important for the masculine gender.

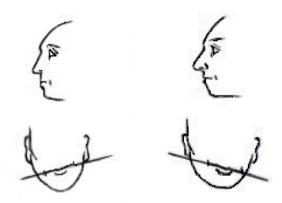
If a person has an "NNSr-forehead" then at least his or her Fire element must function seamlessly and without dysfunction.

Bearers of an "NNSr-forehead" exhibit tolerance to being full-bodied and are not sensitive to being overweight. The effects can mainly be seen on the upper body (breast development in men, large breasts in women, voluminous arms, short neck, round face, reddish face). The lower body is not susceptible to this weight gain.

Summary:

A local side-bend to the right (NNSr) leads to the stimulation of the Fire element (red) within the world of NN movement (STATOF). Not only are organic structures and functional processes are concerned but also certain processes related to time as well as psychological behavior patterns. Bearers of an NNSr-forehead are especially subject to this. The upper body seems fuller than the lower body. The malfunctioning of the Fire element can be seen by weight loss in the upper body (slim upper body). Bearers of an NNSr-forehead should not have a left mouth slant (NNSI). That would be considered a female pattern.

That means bearers of an NNSr-forehead should not show a left mouth slant (NNSI). This would also be a poor function within the Fire element. The unhampered function would show itself through the presence of a mouth slant to the right. The more discreet the line, the better the function of the circulatory system. If a person with an NNSr-forehead is underweight (above and below), we call this dysfunction **"red Red"**. Such a dysfunction is much more dangerous than "blue Blue" or "violet Violet".



Illustrations 30 and 31:

31: left, normal behavior-,

right, dysfunction

NNSr is identical to the inner function of "excess in the excess world". At the same time this is the genetic predisposition of persons that have a "NNSr-forehead". Such a body can, in times of excess, when every-thing is abundant, fill up quickly and overheat. (Sympathicotonia).

Correct functioning of "excess in the excess world" denotes that this state must be able to make a flexible transformation (goal: attainment of "deficiency in the excess world" If flexibility in the transition to deficiency is reduced or blocked then the body will be forced to reduce itself drastically. Fixed or continuous inner excess needs increased outer deficiency (weight loss) as a counter-regulative measure. A vicious circle comes into being. At first this weight loss appears only on the upper body but later spreads below. *The red underweight* has come into being (*red Red*). You see the classical physical weight-error before you.

The body will, within normal circumstances, in a movement towards emptiness without restrictions or blockage, attempt to increase its weight. Flexible inner fullness in the time frame of fullness also requires increased outer fullness (weight gain as a counter regulatory mechanism), to be able to move and transform in the direction of deficiency. Overweight men are not as much at risk as women.

Summary :

Individuals with a clearly visible "NNSr-forehead" can have a fuller body. This fullness can be seen primarily in the upper body. The existence of underweight is the sign of a serious and unsafe disorder in this person. Men who are underweight must move towards becoming bio-physically healthy.

B. NSr -chin (N-World) = EXCESS in the deficiency world = "feminine"

N- Excess- Types

We attribute the neutral side-bending NSr with the color green. Green is the color of Wood, or more generally stated, the Wood element (*see pages 151-154).

A right slant within the structures of the LISFACT-Group (*see pages 78-79) of the N-world within the human body stimulate metabolism. If we speak of the Wood element in this context then this stimulation also goes far above what is physiologically known. It includes behavior, structures and processes that have to do with this element (TCM model).

Structures, behavior and signs that belong for the Wood element:

-Liver, gallbladder and bile, sinewy musculature used for posture (postural muscles), tendons, eyes, nails, parasympathetic deficit.

-Anger, rage, aggressiveness, edgy and choleric, expansion of tissues and organs (outside, below) symptoms of menopause (hot flashes), increased motor skills and dynamism, activity, courage and sense of purpose.

-Vision, perception, comprehension (function of the eyes), the spring of life, beginning, young years, blood distribution, blood flow.

The Five most Important Factors:

-Aggressiveness (symptoms of anger)
-Metabolism, expansion,
-Vision,
-Tendons and nails,
-Young people.

The Wood element marks the process of *growing up*. The presence of *Wood* in its elementary form is vital for the first part of life.

If a person shows an "NSr-chin" (retro-chin) then the *Wood* element should exhibit an especially seamless and trouble-free function. Of course this is valid for all ages but especially for the growing child and for the aging process among older women.

Bearers of an "NSr-chin" exhibit a large tolerance towards being full and are largely insensitive towards overweight. Such overweight develops mainly in the lower body (full lower body, belly and pelvis that seems too wide, wide hips, overly developed posterior, full legs).

Summary:

Right sidebending (NSr) leads to the stimulation of the *Wood* element (function green) within the neutral movement world (LISFACT-group). All processes that have to do with the Wood element are concerned by this stimulation. Bearers of an "NSr-chin" are especially prone to such processes. The proper functioning of the Wood element in these individuals can be seen in the phenomena of lower body weight gain. These proportions are normal for the bearers of an NSr-chin. The lower body seems oversized in comparison to the upper body. The dysfunction of this element is expressed through weight loss in the lower body.

Furthermore, bearers of an "NSr-chin" should not have a left eye slant (NSI) because this would also be a disfunction. The unhampered functioning can be seen by a discreet right eye slant (NSr). The lesser this is visible the more flexible is the metabolism. We call this dysfunction "green Green" if a person with a NSr chin is underweight (above and below).

Such a body will, in times of deficiency quickly become too full and overheat, causing like physical deterioration processes in old age (for example hot flashes in menopause). Stated clearly, this means that inner fullness in times of deficiency denotes that this state can transform in time and make space for the necessary deficiency. If this flexibility is reduced of blocked then the body must lower its weight. Blocked inner excess demands increased outer deficiency as a counter regulative measure (weight-loss). Such regulative deficiency first develops only below and later above. The green underweight has come into being ("green Green"). You see in front of you the fourth classical and precarious physical weight dysfunction.

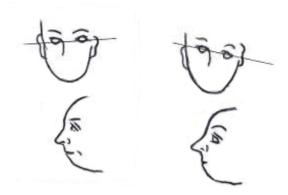


Illustration 32 and

33 :Left, normal, right dysfunctional

If, on the contrary, the flexibility is good and unhampered, then every body will try to increase its weight. Normal flexible behavior in times of deficiency need a certain degree of outer excess (weight gain) to be able to further proper transformation.

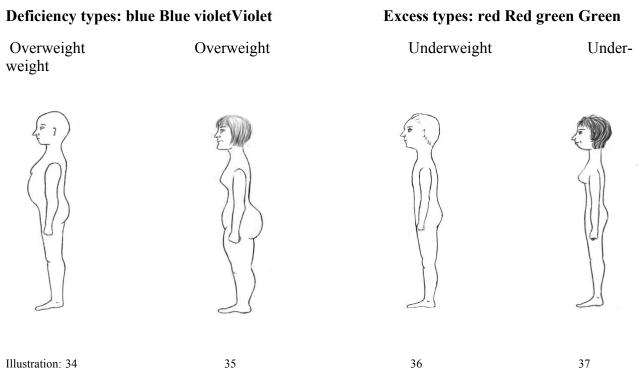
Summary:

Persons with a clear "NSr-chin should be full-bodied! This weight gain shows itself primarily in the lower body. Existing underweight is the sign of a dysfunction of the Wood element for this group of people.

Remark:

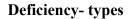
The faulty functioning with regards to a genetic predisposition towards over-weight is much more problematic than a genetic predisposition towards underweight. Blockages in the transformational function with this disposition lead to expansive processes that are seen as counter-regulatory underweight. These processes can quickly derail. Bearers of an "NNSr-forehead" or a "NSr-chin" should take care of themselves with more attention than those with an "NNSI-forehead" or a "NSI-chin". This seems important for us to mention.

You must act:



Personal assessment of how your weight as well as your body proportions have developed with regard to your individual disposition (form of chin and forehead) gives you a profound view into your body and shows you whether your must act immediately or whether you can wait.

You must act:



Overweight



Excess- types Underweight



Illustration: 38 and 39

Summary of Fundamental Dysfunction

There is an urgent need of action when:

1. General

- if the General Test to the Right is not comfortable or painful for adults (up to age 50), for pregnant women and for women after childbirth. This is an indication for the N-world (old),
- if the "should-state" (profile) does not coincide with the "is-state" (frontal view),
- if women or men unwillingly remain childless,
- if young adults suffer from heart and circulation problems and are listless and without joy,
- if they are clearly over or underweight,
- if they suffer from "blue Blue", "violet Violet", "red Red" or "green Green".
- if you are overweight and are also a deficiency type or underweight and an excess type,
- if adults feel absolutely no aggressiveness,
- if young adults have heartburn (acidification of the stomach),
- if your mouth-ear line does not run parallel and your therefore suffer from a "Symptony",
- if our biological age does not coincide with your biophysical age,
- if you have a constitutional behaviour disorder (for example flight behavior),
- if your pelvis is not level while standing
- 2. Children and teens
 - if the general ADIY-test is not comfortable or painful in children or teens.
 - When there are signs of a degenerative process in young people (arthrosis, degeneration, atrophy etc.).
 - if children or teens are too thin or overweight.
 - if young people have increasing difficulty in bending forward,
 - if teens and children have difficulty exhaling (bronchial asthma for example),
 - if young people are extremely sensitive to light (wearers of sunglasses),
 - if young people feel no desire for sports and movement and would rather just sit around,
 - if young people don't like to be out in the sun and the heat (tanning and sunbathing),
 - if wounds do not heal in the early years,
 - if young people don't like to side-bend to the right or turn to the right (upper body, head).
 - if young people have symptoms on the outside (skin) or below (legs, knee, feet).
 - if young people don't like to roll into the foetal position (sleep),
 - if the young can't make fists (resistance to social injustice),
 - if the development of your children is or normal and appropriate,
 - if the water balance of a child is does not seem normal (bedwetting),
 - if young individuals have to write everything down (bad memory),
 - if a child has an anatomically shorter right leg

3. Women

- if the General ADIY-Test is not comfortable or painful for pregnant women or women after childbirth,
- if there are symptoms or complications during pregnancy,
- if the breastfeeding period is too short or falls away completely,
- if young women need to enter into the N-world to heal,
- if women lose their periods too early or if menstruation is painful,
- if gall- or liver stones appear during menopause

4. Senior citizens

- if the General ADIY-Test is very uncomfortable,
- if expansive processes stand in the forefront (for example allergies, infections and fever),
- if seniors are overweight,
- if seniors have a hard time leaning back (lordose in the lumbar and cervical spine),
- if seniors have difficulty inhaling (kidney symptom)
- if seniors don't have the need to relax,
- if seniors clearly have an "NSr-chin,
- if it is impossible for seniors to lie flat on their back,
- if seniors don't like to side-bend to the left or to turn to the left (upper body, head),
- if seniors have symptoms in the upper part of the body (headache, migraine, dizziness, memory problems),
- if seniors need to constantly work on their "NN-world"
- if seniors suffer from constipation and susceptibility to infections,
- if seniors do not feel any sadness,
- if seniors have an anatomically shorter left leg

When these factors appear it would be advisable and timely to start applying the ADIY principles. You will learn exactly what you must do, to re-establish your genetically determined state of health in the last part of this handbook.

The First ADIY – Steps

Putting together your personal basic health program :

The first ADIY steps come from the following questions:

1. Check your Iliac Crest (Right or left slant? = first clue as to whether you have fixed excess (NSr) or deficiency (NSl)!

The slant of the iliac crest has *first priority*. If you feel one side of your iliac crest lower than the other, you need to use the combination of 3 exercises on page 33, and this, even if you feel only a slight difference.

2. "General Test to the Right", comfortable or uncomfortable?

This test has the second priority: A comfortable test denotes "NN". You have to take care of your "NN-world". An uncomfortable test denotes "N". You have to take care of your "N-world.

3. Existance of a "*Symptony*"? (Divergent mouth and ear lines = qualitative decrease of the autonomic nervous system (disturbances of the sympathetic nervous system). The "Symptony" has third priority. The respective occiput or sacrum movements should follow in this case.

These questions must be answered and then used for the first steps.

Remark:

The **Start Strategy** is the first important step of the ADIY System. With the help of these seemingly complicated first steps you will be able to reduce the impact of a **severe pathology**. Such mistakes can be eliminated from the body only if you show a biomechanical and biophysical structural order. Exactly this structural order is put into place with the ADIY opening techniques. With this proper start you will be able to successfully continue the process:

1. Check your Iliac Crest

Check to see if your iliac crests are level in the standing position (see page 30, ill. 13). If you discover a right- or left slanted iliac crest you have found an error and now you will be able to start with the proper beginning ADIY steps (see page 33, ill 14-21) to alleviate it.

If your iliac crests are level after this, the next step will be the General Test to the Right

2. General Test to the Right



Illustration 41: Beginning of Test

Illustration 42 : Middle of Test

Illustration 43 : End of Test

"General Test to the Right": Begin by turning your upper body to the right (image 40), then go on and add a right side-bending of the upper body (image 42) and incline your upper body at the end (image 43).

If the "General Test to the Right" feels comfortable you should work on your "NN-world"

(STABOF -group), * page 81). Now you will be able to successfully make the necessary repairs. As a general rule you will find that the area in which you have to work on will be near the symptom.

If the results of the General Test do not seem clear, the form of the forehead gives way to the following replacement guidelines

NNSI - forehead form = also use NNSI- movement at the beginning. NNSr - forhead form = also use NNSr- movement at the beginning.

If the "General Test to the Right" is not comfortable then you should bring the components of your N -world back into working order (LISFACT -Group, * see page 78/79). At this time working on this area will bring about repair. As a general rule this area will be near the area of pain or symptoms.

If the results of the General Test to the Right do not seem clear you can use the chin form which gives way to the following replacement guidelines:

NSI - chin form = also use NSI- movement at the beginning. NSr - chin form = also use NSr- movement at the beginning

You can find these movements on page 33.

You can use the book "Der Heimliche Favorit" if you want to read more about the variety of exercises and which asymmetric movements that would be right for you, (NN-world = pages 115-146, N-world =

*pages 89 - 113). But we will surely also lead you with ease through this maze of possible asymmetric movements.

Instructions for the Beginning Movements:

3 General Movements to the Right for the Goal of OPF (NSr, NNSI, NSrRI)

"NSr-Movement":

(See illustration 14, page 33) Stand straight, knees relaxed and the left hand in a fist. Incline your body towards the right side and let the palm of your right hand slide on the upper side of the leg in the direction of the knee. Come back to the initial position and repeat the movement 4 to 5 times. The lumbar lordosis must remain during the whole exercise. If this movement is not comfortable, repeat it carefully and only to your own limit!

"NNSI Movement":

(See illustration15 on page 33) You are standing and flexed forward, both legs slightly relaxed (knees relaxed), left fist. Both hands are on the left knee. Now bend further to the left and move your forehead towards the left knee. Come back to the original position and repeat as before, 4-5 times. If this movement sequence is **uncomfortable**, repeat it **carefully** and only to your personal limit!

"NSrRI- Movement":

Stand straight, knees relaxed, left fist. Incline your body to the right with the right arm falling relaxed towards the ground. Now turn your upper body towards the left, close your right eye and look up for a few seconds with your left eye. Come back to the original position and repeat this combined movement 4 to 5 times. Keep the lumbar lordosis during the whole exercise! If this movement sequence is **uncomfortable** or if you have trouble closing your right eye, repeat it **carefully** and only up to your own personal limit with both eyes open.

Check your iliac crests again. Are they level? If yes, check them again on the next day. If your iliac crests remain level you do not have to continue these exercises. If they return to being slanted again, do the three movements daily until your iliac crests remain level. Check if you can use one of the special shoe insoles belonging to the ADIY Concept.

3 General Movements to the Left for the Goal of PF (NSI, NNSr, NSIRr)

"NSI-Movement":

(See illustration 17, page 33) Stand straight, knees relaxed and the right hand in a fist. Incline your body towards the left side and let the palm of your left hand slide on the upper side of the leg in the direction of the knee. Come back to the initial position and repeat the movement 4 to 5 times. The lumbar lordosis must remain during the whole exercise. If this movement is not comfortable, repeat it carefully and only to your own limit!

"NNSr Movement":

(See illustration 18 on page 33) You are standing and flexed forward, both legs slightly relaxed (knees relaxed), right fist. Both hands are on the right knee. Now bend further to the right and move your forehead towards the right knee. Come back to the original position and repeat as before, 4-5 times. If this movement sequence is **uncomfortable**, repeat it **carefully** and only to your personal limit!

"NSIRr- Movement":

You are standing straight, knees relaxed, right fist. Incline your body to the left with the left arm falling relaxed towards the ground. Now turn your upper body towards the right, close your left eye and look up for a few seconds with your right eye. Come back to the original position and repeat this combined movement 4 to 5 times if it feels comfortable. If not, follow this rule; both eyes open and only to your personal limit.

Check your iliac crests again. Are they level?

3. "Symptony"

(Divergence of the Mouth - Ear - Lines)

(See pages 20-22 Friend or Enemy)

You can identify your "enemy" and befriend it with the appropriate movements so it will become your "friend".

You have 4 possible exercises that you can also read about in "Der Heimliche Favorit" (*2 occiput exercises: occiput NNSrRl and NNSIRr = *pages 125/126 as well as sacrum exercises: vertical sacrum NNSr and NNSI = *pages 142/143).

If there is only a slight divergence in the Mouth –Ear –Lines you do not necessarily have to act. If the divergence is obvious, you have to act. If the lines cross on the image, you must also act.

Tip: We suggest that you try out the ADIY Mono-Insole-Concept:

- ADIY-Mono-Insoles-M for men.
- ADIY-Mono-Insoles-F for women
- •

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Instructions for the 4 "Symptony" Movements:

"Occiput – NNSrRl – Movement ":

Movement End (illustration 46):

apply here, see image 36: movement end.)

Initial position (illustration 41): Sit with your back flexed towards the right and brace yourself comfortably with your right lower arm on your right thigh. The left lower leg is turned outwards and the left arm inwards. Bend your flexed head as far down as possible (chin in direction of sternum). Make sure your original position feels comfortable. Bring your head as far as you can towards your right knee.

Movement Position (illustration 45): Now slowly turn your head as far to the left as possible while remaining comfortable. Now close your right eye and look towards the left knee. If you have difficulty closing your right eye don't worry. Gently nod your head a few times towards the floor in this position. In this way you will mobilize and release your occiput. Go back to the original position and stand up.

Repeat the head movements in the same erect sitting position (without the turned out lower leg and arm). First bend your head towards the right and turn it to the left and nod several times towards the ground in front of you. (The right-sided eye closure also does not

Illustration 44: Initial position

Illustration 45 : Movement position

Illustration 46 : Movement end







"Occiput - NNSr - Movement"-

Starting position, movement position and movement end are identical to the "occiput –NNSrR1 –movement" but on the opposite side and with the left eye closed.

"NNSr - Vertical Sacrum Movement"

Starting position (illustration 47)

You are sitting flexed forward towards the right. Both lower legs are turned to the right, both feet on the floor. Both arms hang relaxed towards the floor. Place your head above your right knee. Make a fist with your right hand and your left fingers are spread apart. The right eye is closed and the left one open. If this starting position feels comfortable you can inhale and exhale with your intention towards your back and down in the direction of your sacrum. Ten breaths are sufficient.



Starting position and movement position are identical to the movement described above but in the opposite direction and with the left eye closed.



Illustration 47:NNSrRl movement

Summary:

The *right start* to the ADIY- system is of utmost importance. Begin by checking both of your iliac crests. Each and every body makes an effort to keep the pelvis completely level. Even if you had a clear left or right shorter leg, the body would still do its best to straighten the iliac crests. Possible examples could be bending the longer leg, not placing the heel of the shorter leg on the ground or torquing the pelvis until the iliac crest of the lower side moves up. The possibilities of equalizing the iliac crests are incredibly vast.

Now we must ask the question about why the body makes such an attempt to keep the pelvis level? Both iliac bones always try to keep parallel with the horizon. The level pelvis provides the proper orientation for the human sense of equilibrium and thereby the best possible coordination of movement sequences as well as the optical conscience and the resulting estimation of distances. It also is the most important measurement for the determination of a real level plane. Therefore, a slanted pelvis is one of the most important signs *that one is not in harmony with one's environment and thereby a sign that one is "NOT OK"*.

Bearers of a slanted pelvis, independent of its origin, must be considered as unhealthy. If the body is not able to keep the pelvis level by its own force, it needs to be helped.

If you have the feeling that your pelvis is not straight you should do the described and suggested combination of three movements (page 33). If your iliac crests look straight while standing then you are basically "OK", regardless of what symptoms you might have at the time. The confidence and assurance that this sign of stable health gives is priceless. Comments :

The existing slant of the pelvis gives us some interesting information. A left slanted pelvis and iliac crests gives the body the signal that you are fixed in deficiency (NSI or NNSI) and a right slanted pelvis and iliac crests, that you are fixed in excess. This statement is very important!

The ADIY starts takes on an importance because of the above-mentioned reasons.

Observe your children with this in mind. Your child stands before you, back facing towards you. Place your hands on the iliac crests from behind and check the child's pelvis for a possible slant. If there is a slant show your child how to do the 3-part movement combination and do it with him or her. You will be surprised at how quickly the pelvis straightens. It is also important to recheck the pelvis when your child is sick.

Often the 3-part opening combination is enough because it already contains crucial information.

Before you continue to use this handbook you should practice the iliac crest check and the opening 3-part movement for about a week. Read through the beginning of the handbook and concentrate on the details, especially those that pertain to you. Make notes and try to make a short summary of your strengths and weaknesses. The most important element is the determination of your "*should – state*". The knowledge of this "Should – state" is understandably necessary to be able to correctly determine any discrepancies.

And only after this should you begin with the specific ADIY practical section introduced below.

Comment on the "should - state":

Your "should – state" is influenced by 2 factors: "gender or age" If you are in doubt, use your gender because it always remains the same.

The following is valid:

Female = "NNSI-should" (OPF) = Water principle.

Male = "NNSr-should" (PF) = Fire principle.

The medium of gender belongs to the NN-world (General test to the Right comfortable)

Age is subject to change.

The following is valid:

Growth and rapid ageing = "NSr-should" (OPF) = Wood principle.

"Full grown" and ageing slowly = "NSI-should" (PF) = Metal principle.

The medium of age belongs to the N-world (uncomfortable General Test to the Right). This rule has proved to be useful in practice.

Specific ADIY – Strategies

How do I stay healthy in each phase of life? The answer: By using the asymmetric human biophysical movements as they are suggested here.

Now that we have taken time with the start strategies we can go on to answering the many unanswered questions.

What is the correct personal path for staying healthy? Which asymmetrical movements and strategies should one get used to in order to remain stable? How do I strengthen and take care of my "should- state"? Which factors are important for me for the rest of my life?

The possibilities span from asymmetric movements to static aids and appropriate healing plants and minerals and an individual, appropriate diet and lifestyle.

But first the most basic question to be answered is "N" or "NN", which is the same as "neutral" or "nonneutral". Basically, health always relies on this decision. More is not necessary to stay bio-physically healthy in a planned manner.

Unfortunately there are also contraindications for this type of method and we will mention these in the last chapter "contraindications" (page 112).

The primary goal of your efforts is the preservation of your personal, gender defined, health during the phase of life that you are currently in. This definition is very important since a completely healthy person hardly exists.

Health in the bio-physical sense, meaning individual well being, would comprise of the most precise consensus between the individual "is" and "should" state.

The primary goal of your efforts is the preservation of your personal, gender defined, health during the phase of life that you are currently in. This definition is very important since a completely healthy person hardly exists.

Health in the bio-physical sense, meaning individual well being, would comprise of the most precise consensus between the individual "is" and "Should" state

If the "is-state" is not does not coincide with the "should-state" then the body will be forced into an energy draining compensation and continually loose more health. The body will move closer toward disease. The charge state of your batteries falls dangerously low.

The specific ADIY -Strategies should cover the following areas pertaining to persons and specific subjects:

- 1. The Health of Children and Teens
- 2. The Health of Women
- 3. Health during Pregnancy, Childbirth and Breastfeeding
- 4. Health during Menopause
- 5. The Health of Men
- 6. The Health of Very Old Persons
- 7. Health in Old Age
- 8. The Strategy against Overweight
- 9. The Strategy against Underweight
- 10. The Health and Biological Improvement in Performance of Athletes

Some of the tips are given without explanation. If you are interested you can read about them in the book "*Der heimlich Favorit*". We suggest a membership in the AFA (www.renner-methode.de) for those who are especially interested.

You can find the contact address for the ADIY - insoles and the ADIY teas, in the appendix of this brochure, if you would like to contact us or take advantage of a personal self-help service and contact an ADIY - teacher PC - mediator(<u>www.renner-methode.de/ADIY-Lehrer <http://www.renner-</u> <u>methode.de/ADIY-Lehrer></u>) (see p.114).

All the suggested asymmetrical movement exercises are without side effects if you do *not go beyond* the limit of what is *uncomfortable or painful*. But this does not mean that there will never be any kind of reaction or overreaction in the beginning. These are welcome because they show that the movement has touched upon your fixations. Contact us if you are in doubt and we will be happy to give you advice. It would be a pity if you were not able to reap the maximum benefit out of this highly effective system.

This is also valid for the recommended ADIY - insoles, and ADIY - teas and for all tips pertaining to lifestyle and food.

We would be happy to assist you. Please understand that helping you with your problems is not totally free of charge.

1. The Health of Children and Teens

The biophysical "Should state" of very young people is the function "deficiency in the deficiency world". The *blue* general state comes about through a left slant in the main areas of the STATOF -group (sacrum, tibia, thoracic spine, second cervical vertebrae, occiput, frontal bone). We call this physiological and age related asymmetry the **"Blue NNSI should – way"**. If we really want to reach the biophysical goal of juvenile normal function a large divergence from this blue model (Water element) should not exist (for example, a right mouth slant or overweight). In this case NNSI has to be created or increased, thereby stimulating the Water element.

The forehead form in almost all children is **NNSI** and by the time they are young adults it will end up as NNSr (especially in males). If you find children in their teens with a left mouth slant (NNSI) then you must not necessarily act, unless there are obvious late developmental problems or too much weight. ("blue Blue").

If the mental, psychic, or physical development is hampered in young individuals one should act by all means by stimulating **NNSI** and the **Water element** (rule).

If you find the presence of "**blue Blue**", you have a situation where you have a health problem. The therapy for this is not the theme of this book.

Look up either a HMT therapist (<u>http://www.renner-methode.de/hmt/hmt_therapeutenliste</u> or our self-help service (<u>http://www.renner-methode.de/selbsthilfe/selbsthilfe_therapeutenliste</u>). The therapy is too complicated for a non-professional.

If, for example, you find a discrepancy in the form of an assymetropathy (NNSI- chin =should) and a right mouth slant (NNSr = IS), then you must act, even if your child does not have any symptoms at the present time (silent or early stage of a later disease).

Diagnosis:

The General Test to the Right = comfortable denotes (NN-world), and with children NNSI always has to be increased to encourage the Water element. Water (medium of growth) stimulates Wood (growth).

The General Test to the Right = uncomfortable or painful denotes (N-world). Here one should increase NSr (neutral partner of NNSI) and stimulates the Wood element.

If the General Test to the Right was not comfortable, compare it with the General test to the Left RISIEtest = left rotation, left side-bending of pelvis, lean back. **Not comfortable** indicates **neither/nor**(you can't come to a clear conclusion by way of this test). In this case, use your child's gender and use the correct ADIY shoe insoles and ADIY teas and change the diet and lifestyle.

A clearly anatomically shorter right leg is a problem for every child and teenager. If one suspects this, a full body image made in underwear from the back must be taken. You must observe the vertical gluteal crease, and you will probably discover that the right side is lower and the normally vertical crease veers towards the right. More precise conclusions can be reached with an x-ray of the pelvis in the standing position.

Summary:

"Blue Blue" (juvenile overweight) needs to be in the hands of a therapist or ADIY-teacher /PC mediator! But a *red* discrepancy (right mouth slant =fixed NNSr) can be alleviated alone. The result of the General test to the Right will decide how (see diagnosis)!

Most juvenile developmental problems demand both of an increase of **NNSI** and a stimulation of. water metabolism. We suggest static correction of the right shorter leg by way of the ADIY- Junior- insoles forte \mathcal{O} . We suggest the ADIY-Junior- insole \mathcal{O} when both legs are the same length or when the left leg is shorter.

1.1 General Test to the Right comfortable: increase NNSI, stimulates the *Water element* and promote and encourage static in the sense of NNSI.

1.2 General test to the Right uncomfortable, RISIE- test comfortable: increase NSr, stimulate the Wood element and promote and encourage static in the sense of NSr.

1.3 **"Blue Blue**" = therapeutic action. Insole - and tea program, as well as life-style and eating habits can be applied as a precautionary measure.

Procedure for 1.1:

A. Start: 3 General Movements for the goal of OPF (p. 33, ill. 14-16), even if the iliac crests are level.

B. Basic Movements

Occiput-NNSIRr- Movement (illustration 48).

Initial position: Sitting, flexed towards the left, left foot turned outwards and right arm turned in. Left forearm rests on the left thigh. Left forehead is placed above the left knee.

Movement instructions: close left eye, turn head to the right and down towards the clavicula (breastbone) and nod (say yes) several times. Repeat if this is comfortable! The best exercise time is in the morning. (*page 125, illustration 72, in the opposite direction).



Illustration 48 : Occiput NNSIRr

Axis-NSr_Movement (illustration 50)

Initial position: Sit straight, side bend head to the right and then turn head to the left.

Movement instructions: Turn head further to the right with the head in this position. Then incline the head forward (say yes) several times. Repeat if comfortable! If not, just do it once. The best time is in the morning. (* page 141, illustration 94, in the opposite direction).

NNSI-Cat-movement (illustration 50)

Vertical Sacrum-NNSI-movement (illustration 51):

free

the fingers of the right hand.

ill. 96, in opposite direction).

Initial position: on all fours. Upper body is bent to the left (thoracic convexity to the right).

Initial position: In sitting position flex to the left (NNSI), with both feet turned left on the floor. Left forehead is above the left knee, both arms hang

Movement instructions: Close left eye, make a left fist, stretch and spread

Close eyes and repeat hand movements. Best time is mornings. (*page 143,

Movement instructions: First flex the head towards the clavicula (chin in the direction of breastbone), then form a pronounced rounded back. Repeat if comfortable. The best time is the morning. (*page 141, ill. 94, in the opposite direction.)

Illustration 50: NNSI-Cat

Illustration 51: Sacrum-NNSI

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Illustration 49: Axis NSrRl



These are the four most important asymmetrical movements to increase **NNSI**. Use ADIY-Junior- insoles and leave them on for several weeks or even months if it feels comfortable. Increasing NNSI means sedating the sympathetic nervous system.

In the case of a right shorter leg a forte version of the ADIY-Junior-insole is recommended. It is suggested that you wear shoes without insoles from time to time. This is to prevent your body from getting used to them. If you have reactions, take the insoles out temporarily until they subside.

Asymmetrical movements of the following pattern are important for the pelvis. The best time to get used to them is by doing them daily at night when in bed.

Pelvic Tilt (illustration 52): left leg stretched out and pulled proximal (towards head) and the right leg in the caudal direction (away from body). Repeat a few times. A proper right pelvic slant will result.



Illustration 52:Pelvic Tilt

Illustration 53: Patrick

Patrick illustration 53: left leg is flexed at the hip and the knee is bent. The right stretched left turns inward several times (Patrick movement).

It is sufficient if you do the basic movements and the movements to stimulate the Water element 3-4 times a week if you don't have any symptoms. If you do have symptoms, you can do them several times a day.

C. Movements to Stimulate the Water Element

Open up to page 167 and 168 in the book "*Der Heimliche Favorit*". choose a movement that seems fun and comfortable to your child. Once again, the best practice time is mornings. Indication: a perturbation in water metabolism (for example, bedwetting).

D. Terminal Memory-Effect (TME)

A final asymmetrical movement is done at the end so that the body can remember for a long time, one that will activate the memory for the Water element. We call such an ending movement TME (Terminal Memory Effect).

TME for Water (illustration 54)

Stand straight and side-bend the upper body and head to the right. Then turn the upper body and head to the left as far as it will (comfortably) go. Now close your right eye and look up with the left eye. Make a left fist and spread the fingers of the right hand. Breathe deeply and slowly several times



Illustration 54: TME for Water

E. Lifestyle

In addition to movement, young people need **plenty of rest** and enough sleep. Too much stress should be avoided. Competitive sports should be done only when bio-physical health is intact.

Hard manual labor, (vacation jobs, for example) and not reasonable. Children should, in the scope of their possibilities, learn to take good care of themselves.

It is especially advantageous to expose the back while taking sun and light baths. Please follow the general rules that apply to sunbathing (risk of sunburn and long-term damage). Vacation in the south and southwest at sea level should be preferred. Children should not stay in the cold water too long (hypothermia should be avoided by all means) because this damages NNSI. Keep the back and feet warm at all times.

F. Nutrition

Please use foods of animal origin sparingly with vegetarian fare and fruits being in abundance (animal and plant food should be in a relationship 30:70). Children should **eat and drink sufficiently**! They should not have salt reduced or salt free food (a piece of bread with butter and **salt is important** for children). They should drink plenty but must avoid carbonated drinks, including sugar free "light" drinks.

All sphere- formed food, (dark colors are especially good), should be preferred, (*food index on page 314, with the words in bold being the most beneficial). They fill up the gaps in the Water element and are the by far the best for activating cellular activity.

Industrial, artificial sweets are to be avoided and it is better to lean towards fruit and dried fruit. They can be eaten without end (a high level of potassium lowers the sympathetic nervous system!) The ADIY-NNSI tea is recommended as a supplement. This herbal tea consists of 10 gently effective healing herbs that support the Water element and the child growing up at the same time. Ideally you should drink 1/4 - 1/2 liters in the morning. Take a break of 2-3 weeks after you finish a package of tea (see ordering information in the appendix).

Summary :

The most important goal for optimal spiritual, physical and psychic development for the best conditions for this age group is a comfortable General Test to the Right (bio-physical age fits to biological age).

"NNSI" and the Water element are stimulated so as to increase their effect.

After the proper beginning (3 movements to the right) the basic movements for the occiput, axis, thoracic spine, and sacrum follow. After the basic movements one should use both biomechanical movement exercises (best done laying in bed at night) and one of the Water exercises (*see pages 167-168) if you have problems with the water metabolism.

Do the TME (Terminal Memory Effect) movement at the end. Please pay attention to the *lifestyle* and *nutrition* advice mentioned above. To reinforce the effect we suggest the use of the ADIY-NNSI-tea as well as the *ADIY-Junior-insoles* © (forte version in the case of an anatomically shorter right leg).

You now have 5 possibilities to support and stabilize the natural health of your children; (static, movement, stimulating of the Water element, lifestyle, nutrition and supplements (for example ADIY teas).

Instructions for 1.2.:

The General Test to the Right was uncomfortable. This means one must choose a detour that goes by way of the N-World (static). The short-term movement goal will be both **NSr** and the stimulation of the Wood element. The use of ADIY-Junior-forte-insoles @ are especially important and efficient. The best time to practice the basic movements is the late afternoon and evening.

A. 3 General Movements to the Right for the Goal of OPF (page 33, ill. 14-16)

B. Basic Movements

"NSr" Feet (illustration 55):

Lie flat on your back without a pillow. The right inner foot and left outer foot are flexed toward you. Contract muscles for a short time and repeat several times. (*Pages 96 and 97, Supino R and Pronato L movements.)



Illustration 55: "NSr" Feet

Left "NSr" Windshield Wiper (illustration 56):

Lie in the supine position (on your back) without a pillow. The left arm is stretched next to the head and the fingers of the left hand are spread. The right arm is next to body and fingers form a fist.

Movement part 1:

The left arm stretches up and the right leg down and then both feet make a strong turn (like a windshield wiper) to the left.

Movement part 2:

The left arm stretched above and the right leg stretched down and turn both feet to the left and remain in this position. Close the right eye and Illustration 56: Left Windshield Wiper look up with the left eye and observe the ceiling.

"Patrick NSr Variation" (illustration 57):

Lie supine without a pillow. Left leg is at a right angle and falls outward while the right leg is stretched out and turned inward.

Movement:

Pull the left pelvis up a bit and turn right leg even more inwards with a long and complete exhale. Release the pelvis during the inhale phase and let go of the right leg that had been turned in. Hold your breath briefly and repeat with a long and complete exhale. Repeat several times.

Remark:

The exhale belongs to the N-world. The slow and deep exhale reinforces the effect of movements 55 and 56.

"Look to the Left "(illustration 58):

Lie supine without a pillow. Both hands hold the left knee and pull it closer to the body. The right leg is turned slightly inwards and remains in this position for the entire movement.

Movement:

Lift head and body towards the left knee (NNSI), right eye closed and look at the left knee with the left eye for a few seconds. Return to the initial position and repeat 2 to 3 times.

Remark: We come close to the goal of "NNSI" with this last basic exercise.



illustration 57: "Patrick NSr Variation



illustration 58:Look to the Left



C. Movements to Stimulate the Wood Element:

Open up the book "Der Heimliche Favorit" to *pages 152 and 154. Choose a movement that is as athletic and artistic as possible. The best time to practice is evenings. It will improve metabolism and calm your child.

D. TME for Wood Element:

TME "NSrRl" and "NNSl" (page 33, illustrations 15 and 16):

Do the "NSrRI" exercise first and then repeat it rhythmically several times. The "NNSI" exercise, which will lead to the normal state, follows. Repeat several times. Leave the ADIY-Junior Insoles in the child's shoes for several weeks.

Do the General Test to the Right after this. Does it feel better already? If not, do the movements until the test has become absolutely comfortable!

E. Lifestyle

As in 1.1

F. Nutrition

See 1.1 F, but with rod shaped food (*food chart page 304), which cover any possible Wood deficiencies.

The ADIY-NSr-TeaC is recommended as a supplement. It is best to drink ¹/₄ to ¹/₂ liters in the afternoon. After having finished a package we suggest that you take a break of 2 - 3 weeks (address for purchase in the appendix). Provide your body with adequate calcium (dairy products).

Summary:

Children and teens without health and development problems that have level iliac crests do not have to work on taking care of their health. Nature is doing this well enough so don't touch! (Prerequisite is a comfortable General Test to the Right.)

Children and teens with health problems or psychological/ emotional development problems need treatment.

If your child is really overweight: send him or her either to a HMT therapist (HMT therapist list on our website) or to an ADIY-Teacher/PC Mediator (ADIY-teacher list on our website).

Does your child have health problems? Your first task is to determine if you have a symptom of a basically healthy child on your hands or one of a child that is actually sick.

If the iliac crests are clearly slanted and become perfectly level after the 3 General Movements to the Right (NSr, NNSl, NSrRl) this means that enough health is available!

If the iliac crests are still slanted after the 3 General Movement to the Right: you have to find a therapist! The child is sick!

The same thing applies when the General Test to the Right and the General Test to the Left are both uncomfortable = see a doctor, HMT therapist or ADIY teacher! Proceed according to gender here.

An uncomfortable General Test to the Right denotes following procedure 1.2.

A comfortable General Test to the Right denotes "basic health is present".

Children and teens without health problems and development problems that have periodic slanted iliac crests should wear ADIY-Junior-Insoles as a preventative measure (a clearly short anatomic shorter right leg needs the forte version.

Comment: Of course, you should see a pediatric doctor regularly even with these tests. Medical care remains an obvious necessity for you and your children but this does not keep you from taking care of yourself in the biophysical way.

Some more good advice at the end:

Do not criticise the bad posture of your children, it is useless. Good posture will come later on its own. Supposedly bad posture = NN-position.

Do not force your children to eat ("deficiency in the excess world" is their goal). The meal rhythm of adults is biologically foreign to them. They eat by themselves when and if they are hungry and feel the need to eat.

Raise your children with an organic way of eating and living (the percentage of vegetarian fare at this age should be at least 70%). Quality goes before quantity.

Encourage your children to drink as much as possible (tap water or plain mineral water).

Do not suppress the need for sweets and fill this need with natural sweets (dried fruits, fruit). Make sure that there is sufficient calcium.

Encourage your child to participate in sports but not in competitive sports. Movement is their life but overexertion leads to trauma and early aging.

Explain the biophysical connections of life and help him/her get to know his/her own personal asymmetric movements. Do not force your child to do anything. Find the reason for his/her behavior instead.

If your child is hyperactive and not concentrated in school: do the 3-part combination (NSr, NNSl, NSrRl) before leaving the house and put a school folder under the left tuber ischiadicum (sit bone) = straightens the pelvis in the sitting position.

2. The Health of Women

The biophysical "Should-state" of women can be recognised by the existence of the menstrual cycle. Women with a monthly period are generally categorized as "young" (NNSI). Women without monthly periods, regardless of the reason (hysterectomy, intrauterine device, hormonal influences) are basically seen as bio-physically "*old*" (*NSI*).

An exception to this is pregnancy which will covered this in a later chapter.

Everything that has already been said in chapter 1, "The Health of Children and Teens", is absolutely valid for all bio-physically young women, meaning those with monthly periods. Women over 50 and women without monthly periods are best off if they follow the suggestions in chapter 5: "The Health of Men" or "Health during Menopause".

When women have no menstrual cycle because of menopause (period between ages 48-58), and want to stay young they can continue working on the "blue NNSI- should way". You should just add enough NSr movements into your movement sequence so that your body can slowly adapt in the direction of "N" (see chapter 4: "Health during Menopause").

Rule 1:

Women with monthly periods are to be placed in the bio-physical category of "*deficiency in the excess world*" (NNSI) and their path to health is identical to the **blue NNSI "should way"**. The deciding functional element is the *Water-element*. If the General Test to the Right is not comfortable then your temporary "should" will consist of "**NSr**", in other words, *excess in deficiency* or the Wood element = **Green NSr –**"**should way**". Go back to the Blue way when the results of the test are back to normal (NN).

Rule 2:

Women without monthly periods must be placed in the biophysical category of "excess in the excess world" (NNSr) which is identical to the Red NNSr-"should way" (the same as for young men). The decisive functional element is the *Fire element*. If the General Test to the Right is not comfortable then your temporary "should" will consist of "NSI", "deficiency in the deficiency world" or the "Violet NSI-should way". Go back to the red way when the test is normal again (NN).

Recommendation 1:

Women with periods follow the suggestions for children and teens with the exception of the ADIY insole and tea program, which must be specific. The 3 specific *women's movements* are necessary and will be shown next.

Recommendation 2:

Women without monthly periods (for ex. hysterectomy) should follow the suggestions for young men (see chapter 5). The ADIY insole and tea program must again be specified. The 3 Women's Movements are indicated for all women (with or without periods) and are especially recommended.

Summary:

Women with monthly periods should follow the suggestions of chapter 1 (children, teens), women without monthly periods should follow the suggestions of the chapter (Men under 50).

The appropriate shoe insoles and tea programs are different. The *3 Women's Movements* help all women, they activate and organise their femininity.

Three Movements for Women:

You should get used to doing these *Asymmetric Feminine Movements* every day. They stimulate the feminine principle, harmonise hormones, and relax the mind. They are free of side effects.

It is important to do them in the exact order presented below:

- 1. Movement: *Right Ear Pull* (regulation)
- 2. Movement: *Bladder Hold* (Mobilisation of the upper quadrant)
- 3. Movement: NNSl Breath (Mobilisation of the Pelvis

Right Ear Pull: (illustration 59)

Stand straight and put your weight on the left heel with the right knee bent. Cover your left ear with the surface of your left hand. Put the right index finger into the front of the auditory canal and grasp the right earlobe with your thumb and middle finger. Now gently pull the right ear outwards in the direction of a laterally protruding ear (this should not be painful or uncomfortable!). Look up with both eyes. Now change direction of your gaze: from the upper left to the upper right and vice-versa (about 10-20 times).

If these movement directions do not feel comfortable, change sides (left ear pull



illustration 59: Right Ear Pull

Bladder Hold (illustration 60):

Stand straight with weight on the left heel, right knee bent. Lead the left arm from the front to your back from above and the right arm from your back below towards the head. Here it is not important that you join your hands in the mid back but that your hands come closer together. Now bend forward to the left several times in the "Bladder Hold". Do this several times. Make sure that your weight is always on the left heel. Close the left eye while you are bent and look at the left knee with the right eye. Repeat several times



Illustration 60: Bladder Hold

NNSl Breath (illustration 61):

Stand straight with your legs apart about shoulder width, weight on the left heel with the right knee bent. Bend forward towards the left and put your right hand on the left knee. The left arm is turned inwards with the palm turned up (to the front). Close the left eye and look at the left knee with the right eye. Breathe deeply and slowly towards your lower back, in the direction of your pelvic floor, as if you wanted to stretch it (inspire) and contract it (expire). Repeat this 10 to 12 times.



Illustration 61: NNSI-Breath

Remarks:

The *Three Women's Movements* were intentionally built to reach the feminine *asymmetric* principle (NNSI) from three areas. The *Right Ear Pull* is a signal for WATER-element, the eye direction a signal for NN, alternating eye movements from left to right (and back) a signal for the movement of WATER-element and FIRE-element. These eye movements are especially strong activators of the sympathetic portion of your body.

The "informative-movement" ("Right Ear Pull") precisely touches the sympathetic control mechanism of the "NNSI-Water-element" and mobilizes the free movement of the pituitary gland in the region of the head.

The *Bladder Hold* mobilizes the upper quadrants (arms and shoulder girdle) of the body. The asymmetrical position of this movement includes the "neutral body-world" of the feminine principle. ("N" functionally connects to "NN" in the proper manner).

The N*NSl Breath "informationally*" mimics the feminine cycle. Increase and decrease of the menstrual period is signalized from front to back (expansion and contraction of the gluteal region).

Putting weight on the left heels informs the body of "*deficiency in the excess world*". In this way the Women's Movements unite everything that we can reach in an *asymmetrical-informational* manner.

The "ADIY Shoe Insole and Tea Program" for Women with Monthly Periods

ADIY-Prono-Insoles-left@ have an influence on:

Dry mucous membranes, vaginal dryness, genital herpes, a tendency to bruising, weak connective tissues, stretch marks, cellulitis, uterus prolapse, weak pelvic floor muscles, a feeling of inner heat, increase desire for sweets, tendency towards diarrhea, strong monthly periods, dry chapped lips, flatulence with bloated belly, swelling, edema, red upper and lower eyelids, restless sleep in the second part of the night, excessive worrying, tendency to rumination, irritable bladder, discharge, pressure on the stomach, feeling a lump in the throat.

Best time to wear: Afternoons from 14-16, leave in street shoes for 2 hours. Wear like this for 4 to 5 consecutive days and then take a break for 2 to 3 days and go through the cycle again.

To reinforce the effect: Drink one big cup of *ADIY-WRl-Tea*© with a little honey, take calcium, be sparing with salt, drink more.

ADIY-Adult-Insoles-F @ influence:

Strong monthly periods, painful monthly periods, and those that last too long, an anatomical shorter right leg, too much excess.

Best time to wear: no limit during the monthly period. Put the insoles in your shoes a few days before your period starts.

To reinforce the effect: Drink a cup of *ADIY-NSr-Tea*© acidified with a little lemon juice. Do the Afternoon Movements (*page 263, ill. 153). Do the 3-part Combination (NSI, NNSr, NSIRr). Take magnesium, use a little more salt, drink less.

ADIY-Female-Insoles @ influence:

Disturbed hormonal cycle, monthly periods that are too weak, functional sterility, frigidity, dry mucous membranes, vaginal dryness, fertility problems, loss of libido.

Best time to wear: All day without limits just after ovulation and up to the first signs of your monthly period. Use the forte version if it is clear that you have an anatomically shorter right leg! Gives "excess" and takes "deficiency".

For a stronger effect: Drink a cup *of ADIY-NNSI-Tea*© in the morning, use a little more salt on your food, drink much more, (non-carbonated water). Pelvic floor exercises are recommended. 3-Part Combination (NSr,NNSI, NSrRI) (*foot movements of the neutral body world, all in the direction of NSr, pages 96-98). Add calcium, less salt, drink more.

The ADIY- Insole - Program – for Women without Monthly Periods

ADIY-Junior-Insoles @ influence:

Absence of menstrual periods, scanty or irregular periods, and functional sterility. Also brings about "deficiency in excess world".

Best time to wear: All day with no restrictions.

To reinforce the effect: Drink one big cup of *ADIY-NNSI-Tea*© in the morning. The other suggestions are the same as for the ADIY-Female-Insoles.

Remark:

Our suggestions are only effective when a female body is healthy. All pathological gynaecological disorders can't be influenced this way. They must be seen as a contraindication and must be cleared up and taken care of by a gynaecologist.

3. Health During Pregnancy, Childbirth and Breastfeeding

This most active period of time in the life of a woman has rules of its own. The developing new life (embryonal stage) can be compared to "excess in the excess world" or in other terms embryonal stage = "growing fullness (excess) in feminine excess. If one were to be biophysically careless at first glance, we could suggest that this is equivalent to "NNSr" ("excess in the excess world"). Unfortunately this is not so easy because an "NNSr" restriction seen from a gynaecological standpoint leads to just the opposite: *infertility*. A red NNSr- should would rather make a woman more masculine than feminine and this should be avoided by all means in this stage of procreation. This functional thought process would also lead us in the wrong biophysical direction.

Basically the time span *from "conception to the end of breastfeeding"* belongs to the Water element which is bio-physically comprised of "NNSI". This environment builds the basis for female fertility. But the newly developing life is governed by the *Wood principle* that is an allegory for every new beginning and for growth (*p. 151). The *WOOD-element* is bio-physically equal to "NSr". *Water (NNSI) stimulates Wood (NSr)!* So the Wood element creates the basis for all expansion of new life and the Water element thus prepares for these conditions. Now we are on the right track. NNSI denotes "deficiency in the excess

world", denotes the female gender, denotes growth and expansion and a strong deficiency is thus avoided and is biologically also unwanted. Wood is nourished by Water.

Now the question is asked as to whether you can decide what you need to do for yourself as a preventative measure in the phases of pregnancy, birth and breastfeeding? Unfortunately this is not possible because you would have to know which principle would need to be reinforced. Would it be the uterus, in which the new life is developing (fertility, Water principle, blue NNSI-principle), or would it be new developing life itself (embryo, Wood principle, green NSr principle) that would be decisive? Only the body that is concerned by this knows the answer to this important question. Only it is responsible for the decision : embryo = WOOD (NSr) or uterus =Water (NNSI).

So it will be the General Test to the Right that will help us with this question: If it feels comfortable in this context, it means that it is more important for the milieu of the uterus than of the foetus. The **assymetrical-blue-movement-way** goes in the direction of **NNSI**.

If the General Test to the Right feels uncomfortable or is even painful then it makes sense to support the process itself, namely the growing foetus. The **asymmetrical green-movement-way** goes in the direction of **NSr**. The N-world has become relevant in one of the most important non-neutral phases of human life. The growing new life needs external protection.

Remark:

It is intelligent and quick to check the causal function in this simple manner. In the end it makes a huge difference if one supports the placenta or the *growing foetus*. In this connection it is interesting to observe that the body takes us on a path that we can only understand if we can perceive the non-verbal language of nature. Pregnancy obides by the spherical principle of "excess". A foetus will be negatively influenced by too much "excess" (NNSr +NSr) but also by by too little "deficiency" (NNSI). If there is too much "excess" one can sedate with asymmetric *rod movements* (NSr movements). If there is too little available "excess" one may increase it by doing asymmetrical *spherical movements*. The right plan of action can't be found by intellectual means but only by the body itself. The body decides for you.

Summary:

3.1 General Test to the Right comfortable = NNSI way!3.2 General Test to the Right uncomfortable = NSr -way!

Instructions for 3.1 :

Follow the blue "NNSI-way" and the already mentioned suggestions and tips.

Comment:

If the General Test to the Right is comfortable then everything is basically ok. No protective measures must be taken. Pregnancy is a process of excess and the smooth functioning can be seen with the General Test to the right. Valid is: A comfortable General Test to the right means "I like excess", I like my pregnancy. An uncomfortable General Test to the Right means "I don't like my excess", I don't appreciate my pregnancy! In this second case you have to support the body. In the first case you can, but don't have to, support the body.

Instructions for 3.2 :

A pregnant woman has a serious problem and must act if the General Test to the Right is very uncomfortable or even painful. (She is in the N-World (deficiency)).

The primary support must be given to the growing foetus and the secondary support to the uterus. the **Green "NSr"-Way** means that there must be a correction of "*excess in the deficiency world*". If you take a close look at the functional state you will understand. There is no way that "*excess in deficiency*" can exist during a pregnancy, during birth, and during the lactation period. "Excess" (embryo, foetus) needs the excess of the maternal matrix for optimal development and not deficiency. It is exactly because of this that the growing individual has a problem here.

In almost all cases you don't need to support or accompany a pregnancy. Nature usually takes care of this task much better than man. However, in certain rare cases, the question asked by way of the General Test to the Right, is of great relevance.

A. Start: 3 General Movements to the Right (page 33, image 14-16)

B. Basic Techniques

"Left Pelvic Twist" (illustration 62):

Starting position: Supine, large pillow supports head (head is bent in direction of sternum = kyphosis of the cervical spine = excess). Both legs are bent at right angles, both in the hips and knees. Let them fall to the right. The torso is automatically turned to the left.

Movement instructions: Turn torso a little more to the left and the head a little further down (chin in direction of sternum), make a left fist, spread and spread the fingers of your left hand, close right eye (if uncomfortable close both eyes), and inhale deeply and slowly, letting your abdomen gently rise. 5-6 of these breaths are enough. Open the window (oxygen supply is important).



Illustration 62: "Left Pelvic Twist"

"Acting Out" (illustration 63):

Supine position, large pillow under head, arms resting relaxed next to the body. Legs stretched out and relaxed.

Open eyes wide, make fists with both hands, feet bent towards soles of feet, breathe deeply and slowly while letting abdomen rise. Close eyes, stretch and spread fingers of both hands. Pull feet towards head breathing deep and slow, flatten abdomen again.

Repeat this movement cycle 10-12 times. (window open)

Illustration 63: Acting Out

"Left Gaze" page 62, illustration 58)

See the basic movements for children and teens.

"NNSI- Cat"- Movement (page 58, illustration 50):

See the basic movements for children and teens.

"Horizontal Sacrum- NSr-Movement" (illustration 64)

Starting position: Sit upright with torso and head bent back slightly (lumbar and cervical lordose). Both hands are slightly behind the body and propped up on the seat.

Movement Instructions: Close both eyes, turn both thighs towards the center and bend the torso to the right side (NSr). Breathe slowly through the lips (lips limiting exhale) and at the same time increase the lumbar and cervical lordose. Briefly hold your breath and return to the starting position with the inhale. Repeat several times.

Illustration 64: Horizontal Sacrum- NSr- Exercise

Stand up after you have finished these 5 basic techniques and redo the 3 General Movements to the Right. If they feel comfortable you have finished for the day. Check daily. Do the 3 General Movements to the Right as well as the basic techniques if this test should become uncomfortable once again. Your job is done if the test stays comfortable.

If the General Test to the Right is still very uncomfortable after the 3 General Movements to the Right and the above mentioned 5 exercises use the following insoles:





- *Right ADIY-Pregnancy-Insole* ©. Place the insole in the right shoe. Now repeat the General Test to the Right while standing on this insole. If this test and the wearing of the insole are comfortable continue to wear this type of insole in your shoes for the next few weeks.

Test the insoles daily and do the 3 General Movements to the Right in addition to the basic techniques.

If the situation does not change while doing the General Test to the Right while wearing the ADIY-Pregnancy-Insole *©* and doing the asymmetric exercises you have two possibilities:

- Put the ADIY-Junior-Insoles *©* in your shoe and leave them in your street or sports shoes and avoid very high heels.

- Go the **Blue Way** despite an uncomfortable General Test to the Right.

C. Life-style and Nutrition

Try to live with very little salt, drink plenty of liquid (tap water) and follow your desires . Everything is allowed except for physical overexertion and the use of alcohol and nicotine.

D. Nutritional Supplements:

Drink a big cup of ADIY-NNSI-TeaO (1/4 liter) in the morning and a big cup of ADIY-NSr-TeaO (1/4 liter) in the late afternoon. Fulfill the calcium requirements of your body, (Calcium phos. D6 pills), as well as dairy products.

TME:

Finish your movement sequence with NSrRI (page 33, fig. 16)

Remark:

You will be able to go through this period (often not so easy) with ease. Use these instructions by all means if you have complications or if you do not feel well.

4. Health during Menopause

Follow the **Green NSr-Way** (see instructions for 1.2 on pages 61-63, Wood Exercises). Follow the same Basic Techniques that were presented on pages 61-62 after the starting combination to the right.

The most efficient insole types for this period:

- Overweight, full body = wear the ADIY-Deficiency- Insoles ©. Put them in your shoes and wear them a few hours in the afternoon.

- Underweight, very slender persons = Wear the ADIY-Excess-Insoles @. Put them in your shoes and wear them about 1/2-1 hour in the morning.

-Normal weight = wear the ADIY-Senior-Insoles-F \mathcal{O} . Put them in your shoes and leave them in during the day

Life-style and Nutrition, see page 63.

Nutritional Supplements, see page 63.

TME: NSrRl - movements (page 33, fig. 16)

Remark:

Vasomotoric hot flashes and periods of sweating are common during menopause. If you happen to suffer from these, please study the chapter "Health of Seniors" and follow the suggestions for the "NSI"- Health Way. They will reduce heat and excess.

5. The Health of Young Men

Men between the ages of 20-55 count as being "young" and are normally subject to the biological principle of "*excess in the excess world*" or, expressed in another way, "**NNSr**".

They need much more "excess" in their non-neutral body than women. They are rod-shaped persons and can be easily recognized by outside gender characteristics and will, from a biophysical standpoint, remain the "Personal Favorite" (see book) for most of their lives. That means, with the exception of their child-hood, a short period between 55 and 60, and very old age, they will be under the influenced of the "PF".

The non-neutral body world (NNSr) controls the PF in younger years. "NSI" determines their biophysical function of the Personal Favorite in later years! Since men are much more static than women (who must react in a more dynamic and flexible way), they tend more towards the neutral body world (rod world).

The health prophylaxis for men must therefore contain more asymmetric neutral movements that for women. Shoe insoles from the *Renner shoe insole program* (ADIY-Insoles) are much more important for this gender group. This is especially important for men with a shorter left leg. Young women, children and teens are bothered more in this respect by a *shorter right leg*.

The optimal asymmetric movement direction for a young man or a young woman without a menstrual period, (without a uterus, for example) is the **"Red-NNSr-Way**". Plenty of neutral Violet movements of the **NSI** type must be mixed in.

But here there is a very important exception: If you determine that the combined movement "NNSr/NSI" leads to uncomfortable reactions then the "NNSI /NSr" way is indicated and better. The reason is because there are masculine and feminine men. The observation of homosexual men is interesting in this respect. If a man's hormonal structure contains a reduced quantity of androgen, then there will be little body hair and beard growth, weak muscle build and therefore the "NNSI/NSr" direction is more suitable. A shorter left **leg** supports their femininity.

If sufficient male hormones are available, as seen by strong beard growth and athletic constitution, then the ideal movement direction will be "NNSr/NSI". A short left leg supports the masculine in every man.

Red/Violet brings about the masculine (Personal Favorite), Blue/Green, the feminine (Opposite Personal Favorite)!

Rule 1 :

Masculine men follow the asymmetrical movement direction of "NNSr". This falls under the physical function of "excess in the excess world" (Fire element) = **Red Way**. If the General Test to the Right uncomfortable then your short-term "should" direction will be "NSI", meaning "deficiency in deficiency" (Metal element) = **Violet Way**. When the General Test to the Right is comfortable again you can return to working on the Red Way.

Rule 2 :

Feminine men should begin with the asymmetrical movement direction "NNSI" which corresponds to the bio-physical norm of *"deficiency in the exces sworld"* meaning the Water element = **Blue Way**. If the General Test to the Right is not comfortable then the short-term "should" will be NSr, meaning (Wood) = **Green Way**. When the General Test to the Right is comfortable again then one must go back to the Blue Way again. The Red Way, leading to "masculinization", is taken by a feminine man when there is suddenly an undesirable or uncomfortable reaction or when a "masculization" is desired.

After the 3 General Movements to the Left (see bottom of p. 33), follow with the basic *asymmetrical* movements and the fitting TME. Then there are suggestions for an appropriate lifestyle, nutrition, the indicated insole and tea programs. If you turn the movements around (mirror image), the 3 Women's Movements (pages 66 and 67) will automatically become *the 3 Men's Movements*.

Summary:

Masculine men follow the Red Way (NNSr) or temporarily the Violet Way (NSl). Feminine men follow the Blue Way, (**NNSl**) or temporarily the Green Way (NSr), if not compatible or if in doubt, also do the *red masculine way*.

5.1 Increase **NNSr**, support the Fire element, support and stimulate static in the **NNSr** direction (PF in NN) in the case where the General Test to the Right seems comfortable, respectively not uncomfortable Maskuline Männer folgen dem roten Weg (NNSr) oder vorübergehend dem violetten Weg (NSI).

5.2 Increase **NSI**, support the Metal Element, support and stimulate static in the **NSI** direction (PF in N) in the case where the General Test to the Right seems uncomfortable, respectively painful.

Feminine men follow the Blue Way, (NNSI) or temporarily the Green Way (NSr), if not compatible or if in doubt, also do the red masculine way

5.3 Increase NNSI, support the Water Element and support and stimulate static in terms of NNSI (OPF in NN) in the case where the General Test to the Right seems comfortable, respectively not uncomfortable.

5.4 Increase **NSr**, support the Wood Element and support and stimulate static in terms of **NSr** (PF in N), in the case where the General Test to the Right seems uncomfortable, respectively painful.

Instructions for 5.1.and 5.2:

A. Start: 3 General Movements to the Left (p. 33)

B. The 4 Most Important Basic Movements

Occiput NNSrRl- Movement (illustration 65):

Initial position: Sit flexed (rounded back) towards the right, left foot towards the outside, left arm turned towards the outside. Underarm rests on the right leg, right forehead is above the right knee.

Practice position : Close right eye, turn head to the left and in the direction of the clavicula and nod your head a few times (say yes).

If this is comfortable, do it a few more times. The best time to do this is the morning.

(*see p. 125, ill. 72)



Illustration 65:Occiput NNSrRl

Axis- NSI- Movement (illustration 66):

Initial position : Sit straight, side bend head towards the left and then turn to the right.

Practice position : The side bent and right turned head is first moved more to the left several times. After that, nod the head towards the clavicula (say yes).

Repeat if this feels good! If not, go only to the limit of what is comfortable. Best time to practice is the morning.

(*see p. 136, ill. 90, upper practice sequence)



Illustration 66: Axis NSl_Movement

Cat NNSr Movement (illustration 67):

Initial position: on all fours. Upper body veers to the right (thoracic spine convex towards the left).

Practice position: First the head bends forward (direction of clavicula), then form a pronounced rounded cat back and look to the left. Repeat several times if this feels good. Best time to practice is the morning.

(*see p. 136, ill.94)



Illustration 67: NNSr-Cat

Vertical sacrum NNSr Movement (illustration 68)

Initial position: Sitting foreward towards the right (NNSr), both feet are turned towards the right. The right forehead is above the right knee, both arms hang relaxed towards the floor. Practice position: close right eye and look at the right knee with the left eye, make a right fist, open and spread fingers of left hand. Remain in this position. Breath deeply and slowly in the sacrum area (5-6 times are enough). Repeat if this is comfortable. If not comfortable go only to the limit of pain. Best time to practice is mornings.(*see p. 143, image 96)



Illustration 68: NNSr-Sacrum

The following 4 asymmetric movement exercises are useful for the static and function of the sacrum. It is best if you get used to these 4 movements. They are most effective done in bed in the evening and also in the morning. A good static function can be guaranteed if you do these two to three times a week. If you have symptoms, whatever they may be, do this little biomechanical program daily until symptoms subside.

NNSr Pelvic Slant (illustration 69):

Lie flat on your back. Right stretched leg is pulled cephaled, left stretched leg is distal. Both legs are then turned towards the inside. Repeat several times. The result is the proper pelvic slant.

Right Patrick (illustration70): Bend right leg at hip and knee and let it fall to the outside. Turn the whole left leg strongly inwards several times.





NNSr Foot Tranverse Arches (illustration 71):

Lie flat on your back with both legs stretched out. Pull your left inner foot and right outer foot towards yourself while contracting the muscles of your legs. Stay in this position for a few seconds, then relax and return to the initial position. Repeat several times.



Illustration 71

Foot Paddle (illustration 72):

Lie flat on your back, both legs stretched out, make a right fist, open left hand and spread fingers. Flex right foot and pull leg towards head. Left foot extends. Contract muscles in legs and stay in this position for a few seconds and then go back to the initial position. Repeat several times.



Illustration 72

In addition to these exercises you can put either the ADIY Adult Insoles-M \mathcal{O} or the ADIY Male Insoles \mathcal{O} into your shoes and leave them for a few weeks or months.

ADIY Adult Insoles-M@ are for normally formed feet.

ADIY Male Insoles *©* are suitable for deformed feet (fallen arches, high arches, splayfoot, flat feet) and they also stimulate the male hormonal balance a little more.

It is suggested that you wear shoes without ADIY insoles periodically because a temporary habituation is effective (wearing for several weeks with breaks in between) are beneficial while a permanent habituation should absolutely be avoided.

Reactions are wished for and are always to be seen as positive. They show that the body reacts and is capable of biophysical change.

C. Movements for the Stimulation of the Fire Element

Look up pages 163 and 164 in the book *Der heimliche Favorit* and choose movement nr. 3 (Fight of the Personal Favorite). Once again, the best time to practice is in the morning. Indications- heart and cardiovascular problems.

E. Lifestyle

Movement, muscle training, effort, hard physical work, lots of sports, competitive sports (if biophysically healthy).

Be exposed to positive stress, sleep reduced to a minimum (no longer than 7 hours), move at noon instead of taking a nap. Short-term stays in the high mountains exert a positive stimulus, long stays at the ocean are suggested good for the transition. Sun and light baths in the supine position with a pillow under the head and with both legs up in = NN (tan mainly in the front).

Cold water to increase resistance (short cold baths, Kneipp applications).Bringing the body to a sweat (in a sauna), cold compresses. Keep feet warm and the head cool. Do everything that really brings pleasure!

F. Nutrition

The proportion of food of animal origin compared to plant origin should be about 40:60. Masculin men should by no means be vegetarians. The acidic excess milieu needs animal food products. To balance the acid/alkaline equilibrium more plant sourced food must be on hand to help neutralize excess acids. One should prefer carbohydrates (noodles, potatoes, rice among others); should not eat salt sparingly but at the same time not exagerrate with salt; not drink too much (exception while sweating) (add at least 1.5 liters of **uncarbonated** mineral water). Sugar consumption should come mainly from fruit sugar (fruits, dried fruits). Sweet light drinks should be avoided. Honey sweetened tea is beneficial. Increase dairy products.

G. Supplements

Drink a big cup of ADIY NNSr tea©. This special herb tea is put together according to a biophysical point of view and stimulates the Fire element. Best drinking time is the morning, drinking quantity is 1/4 to 1/2 liter daily. Take a break of 2-3 weeks after having finished the package.

Summary:

The goal for young men is their masculinisation. The conditions for this are very good when the General Test to the Right (NN-world) is comfortable. Biophysical age should always correspond with the biological age. Here **NNSr** and the *Fire element* are stimulated to increase their effects.

After the 3 General Movements to the Left follow the 4 basic movements for the occiput, axis, thoracic spine and sacrum. It is sufficient to do these movements once per sitting. Repetition is not necessary.

The Fire movement "Fight of the Personal Favorite" is then added.

Highlights: Calcium, fresh air, more salt, don't drink too much physical exertion, sports, lots of movement, but no magnesium remedies.

You have five possibilities on your hands to stabilize your health: movement, static (insoles), lifestyle, nutrition and supplements.

D. TME for masculine men (illustrations 72 and 73)

Do both the movements NNSr and NSIRr.

"NNSr" Movement (illustration 72):

Stand flexed to the right with both hands on the right knee. Bend even further to the right towards the right knee and then close the right eye and briefly look down with the left eye.

"NSIr" Movement (illustration 73)

Stand straight and sidebend to the left and then turn your torso and body to the right. Close your left eye and briefly look up with the right eye while making a right fist and spreading the fingers of the left hand. Repeat two times.



Illustration 72



Instructions for 5.3. and 5.4:

A. Start: 3 General Movements to the Right (page 33)

B.Basic Techniques (like those on page 57-59)

Occiput-NNSLRr-movement (ill. 48), Axis-NSr-movement (ill. 49), NNSI-Cat-movement (ill. 50), NNSI Vertical Sacrum movement, Pelvic slant (ill. 52), Patrick (ill. 53).

. Suggested ADIY-Insoles : *OPF Correction –Insoles* © (Forte version if the **right** leg is shorter).

C. Element Movements: Water movements (*p. 167 and 168) Indication: problems with water metabolism, prostate.

D. TME for Feminin Men = NNSI (ill. 54), NSrRI (ill.17).

E. Lifestyle see page 60F. Nutrition see page 60

G. Nutritional Supplements = ADIY-NNSl tea© in conjunction with magnesium supplements.

6. The Health of Senior Citizens

By our definition the senior phase of life spans from the 60th to the 80th year of life. After age 80 years old we find very old people (elders) (see chapter 7).

The neutral body world and the slim rod world become vital in this second to the last period in life. The biophysical optimal situation for this age group is represented by *"deficiency in the deficiency world"*. Older people must slow down their metabolism and avoid all types of excess. Seniors are forced to clearly reduce their weight, thereby coming closer to the slim rod form.

The age defined functional deficiency is biophysically dependent on the possibility of individual parts of the neutral parts of the body (LISFACT-group, *page 78,79) to move to the **left without error** (NSI). (* pages 200-202: Der Fehler "S", *pages 203 and 204: Der Fehler vom Typ "SfR"). A left side-bend alone does not suffice for healthy aging. It must function properly. We try to reach this goal in the biomechanical movement part of this chapter.

Both genders have the same goal in this period of life and in both cases "deficiency" is much more important than "excess. The **Violet** *asymmetrical movement* "**NSI**" is equally useful for both genders. We call this path the *"Personal Favorite of Old Age"*.

Exceptions:

a. Seniors that have a retrograde chin (NSr-chin) are a little further removed from the life goal of "stable health in an advanced age" than other persons of the same age that have a prominent NSI chin. They must increase their flexibility.

b. The same is also true for older persons that have either a clear anatomical *left leg* and thereby a *left convex lumbar scoliosis* (spinal curvature).

In these cases one is forced to use certain static correctional measures, like the insoles used for the goal of coming closer to the "NSI" goal:

- Men use the *ADIY-Senior-insole-M*© in case they show a retro-chin (group A). The reinforced version of this insole is used in the case of a **left** shorter leg or a left convex scoliosis (group B).

-Women use the *ADIY-Senior insole-F* $^{\text{C}}$ in the case that they show a retro-chin (group A). The reinforced version of this type of insole is used when there is also a **left** shorter leg/leg difference left (short) and a left bended lumbar scoliosis (group B).

Older persons are much more dependent on the seamless functioning static system than younger persons. For this reason, the above correction of static stands in the forefront.

Seniors with a prominent chin form (NSI-chin), a shorter right leg or a right convex lumbar scoliosis should use the following insoles to stabilize their health:

- ADIY- PF-correction insoles © reinforced version if the **right** leg is clearly shorter.

Remark:

It is difficult to get by without ADIY insoles while in this age group. Health in this age group is dependent in the informational input of static. All the following asymmetrical movements start, basic techniques, biomechanical movements, TME) are not effective at all when the left side bend "NSI" comes out as an S-error (S-error, SfR-error).

Wearing the suggested insoles should be very easy. Order two pairs of insoles that are suited to you. Put one in a normal pair of street shoes and the other pair into your tennis shoes. Take out any other type of existing insoles before.

Now wear you shoes with the *ADIY-insoles* from time to time and wear other shoes without at other times. That way you will not get used to the insoles and the stimulating and supporting effect will remain. Please do not wear any kind of *ADIY insoles* constantly.

Remark:

It is best not to wear orthopedic insoles except in very rare exceptions. Orthopedic inserts are symmetrical, almost identical correctional instruments that are made according to orthopedic principles. You will never do justice to your body asymmetry and the biophysical reason behind it but instead, will impede your appropriate *asymmetric development*.

We certainly do not want to criticize orthopedic procedures. They are necessary when justified It is a question of time as to when the asymmetric way of seeing things will influence this domain.

Tip:

All seniors (with a few exceptions) should follow the Violet NSI-Way. Their asymmetric movement goal is the *"Personal Favorite in N"* (* pages 89 -113: Bewegungen der "neutralen Korperwelt). All the exercises and asymmetrical movements in the direction of "NSI" are useful for this age group.

If you have any chronic problems or symptoms during this age span, use Chapter 3.A: *Die favorisierten Bewegungen vom NSI-Typ*.

(*page 178-184) You will find the most useful exercise combinations in this chapter.

Summary:

The senior life span corresponds to the *functional world of the neutral world!* Seniors should be slim and rod shaped! Overweight proves to be unfavorable. The biophysical optimal functioning is "deficiency in the deficiency world" or, expressed in another way, one in which flexibility can transform "excess" into "deficiency".

This process can only be reached biophysically when structures within the LISFACT group (neutral world) are biomechanically normal and without faults and can bend to the left. Faults of the "S" type (side bending without rotation) or "SfR"(side-bending, wrong rotation) should not exist.

It is suggested that all Seniors, both male and female, should do the **NSI** movement. It is the *"Personal Favorite of old age."*

Seniors that display a retro-chin and/or a left shorter leg and/or a left convex lumbar scoliosis need to use the "ADIY-Senior-insole-M©" or the "ADIY-Senior-insoles-F©".

All others should use the "ADIY-HF-correction-insoles \mathbb{O}^{4} ". These insoles should not be worn all the time but with breaks in between.

Almost all Seniors can take the asymmetric Violet NSI-Way with success and, in case that symptoms persist, can do the *favorite movements of the NSI type**.

Exceptions:

1. There are cases when the biophysical "NSI-way" is permanently shifted. Here we will meet a producible incompatibility with the corrective insoles and the "NSI-world direction of movement". In this case you can use the "**Green-NSr-way**" (see chapter " Health during Menopause" and "Health of very Old Persons". Use the *ADIY-Junior insoles* © or the Mono-F-insoles© in this case.

2.If the General Test to the Right is "comfortable" for seniors, then the biophysical "NSI-way" is also *temporarily* shifted. In this case you should use the General Test to the Left (RISIE-Test). If this is also comfortable you should use the insoles according to the above summary and do the "NNSr-Movements" (see Movement Direction of Young Men), until the General Test to the Right seems to be comfortable once again. This is also suggested for women.

A. Start: 3 General Movements to the Left

B. Basic practice in the direction of "PersonalFavorite"

Variation for NSlRr (illustration 73):

Stand straight with a lordosis and chin up. The left leg is the standing leg, the right leg is relaxed and only the big toe is in contact with the ground. Lift the right arm vertically, side bend the pelvis towards the left and then turn to the right. Close left eye and look up with the left one.

Practice sequence: Breathe in normally and close lips to make the expiration audible and slow, practice time is afternoons or evenings).



Illustration 73

Afternoon practice (illustration 74):

Sit straight (lordosis), chin up. Make a fist with your right hand, the left fingers are stretched and spread apart. The left foot is flexed and weight is only on the heel, right foot is on the floor. Close left eye and look in front of you with the right eye.

Practice sequence A: Breathe deeply and slowly in this position. 10-12 breaths is enough.

Practice sequence B: Close both eyes, look down from the inside, inhale deeply and hold your breath, pressing towards the inside for a few seconds. 3-4 such breaths are enough.

(*page. 263)

Head screw in "N" (illustration 75):

Stand straight. Side-bend your head to the left side and then turn it gently to the right up to your personal pain barrier. Nod your head back carefully and gently (neck lordosis) while closing your left eye.

Caution: Do this movement only if it feels comfortable! (* p. 85, ill. 32)



Illustration 74



"NSI" Combination Movement "" (illustration 76):

Stand straight with a lumbar lordosis, left leg is the standing leg and right leg is relaxed and slightly bent in the hip and knee and weight on the right big toe. Left dorsum of hand is on the sacrum and the right arm is held vertically. Make a fist with the right hand and spread and stretch the left fingers. The pelvis veers slightly to the left and the head moves a little to the right. Practice sequence: close left eye and look up with the right one. Form a slim rod figure and breathe deeply. No repetition is necessary.



Illustration 76

These are the four most important basic movements to get through this phase of life smoothly. All the movement combinations should feel comfortable through and through. One is not in perfect condition if they are not. If there are reactions after these movements this must be seen as positive

Following the above movements do the five mechanical exercises below to warm up.

"NSI" Feet (illustration 77):

Lie prone without a pillow with both legs stretched out. First turn the inner left and outer right foot edge up and remain in this position. Practice sequence: left foot in the direction of the sole of the foot (plantar flexion) and the right outer edge of the foot turned up (pronation). Remain in this position and contract the muscles in both of your legs. Repeat several times.



Illustration 77



Illustration 78

"NSI" Pelvis (illustration 78):

Lie prone without a pillow, right leg bent at the hip and the knee bent with the left leg stretched out and turned in in its entirety. Practice sequence: right leg turns to the outside and the left one turns to the inside and towards the feet(distal). Repeat several times! "NSI" Knee (illustration 79):

Lie prone without a pillow with both legs bent at the hips and knees bent with feet lifted off the ground. Both hand hold and support the thighs while the calves hang down vertically. Practice sequence: Start by swinging and alternating the calves up and down (bend and stretch in the knees). Turn the calves and feet to the left about 10 consecutive times after about 20-30 such swinging movements. Then swing back and forth and finish with both tibias turned to the left once again.



Illustration 79

"NSI" Shoulders (ill. 81):

Stand straight. Left hand is in the back of the neck and the right one rests on the sacrum. Bend both elbows alternating from the front to the back.

"NSI" Arm rotation (illustration 81):

Stand straight. Both arms are level with the left one lower and the right one higher. The back of one hand shows towards the back and the other one up. The head is turned to the hand that is turned back. Now turn the head and the hands rhythmically, with the head always turned towards the hand that is pointing back.



Illustration 81



C. Exercises for the Stimulation of the Metal Element (Violet)

Open up the book, "*Der heimliche Favorit*" to pages 157 and 158 and choose a Metal exercise that is comfortable. Build this into your daily routine and get used to it. Indication: susceptibility to infection.

D. Lifestyle

The motto for seniors is *rest* and *movement*! You should watch that you get enough daily rest periods (mid-day nap). Movement of the relaxed kind like golf or senior tennis, walking a lot, hiking and bicycle riding are especially suggested. Stays in the high mountains (above 4000 m) should be avoided.

Longer stays in the southern seas are good for acclimatising the body (spending winters in the south), as is sweating (sport, sauna). Physical work should be well scheduled and everything should not be done in the

same day. Use a knee pillow for working in the garden. Sunbaths should be no longer than one half hour at a time. Do not sit out in the sun for too long (hat and sunglasses). Tan your skin with a high protection sun tan lotion, especially in the front.

You should also strengthen your immune system (through Kneipp procedures and cold showers). The feet and the lower back should always be kept warm and you should avoid drafts. Don't sleep too long, get up early and go to bed before midnight. Avoid stress and anger. Do not smoke.

E. Nutrition

The proportion of vegetarian foods compared to food of animal origin should be about 70:30 but by no means should be only vegetarian. That would create too much deficiency.

Alcohol in moderation, one to two glasses of dry white or red wine and occasionally a bitter stomach tonic is good.

The alkaline milieu of "deficiency" calls for acid builders, meaning foods of animal origin, bitter substances and natural sweets. Fulfill the main part of your food needs with vegetables and salads and prefer rod formed foods (very important).

It is preferable to separate carbohydrates from foods containing proteins. Eat vegetables or salad with meat, avoid eating rice, noodles and bread (carbohydrates) at the same time. Potatoes are the mediators between protein and carbohydrates and you should eat plenty of these. Your digestive tract will thank you.

Use salt sparingly but do not eat salt free.

Drink a lot. Carbonated mineral water will invigorate your metabolism.

Fast from time to time but never thirst because that will harm you. Cover your need for sweets with honey, compotes and dried fruits. Bananas (ideal), dates and rhubarb are fruits types that are especially recommended.

Drink coffee and black tea only with milk.

Consume milk products in ample quantities and with no limits, drink a glass of buttermilk daily and eat alot of yogurt. Use butter instead of margarine and don't miss out of your breakfast egg.

The most important things are: *drink a lot, eat more portions of vegetables than meat, drink alcohol in moderation, eat sweets from natural sources, use dairy products without limit, don't forget egg dishes and pay attention that you eat rod formed foods.*

F. Nutritional Supplements:

Drink a big cup of *ADIY-NSI-Tea* © in the evening. This special herb tea for seniors stimulates the Metal element and stabilizes the immune system, lung function and has a biophysical effect on the left slant of the neutral world. After finishing a package of tea you can take a 2-3 week break. Increase quantities of potassium and magnesium.

Final Comments:

Corpulent seniors or persons in this age group that don't tolerate the Violet NSI-Way, should either turn all the previous exercises around and do them in the opposite direction or do the exercises according to gender. The reason for this is because it can be that some seniors still find themselves in the non-neutral body world and some are already in the *Personal Favorite* of old age and are in a state of fixation there. This does not apply to the instructions for the ADIY insole and tea program as well as the suggestions for lifestyle and nutrition.

A suggestion pertaining to this: If you have unpleasant reactions while working on the Violet-Way, then you know that you have to do the opposite. The General Test to the Right alone can't help you here. You can only try this.

Another suggestion: If the "*Violet-NSI-Way*" does you a lot of good and you keep doing it over and over we still suggest that you turn the movements around for a few days from time to time. That way you will retain your **flexibil**ity and not be too fixed in the *Personal Favorite*.

7. The Health of Very Old Persons

The image of the forward bent, insecure and thin old man stands before the reader's eyes. This image corresponds completely to the biophysical **Blue NNSI Way.** "NNSI" and its corresponding *Water element* stands for the end of life (and at the same time, the beginning). It is interesting to note the bio-physical similarities between the fetus at the beginning of every life. The child-like behavior of very old people, their helplessness and need for care, are very similar to that of babies.

Health can only be slightly influenced in this last age group. The adaptation and compensation mechanisms can hardly be changed. For this reason we can only act with the use of a few movements. In order to avoid strong negative reactions one must reduce the amplitude of these movements.

ADIY-insoles are not allowed in this age group with the exception of the *ADIY-NSI-insoles* © and the *Mo-no-F-insoles* ©. Both of these can be combined with the appropriate *ADIY-NSI tea* ©. The insoles can be worn without time limitations. In this case it is better to get used to them.

The "should-way" of the very old goes in the direction of Blue (NNSI) and green (NSr). The entire movement sequence consists of only 3 asymmetrical movements that we call the "*Three Old Men*".

First Old Man (illustration 82):

Initial position: Erect sitting position. An *ADIY- sitting board* is under the left sit bone (ischium) (see appendix). The back of the left hand (dorsum) rests on the sacrum, the right forearm is on the right groin, making the upper body is turn slightly to the right. The entire right foot touches the ground, the left foot touches only with the toe pads and the left heel is kept up. The left fist is clenched.

Movement sequence: Inhale deep and slow with open eyes and exhale slowly through the mouth with pursed lips and eyes closed. Do as many breaths as possible.



Illustration 82: First Old Man

Second Old Man (illustration 83):

Initial position: Sit while flexed forward. Both hands are on the left thigh. *An ADIY-sitting board* is under the left sit bone (ischium). The left foot touches the ground, the right foot touches only with the toe pads and the right heel is kept up. The left fist is clenched. The upper body is flexed forward to the left side.

Movement sequence: breathe as in "First Old Man".



Illustration 83: Second Old Man

"Third Old Man" (illustration 84)

Stand in a doorframe and hold on the left and the right. In your shoes you are wearing either the *NSI-insoles* \bigcirc or the *Mono-F-insoles* \bigcirc . Movement sequence: upper body and head bend back slightly with the chin up. Bend the head slightly to the right side and turn slightly to the left. Eyes are wide open and breath is deep and slow. Repeat two to three minutes.



Illustration 84 Third Old Man

Remark: Even the belief of rebirth and the cyclical nature of life in Tibetan and Hindu (among others) religions can be described with the biophysical theory of *beginning* and *end*. Both beginning and end can be influenced with the same movement direction (*p. 347, Tabo Mummy). But it must be clearly stated that our bio-physical theory has nothing to do with religion or belief.

The aging person, in a position that is bent forward, is forced to become a sphere and goes back towards the ground, to once again move towards the earth. ("Earth to earth, dust to dust"). His former goal, that of moving toward the *rod form*, slowly disappears. The fetus, rolled into a sphere (uterus), has only one bio-physical goal of becoming straight, of growing, of becoming a *rod form*. Thus the life cycle closes at the point of *conception /death*. The old live at the edge of life and their needs are also strongly reduced. Dementia, forgetting of reality, can be explained with this in mind.

Nutrition and Lifestyle of very Old Persons

It is especially important to: drink plenty of fluids (still mineral water, fruit juices from dark berries, red beet juice, to eat vegetarian and if meat, then white meat and fish. Soups (vegetable soup, vegetable broth, potato soup, barley soup etc.) are an important part. Low fat white cheese with fruits and yogurt with fruits is the perfect in-between meal. Food combining is suggested (separating protein from carbohydrates). Never eat too much, don't force yourself to eat but do force yourself to drink! All **sphere formed** foods are of great advantage.

Movement is of utmost importance! Daily walks are an absolute necessity (for example with a deambulator). *Symmetrical exercises* for the physically fit older person (see chapter 10). Breathing exercises are also an important factor. Here is an example:

In the supine position with the head supported (by 2 pillows), eyes wide open, both fist clenched, both feet flexed (pulled towards you). Remain in this position while inhaling slowly and deeply. Then hold your breath (ill. 84). Then close both eyes, spread fingers of both hands, point both feet (away from yourself) and remain in this position while exhaling long and deep with pursed lips to slow down the exhale (ill. 85).

This exercise should be done a few minutes every day to keep up your vitality. You should get used to this way of practicing the movements.





Illustration 84: inspiration

Illustration 85: expiration

Today proper functioning in old age is more important than ever since people are getting older and older. Often just a few millimeters of functional side-bending (NNSI-, NSr-should way) are enough in order for

80 year olds to retain their vitality, keep fit and heal. The exception is in the case when they are in need of care and only a therapeutic care service can be of help.

8. The Strategy Against Overweight

An overweight person can, with exact observation, recognise the causal trigger of their overweight themselves. Stand in front of a mirror and observe the proportions of your figure. There are basically three possibilities:

A. The Weight Pyramid of Excess Weight (ill. 86)

The lower body is definitively fuller than the upper body. An **NSr** fixation exists in this case. A normalisation can come about only if you move in the direction of **NSI** until you gradually reach your optimal weight.

These recommendations are even more important if, in addition, you have a retro-chin.

B. The Weight Triangle of Excess Weight (ill. 87)

The upper body is clearly fuller than the lower body. In this case there is an **NNSr** fixation. A reduction can be reached if you move in the direction of **NNSI**. The type of weight problem is less problematic because it corresponds to the normal figure proportions of the "*Personal Favorite*". In this case one must just try to guarantee the proper functionality of the weight triangle.

C. The Weight Barrel (ill. 88)

The middle of the body, especially the belly and waist, are clearly fuller than above and below. In such a case there is a fixation of both **NNSr** and **NSr**. The elimination of such a fixation and a return to normal weight (GNW) can only be reached by moving towards **NSI** and **NNSr** simultaneously.

This becomes even more important if you have a complete tendency towards "fullness", meaning a retrochin and a retro-forehead.



Illustration 86: The Weight Pyramid

Illustration 87: The Weight Triangle

Illustration 88: The Weight Barrel

Strategy for the Weight Pyramid

This image of weight is certainly not what anyone wants. Women avoid wearing skirts and hide their full legs and calves in pants. The excess weight is mainly concentrated in the lower body regions and can only be reduced by the asymmetrical movement of **NSI**. After the right *start, the basic movements*, which must be modified for this particular type of weight loss, follow. The insole strategy and the *ADIY-tea prophylaxis* follow their own rules.

Biophysical *nutrition* and *lifestyle* are further areas of importance. Here it is important not to make any mistakes that will hamper the success of the asymmetrical movements.

Important: Once you have reached your normal weight (5% over ideal weight), do **not** reduce your weight further. If you do you will harm your health because you are very sensitive to underweight. You are at risk of weakening your immune system. Some of your "genetically available" excess must remain in order to protect you.

A. *The NSI -6- Combination* or *Right-6-Combination* (illustrations 89-94)

Start your daily ADIY-movements with these 6 movements only if they feel comfortable. For this reason please do them gently and with less amplitude on the first day. Take a break after 2-3 days of practice and check if you tolerate them.



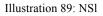




Illustration 92: NSIRr (M+F)

Illustration 93: NNSrRI (F)

Illustration 90: NNSr



Illustration 91: NSIRr



Illustration 94: NSIRr (F)

If the *NSI -6- Combination* does not lead to any discomfort or symptoms, start your exercise sequence, exercise or sports activities with these 6 combined movements.

The following 3 movements, concentrate their effect on the lower body (feet, legs, pelvis, buttocks, hips and abdominal muscles).

The NSI -6- Combination Technique (Start)

1. "NSl" Movement (illustration 89):

Stand straight, clench right fist, both eyes are closed, bend to the left side and repeat rhythmically. (Move in "NSI" direction).

2. "NNSr" Movement (illustration 90)

Both hands are on the right knee, right fist is clenched, the left hand covers the left, both eyes are open, flex to the right towards the right knee and repeat rhythmically.

3. "NSIRr" Movement (illustration 91):

Stand straight, clench right fist, close left eye, bend to the left rhythmically and repeatedly and then turn your torso and head to the right.

4. "*NSlRr*" *Movement* (M+F), (illustration 92)

Stand straight, clench right fist, close both eyes. Bend head to the left with the chin up and turn to the right. Repeat rhythmically turning the head a little more to the left and tilt the head a little more towards the back (extension) at the end.

5. "NNSrRl" Movement (F) (illustration 93)

Stand straight, right fist clenched, both eyes open. Flex head toward the right and turn head left and bring the chin in the direction of the clavicula and repeat this movement towards clavicula rhythmically.

6. "NSlRr" Movement (F) (illustration 94)

Stand straight, right fist clenched, left eye closed. Head bends first to the left and then turns right. Repeat the "yes" movement rhythmically.

The *Basic movements*, follow after this special start. The optimal and most effective time to do these are late afternoon or evening.

Afternoon Movement (* page 263, illustration 95):

Sit straight, right fist clenched, left eye closed. Stand with the entire right foot and the left heel touching the ground. Contract all leg muscles. Breathe deep and slow through the nose and mouth at the same time. Repeat 4-5 times.



Illustration. 95: Afternoon Movement



Illustration. 96: Leg-Combination

Leg-Combination (illustration 96)

Left foot sole as well as the right toe balls on the ground. Right fist is clenched and left eye closed. Alternately push the right toes and the left heel towards the floor. Breathe deep and slow.

Toe-walk, Heel-walk (illustration 97,98) Walk a small distance *on your toes.* While doing this, turn in your right arm with the palm showing towards the back. Strongly contract the leg muscles, then *walk back* the same distance with the *heels.* Now the left arm is turned in, with the left palm showing towards the back. Contract the leg muscles strongly again.

The left eye should be closed during the *toe* and *heel* walks.





Illustration 97: Toe-walk

Illustration 98: Heel- walk

Lifestyle

1. Go to the gym and work on your muscles in the region of your legs, hips, upper pelvis and buttocks as well as the abdomen and pelvic floor muscles.

2. You should walk a lot, begin jogging (slow rhythm), hike!

3.Put your legs up with head lower for 1/2 an hour while doing the following breathing exercise:

- a. Inhale through the nose, eyes open, fists of both hands clenched, both feet flexed (towards you) and let your stomach expand with the inhale.
- b. Exhale slowly with pursed lips to slow down the breath with the fingers spread apart and feet pointed away from you while tightening the abdominal muscles.

4. Do several isometric contractions of your a stomach and buttock muscles several times a day. A few seconds is enough.

5. You need more movement so do symmetric exercises every day.

ADIY-insoles: Wear the PF-Correction-insole © without a limit in time.

Nutrition

Do not drink any alcohol!

Do not drink sweet "light" drinks. Avoid artificial sweeteners and use honey instead. Drink lots of water.

Eat half of your habitual amount of food and let your stomach get used to eating small quantities. Eat mainly vegetarian food in the proportion of 70:30. Use little salt but not salt-less.

Detox with purging salts (FX-Passagesalz). Avoid eating between meals and separate proteins from carbohydrates (food combining). Don't believe in diets but in changing your living and eating habits in the long-term and ideally forever. Increase the amount of rod shaped foods and (important!) Keep on track!

Nutritional Supplements

Drink a big cup of *ADIY-NSr-tea* © (1/4L) in the afternoon and a big cup of *ADIY-NSI-Tea* © in the evening. Take 3 Natrium sulfuricum D6 (Schüssler salt Nr. 10) tablets and let them melt in your mouth. Attention: A person who has a disposition towards excess (fullness) (retro-chin) should not allow the body weight to go below the gradual ideal weight even if excess weight in the form of a *weight pyramid* does not correspond to the ideal of beauty and is emotionally and physically difficult.

The Weight Triangle

Excess weight in the form of a *Weight Triangle* in persons showing a disposition towards "excess " (retroforehead) corresponds to the ideal image of beauty (athletic figure). It corresponds to the form of the "*Personal Favorite*". If there is too much "excess", it can be proportionally reduced with the **NNSI** movement direction.

We also suggest a visit to the Fitness Center to work on the muscles of the upper body (thorax, shoulder girdle, arms).

Barrel Form

If there is excess weight in the *barrel form* in a person that has a complete disposition towards excess (retro-chin, fullness forehead, large nose), follow the instructions according to the *Weight Pyramid*. It will not hurt if you add some movements in the **NNSI** direction into your program (see "The Health of Children and Teenagers" program. Here it is especially important that the rectus abdominus and transvers abdominal muscles as well as the buttock muscles be strengthened.

In your enthusiasm do not forget: with an existing disposition to fullness you should never be underweight. Your immune system will be damaged.

Comment: Those that have carefully studied the chapter "Determining your Personal Normal Weight" might have noticed that in this 8th chapter "The Strategy Against Excess Weight" that we are not mentioning the bio-physical "pathological" excess weight (Blue or Violet overweight). Now the reader understands why: a pathological excess weight only concerns the "*deficiency types*" and the physiological excess weight concerns only *the "excess types*". It is not bad for them, it is just somewhat unsightly. The weight proportion of the "Personal Favorite" (slim below, fuller on top) totally corresponds to the Western ideal of beauty and the weight proportion of the Opposite of Personal Favorite does not (full below and thin above). It is interesting to note the fact that the bio-physical circle closes in a logical way: "N" should dominate below (being thin, rod formed), above should be dominated by "NN" (being full, round). The beauty ideal: women with full breast or the athletic muscular chest of men will find a logical bio-physical explanation here.

9. The Strategy Against Underweight

Even underweight people can be able to recognise the original trigger to their weight loss by looking in the mirror. Here there are also three possibilities:

A. The Weight Pyramid of the Slim (illustration 98):

The lower body is a little fuller than above which is clearly slimmer. In this case there is a fixation of **NNSI.** Weight can only be gained if one moves in the direction of **NNSr** to reach the gradual normal weight. These measures become even more important if one also has an NNSI forehead form.

B. The Weight Triangle of the Slim (illustration 100):

The lower body is much slimmer that the upper body, which appears a little fuller. In this case there is a fixation of **NSI**. Weight gain can only be achieved if one moves in the direction of **NSr**.

If, in addition, one has a prominent chin, these measures become even more important.

C. The Weight Rectangle of the Slim (illustration 100):

The lower body is as slim as the upper body and there are hardly any differences can be seen. In this case there is a fixation of **NNSI** and **NSI**. Weight gain can only be achieved if the person moves in both opposite directions.

These measures are even more important if a person shows the entire disposition towards emptiness (NNSI-forehead **and** NSI chin).

Remark:

Slim persons do not usually have the wish to gain weight except for those with pathological forms of underweight. An ADIY strategy against physiological underweight is therefore more of a theoretical nature and has limited practical meaning because these people usually feel good. This is different for weight loss with "excess" types (green Green, red Red). These are pathological and not the subject of this manual but a case for the therapist.

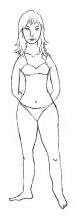


Illustration 98: Weight Pyramid

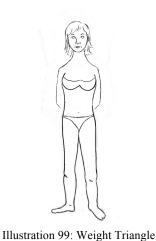




Illustration 100: Weight Rectangle

Those concerned can turn the strategies for overweight around and do the movements in the opposite direction.

Lifestyle

Go to the gym or fitness studio and work on all your muscles. This type of workout brings about more "fullness". Rest more during the day and don't sleep too much at night (6-7 hours or night rest are enough). The breathing exercise in chapter 8 is also relevant.

ADIY insoles: wear the OPF-correction-insoles \mathbb{O} or NSI-insoles \mathbb{O} (men) or NSr-insoles \mathbb{O} (women) until you have gained the desired weight.

Nutrition

Eat and drink as much as your heart desires, eat what you crave, but avoid alcohol. Don't smoke (nicotine creates deficiency and that will be harmful to you! Drink more and get used to drinking dark berry juices every day (blackberry, cranberry, loganberry) and drink 1 glass daily.

Increase the amount of meat to maintain a 50:50 relationship to vegetarian fare. Increase the amount of salt in your food. Considerably increase the spiciness and intensity of your food. Have small meals between the main meals. Coffee and cake are allowed. Eat plenty of sweets. Increase the amount of sphere formed food and ingredients.

Supplements

Drink a large cup of *ADIY-WRr-Teac* © sweetened with honey daily. Take 2 tablets of Calcium phosphoricum D6 (Schüssler salts) daily.

Remark:

Don't raise your weight above 5% of your gradual ideal weight. Everything else will harm you. You are not sensitive to underweight but very sensitive to overweight. Overweight begins above 5% of GNW so don't exaggerate and remain slim!

10. Increasing Health and Competitive Advantage of Athletes

This last chapter is very important to us. It is written for all athletes, professional athletes and coaches, sport clubs as well as for physicians specialized in sports medicine and sports authorities.

In the world of sports we are always confronted with a tendency towards increased performance and faster times through better training methods that push up the physical limits of athletes. Further performance increases and thereby a broadening of the physiological limits of man can only be reached through doping. However, this short-term increase has a high price, which is the health of athletes as well as their moral ostracism in the case that the doping is discovered.

Now the question must be asked if there is a better, allowed method of performance increase in terms of the use of the real physical limits. Here all factors pertain to the biphysical structure.

Faulty structure always leads to tension and therefore to a decrease in muscular performance and inevitably to a less than optimal use of personal resources. In contrast, the proper bio-physical body structures represent the most important factor for the optimal use of muscular performance. This method of reaching better performance is both more elegant and efficient, reducing the danger of accidents during workouts and competition and is not unhealthy for the athlete. The workouts could be reduced and money from sponsors reduced. How does an erroneous function come about and which factors play an important role?

1. No competitive athlete is bio-physically controlled during workouts and before competitions and his biophysical *health* is not examined.

2.Every competitive athlete is forced to compensate his internal *physical sources of dysfunction* through too much training at the cost of more muscular force.

3. No competitive athlete goes through an accompanying *asymmetric* screening and trainings program that corresponds to his individual "should-way" It costs him his health.

4. The compensation of biomechanical and biophysical errors or an adaptation to these costs much energy; energy that will be missing at the end of the competition.

Of course there are many other factors but we only want to talk about the most important ones.

The idea of a biological defined performance limit follows from a proper biophysical static. Discrepancies form the above always lead to a decrease in performance. From this comes the demand that competitive athletes be capable of continually adjusting their own biophysical "should-state" during workouts and competitions, to be able to use their full competitive force.

The above-mentioned information obviously does not apply only to the professional athlete but also to amateur athletes as well as sports clubs and training camps.

Summary :

In sports there is one important thing: the global health of the person practicing sports. If this were *bio-physically* and *biomechanically* the case, then one would certainly not need to reach for illegal performance boosting agents. The biologically reasonable performance increase can only be reached through biophysical optimisation, to which biophysical health imperatively belongs.

In sports the following 5 goals must always be kept in mind:

- 1. The presence of *individual biophysical health*.
- 2. Elimination of physical and biomechanical "errors" or dysfunction.
- 3. Development of an *asymmetrical workout*.
- 4. Reduction of compensations and adjustment responses.
- 5. The possibility of an individual "neutral point" by working on the "should-way".

If these five goals are reached then it is possible to reach one's personal, physiological best performance that can not be further increased. Otherwise, one is forced to help out with illicit products. The resulting effects and long-term damage are well known.

Is it possible that doping in sports is totally unnecessary? Or is it only necessary because one is not really healthy and does not have an ideal performance?

These questions can't be answered theoretically but must be answered in practice. Everyone who does sports, whether he be amateur or professional must ask these important questions if he wants to avoid detriment to his health. The possibility of increasing biological performance is just a positive side effect that comes about all by itself without any support from medication.

The Bio-physical Check-up of Athletes (Asymmetric Screening)

A. Examination of the Iliac Crest (Illustration 101):

These must be *"zero"*, meaning completely level, both before competition and during training!

This procedure has already been explained (page 30). If you discover you have a slanted iliac crest please do the appropriate *6-combination* at the beginning (pages 92-94, ill. 82-87):



Illustration 101

Left-6-Combination if you are:

- A young man under 50
- A Senior, male or female
- A woman without monthly period
- If you have a shorter right leg

Right-6-Combination if you are:

- A child or teen
- A woman with monthly periods
- Pregnant
- Going through menopause
- If you have a shorter left leg

B. General Test to the Right, General Test to the Left:

If the General Test to the Right does not correspond to the gender or age, then every athlete will have a problem. The best athletic results will come about when the General Test to the Right (RrSrE) and the General Test to the Left *are both either comfortable or uncomfortable!* This would be a sign of maximum available flexibility.

A somewhat lesser performance span is to be expected when the General Test corresponds to the age and gender and the least performance is to be expected when the General Test to the Right obviously does not correspond to gender and age (poor flexibility).

- The General Test to the Right should be comfortable for:

- - Young persons up to age 50
- - Children and teens
- - Women and men
- - Bearers of a left shorter leg

The General Test to the Right should be uncomfortable for:

-Persons above 50 - Seniors -Bearers of a right shorter leg

Remark:

If the results of the General Test to the Rightis uncomfortable and the General Test to the Left feels comfortable or the other way around, this is an indication that you have a certain type of restriction. Here the rule to be applied would be to go in the direction of the uncomfortable test results, even if this seems opposite of seemingly counterproductive to the logical rules of the "should" of gender and age.

Example: The General Test to the Right is uncomfortable for a Senior (that would be correct), the General Test to the Left is comfortable (theoretically correct too). But this shows that the person is restricted in the direction of his or her correct behaviour (*Personal Favorite*). The optimal movements should go in the direction of (*Opposite of Personal Favorite*) and not in the direction of the *Personal Favorite*. Lastly, this would make the restriction worse. **Rule in case of doubt:** Always go in the movement direction of the uncomfortable General Test to the Right or in the direction opposite to Gender. Example: 6- Combination "NSIRr" as the starting technique for women, the 6-Combination "NSrRl" as the starting technique for men. This will usually be right.

C. Unilateral Eye Closure Test:

This quick test is excellent in detecting an "imbalance" in the ANS (autonomic nervous system). Here the rule applies that the eye that is easier to close is located on the side of parasympathetic dominant side of the body.

Comfortable eye closure on the right,	Comfortable eye closure on the left,
uncomfortable eye closure of the left is	uncomfortable eye closure on the right
normal for:	is normal for:
 Children and teens Women with monthly periods During pregnancy During menopause Very old people Feminine men <i>Opposite Personal Favorite</i> (OPF) NN-relevancy Comfortable Right General Test Lower right iliac crest Shorter left leg Left-convex lumbar scoliosis 	 Masculine men Seniors, m+f Women without monthly periods Masculine women <i>Personal Favorite</i> N-relevancy Uncomfortable Right General Test Left iliac crest lower Shorter right leg Right-convex lumbar scoliosis

All gross discrepancies from this vegetative norm are considered to be a problem and considerably influence individual performance.

Remark:

The shadow side of the body is the parasympathetic side and the right side is the sympathetic one. The one-sided eye closure test provides us with very precise indications as to the asymmetric dominance of the ANS (autonomic nervous system) with regards to the relevant side. Satisfactory health or performance cannot be expected without an intact vegetative regulation. The *Unilateral Eye-Closure Test* mainly gives indication as to the "N-World" of the body (structural processing of stimuli).

D. Unilateral Mouth Closure Test:

An earlier right, left or symmetric mouth closure provides us with exact information about the endless sources of error in the "NN-World" of the body. The earlier right mouth closure must coincide with a comfortable left eye closure. The earlier left, or symmetric mouth closure must coincide with a comfortable right eye closure. Everything else is seen as dysfunctional.



Illustration 102



Illustration 103

Test procedure:Put both your index fingers on the bottom teeth and slowly close your mouth. On which side do the teeth touch your index fingers first? (Illustrations 102 and 103).

E. Arm Abduction Test :

Lift your right arm into the vertical position and determine if this movement is totally free and comfortable. This movement fits to the right eye closure and to the earlier left mouth closure. (Illustration 104).

Turn the instructions around for the left arm= left arm abduction = earlier right mouth closure (Illustration 105).





Abduction right arm Illustration 104

Abduction left arm Illustration 105

Gluteal Folds:

Have someone inspect your gluteal area while in underwear. Observe both gluteal folds. Is one lower, or are they level?

A gluteal fold that is lower on the left side (illustration 106) fits well to women, children, teens, the period of menopause, pregnancy or to an easier right eye closure and to the General Test to the Right.

A gluteal fold that is lower on the right side fits well to men, Seniors, to an easier right eye closure or an uncomfortable General Test to the Right (Illustration 107).

Such circumstances are the mirror image of an anatomical leg length difference. An x-ray of the pelvis in the standing position would be helpful in case of doubt to the observer (always a good idea).

Remark:

You have surely already noticed how important it is for every person to know about his or her anatomic leg length. The human gender and the different phases of age demand, even if in a very reduced degree, biophysically "changing" leg lengths.

Example: Woman, right shorter leg by 1cm. The "should-state" in the first phase of life, would theoretically demand a left shorter leg (children, teens, the menstrual period, pregnancy, menopause and old age). This person will have a disadvantage until the age of 60. She can only hope that her body can compensate for the inappropriate shorter leg will be successful for 60 years. A trauma would be enough to disrupt this artistic compensation. The results are biophysical pathologies and various related sensitive disturbances. The right shorter leg would only fit and be accepted by the body between the ages between 60 and 80.



Illustration 106



Illustration 107

The effect of leg length has considerable importance for athletes. The pelvis can only come to the biological and biomechanical point of *zero* if the internal compensations develop in a bio-physically appropriate and biomechanically conform manner.

The human pelvis forms the middle of the entire body and if there is just one single, maximum performance will not be possible because the body will be forced to compensate or adapt. The free movement of the pelvis is of utmost importance for every athlete. The importance of the above relationships cannot be stressed enough. Unfortunately there are very few experts in this field.

G. Ear Slant

Observe the spatial position of both of your earlobes in the mirror. Which one is lower; the right one, the left one, or are they level?

In the last case you would be in good shape. If the right earlobe is lower then you should also have a comfortable left eye closure or an uncomfortable Right General Test. (illustration 108).



Illustration 108

If the left one is lower you should also have a comfortable right eye closure or and comfortable Right General Test (illustration 109).

The daily observance of ear level should belong be closely monitored by every athlete. It gives important information as to the functioning of the *sympathetic nervous system*.

Normal Conditions:

Right ear lower for:

- -Masculine men
- -Seniors, (m+f)
- -Masculine women
- -Women without monthly periods
- -Personal Favorite

No ear lower:

= OPTIMAL =Flexibility

Left ear lower for:

- -Children, teens
- -Women
- -During pregnancy and childbirth

Illustration 109

- -Feminine men
- -During menopause
- -Very old age
- - Opposite Personal Favorite

In sports, it is of utmost importance to be able to use the maximum amount of energy and competitive edge when necessary (competition). For that you need the sympathetic nervous system. It prepares you for action (fight hormone), expands your pupils, contracts your muscles, heightens blood sugar, raises blood pressure, accelerated the heart, increases the circulation in the muscles, the blood calcium level as well as the base metabolic rate. In addition, it acidifies the tissues and thereby provides for a maximum of activity. These are processes that are indispensable in sports.

Dysfunction in the above-mentioned normal circumstances will greatly lessen the competitiveness. It is not possible to compensate for this through training. This is only possible through the use of above-mentioned illegal doping substances, which always lead to important health problems.

Conclusion: You are only 100% healthy if all the 7 tests (A-G) coincide. If only one of these goes in the direction of a biophysical abnormal state and does not coincide during the screening, the athlete has a problem. This problem cannot be solved with more practice or competitions. You could only have maximal competitiveness, in other words, good health, without this problem! If you continue to participate in sports with all your energy, this problem will hurt you in the long run.

Elimination of Bio-physical and Physical Sources of Dysfunction

A. Use of the ADIY-Insoles during Sports

The following insole concepts are available:

For the "Personal Favorite" "should-state":

- ADIY-Adult-Insole-M
- ADIY-Senior-Insole-M
- ADIY-Senior-Insole-F
- ADIY-Male-Insole
- ADIY-HF(PF)-Helper-Insole
- ADIY-HF(PF)-Correction-Insole
- ADIY-Prono-Insole-Right

For the "Opposite Personal Favorite" "shouldstate":

- ADIY-Adult-F-Insole
- ADIY-Junior-Insoles
- ADIY-Female-Insoles
- ADIY-UHF(OPF)-Helper-Insoles
- ADIY-UHF(OPF)-Correction-
- Insoles
- ADIY-Prono-Insoles-Left

The *"Personal Favorite"* "should-state" includes all masculine men, Seniors (m+f), masculine women and women without monthly periods.

The "Opposite Personal Favorite" "should-state" includes all children, teens, women, women during pregnancy, during menopause and very old people.

We would like to emphasize that the terms "*Personal Favorite*" and "*Opposite Personal Favorite*" do not have a judgement attached to them. They are just to be considered as movement directions.

Mode of Action of the ADIY-Insoles for the "Personal Favorite" "Should-State":

ADIY-Adult-Insoles-M: for masculine men between the age of 20 and 55. Indicated in the case of a clearly shorter **right** leg as well as a lower right iliac crest.

ADIY-Senior_insole-M and F: For Seniors (m + f) Indicated with a short right leg as well as a lower right iliac crest.

ADIY-Male-Insoles: For men. Indicated for impotence, erectile problems and sterility in conjunction with a shorter right or left leg.

ADIY-PF(HF)-Helper-Insoles: Stimulates the function of the *"Personal Favorite"*. Indicated for a left shorter leg (use forte version if extreme).

ADIY-PF (HF)-Correction-Insoles: The static bio-mechanical substitution for the *"Personal Favorite"*. Indicated for a left shorter leg (use forte version if extreme). Improved the vitality of this group of people.

ADIY-Prono-Insoles-Right: Corrects the masculine center, regulated the stomach, lessens anger and aggression, stabilises the function of the entire spine.

ADIY-Mono-M: For all men.

Mode of Action of the ADIY-Insoles for the "Opposite Personal Favorite" "Should-State":

ADIY-Adult-Insoles-F: for women between the age of 20 and 50 with strong, uncomfortable or painful periods. Indicated in the case of a clearly shorter right leg (use forte version if extreme).

ADIY-Junior- insoles: Indicated for children, teens and women with weak, irregular periods or amenorrhea. Also used for functionally sterile women, during pregnancy, and lactation as well during menopause. Indicated for a shorter right leg (use forte version if extreme).

ADIY-Female-Insoles: Reinforces feminine fertility, creates more femininity. Indicated by shorter right leg (use forte version if extreme).

ADIY-OPF (UHF)-Helper-Insoles: Stimulates the function of the "*Opposite Personal Favorite*". Indicated for a right left shorter leg (use forte version if extreme).

ADIY-OPF (UHF)-Correction-Insoles: The static biomechanical substitution for the "*Opposite Personal Favorite*". Indicated for a right shorter leg (use forte version if extreme).

ADIY-Prono-Insoles-Left: Corrects the feminine center, regulates the spleen, lessens excessive worry and rumination, stabilizes the center front.

ADIY-Mono-F: For all women.

Remark:

If you have any uncomfortable reactions (symptoms) even if you have chosen and worn the appropriate insoles, use the opposite insoles as a test.

Example: male, 35 years old, masculine type, shorter left leg, General Test very uncomfortable. The wearing of the UHF (OPF)-Correction-Insole proved to be uncomfortable, means changing to the UHF (OPF)-Correction-Insole. The movement direction must go in the direction of the uncomfortable General Test, in this case "OPF".

Such exceptions can exist and if they do, must be treated with flexibility.

The diagnosis in this case would be: *a fixation of the "Personal Favorite*". The therapy principle: *move in the direction of the "Personal Favorite*". This would include the static aspect in the short-term: with *UHF-Correction-Insoles* for example. These exceptions are very important! For this reason, in the case that it is necessary to change insoles, we suggest that the user of the "Helper" or "Correction" insoles order both types (PF or OPF).

B. Biomechanical Movement Direction "PF" or "OPF":

The following rule applies for the biomechanical movement direction: *Movement is either in the direction of the uncomfortable General Test to the Right* (see remark on page 71) or in the opposite direction of the "Gender-should" or "Age-should"!

You can't go wrong if you follow this rule.

Example 1:

Senior with an uncomfortable General Test to the Right = biomechanical movement direction of "OPF" = Opposite of the *"gender-should"* or the age-should"!

Example 2:

Female, strong menstrual periods, General Test to the Right is uncomfortable = biomechanical movement direction "PF" = opposite direction of the "gender-should" and the "age should".

Example 3:

Child with developmental difficulties, General Test to the Right is comfortable = biomechanical movement direction "PF" = opposite direction of "gender-should" and "age-should".

Example 4:

Problems during pregnancy, General Test to the Right is very comfortable = biomechanical movement direction "PF" = opposite direction of the "gender-should" and the "age-should".

The biomechanical movement direction "*PF*" will now be described. If you switch sides you will auto matically have the movement direction "*OPF*".

The biomechanical Self-Help Program "PF":

Asymmetrical Pelvic Tilts "HF" (image 110):

Initial position: Lie prone (without a pillow), right leg rests on the hip and knee which fall to the side (right Patrick position). Right hand holds the neck, left arm falls to the side like the leg.

Practice sequence 1. Rhythmic pelvic tilts in flexion and extension. 2: Rhythmic pelvic tilts towards flexion (take away the lordose) and take deep and long breaths through the nose, exhale through the mouth and bring the pelvis towards extension (back to a lordose). Repeat several times.

"PF" Feet (ill.ustration 111):

Initial position: Same as the Asymmetric Pelvic Tilts above (image 110): Practice sequence 1: Pull left inner foot towards pelvis and stay in this position. Turn the entire leg in several times. Contract the leg muscles at the same time. Practice sequence 2: Turn left leg in several times without the foot position.

Arms and Hands "PF" (ill. 112:)

The lower initial position is the same as in Asymmetric Pelvic Tilts (image 105) and the left hand is on the neck, left eye is closed.

Practice sequence 1: Clench right fist, left foot moves towards plantar flexion, stay in this position. Left elbow and right knee move towards each other. Repeat several times.

Practice sequence 2: Open and close right fist rhythmically and turn the left leg in at the same time.

Head and Cervical Spine "PF" (ill. 113):

Initial position is the same as *Arms and Hands "PF"* (Image 106). Practice sequence: Turn entire left leg in and remain in this position. Close left eye and lookup with the right one. Turn the head to the right, follow with the chin and nod toward the right chest. Repeat the nodding movement several times.



Illustration 110



Illustration 111







Illustration 113

Execution of the Asymmetric Training Programs

The following rules apply (also see page 29):

- Very muscular, predominately heavy set, heavy and full constitutions (Nutrition Natural) should prefer working on the front of the body (for example, chest abdomen, biceps and arm flexors, thighs, knee extensors).
- Muscular, more angular and normal weighted individuals (Movement Natural) should prefer working on the side muscles, (for example: neck and arm abductors, upper arm rotators, transverse abdominal muscles, hip muscles and femur rotators).
- Slim, tendinous and dry constitutions (Feeling Natural) should prefer working on the back muscles (for example: extensors of the neck, back, buttocks and calves).
- -

Avoiding Compensations and Adaptation Reactions

Compensations and adaptation are the worst enemies in competitive sports and "steal" away a lot of force, even in the resting state. It is not possible to eliminate these efforts to balance the body entirely. Once they have taken form, they will remain for a long time. This goes so far that these *somatic programs*, once eliminated, remain engraved in the body matrix. However, compensation and adaptation always go in one *possible* direction. This direction should be known, because it is identical to the **"should-way"** that has been described in this text.

By moving into the **"should-way"** that has often been mentioned, the "Squaring the Circle", or in other words, the individual neutral position, can be reached. Forces can thereby be mobilized that would otherwise be bound to compensatory reactions.

Instructions:

After doing the correct movement combination, begin your appropriate "**should-way**" that was described in Chapters 1 -9. After the corresponding finishing technique (TME) a short symmetric movement sequence follows which enables a return to a neutral state. We call this the "5 *Informants*":

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Standing Pelvic Tilts (illustration 114,115):
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Gluteal region out, gluteal region in, movement. Do this about 20-30 times. Remain straight and still with the upper body. The movement comes entirely from the pelvis.

"X-O" Movements (illustrations110, 111):

Bend your knees slightly while in the standing position. Feet are about 30cm apart. Now form an "X" until the inner knees touch and then form an "O". Do this movement rhythmically about 20-30 times. Important: The upper body does not move during this movement.

Opposite Arm Turns (illustration 118):

Turn arms in opposite directions and always look at the hand that is turned back. Always look away from the hand that is turned up (20 - 30 times).

Polar Bear Sway (illustration119):

Bend head down while in the standing position (chin in the direction of the sternum) and turn or sway from right to the left, (20 - 30 times).

Say "Yes" (illustration 120):

Turn your head to the right and then up and down (say yes) and then do the same on the left side, (about 20 -30 times).

None of these 5 movements should be uncomfortable. If they are, you in perfect shape and will not be able to perform at your best. Do the 5 Informants even without the "should-way". There will be positive changes.

Remark:

Symmetrical movement programs are usually causally ineffective. However, this changes radically when done after the fitting asymmetric movements or when done as the last movement of an asymmetric series. The movement series the *"Five Informants"* includes all the vital movements for the symmetrical body world. The areas and movement axis are chosen so that we can say that every kind of compensation or adaptation will be countered automatically. Do the *"Five Informants"* after your asymmetrical movement program for an increased effect. You should follow this recommendation!





Illustration 116: O Movement



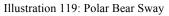
Illustration 117: X Movement



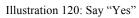
Illustration 118: Opposite Arm Turns











Indications and Contraindications

Indications:

Biophysical sources of dysfunction and discrepancies to the "should-state" of a healthy individual (asymmetropathies or early pre-stages of later pathologies).

(Also see *page 332)

The **health** of a person is difficult to define since this is of individual and relative nature. A **healthy kind of reaction** is sufficient in the biophysical sense.

Contraindications: Already existing pathologies. (Also see * pages 329-331) As primary contraindication for this helpful method are all abnormal reactions that deviate from a healthy form of reaction.

Literature

Der heimliche Favorit, Leopold Renner Foitzick Verlag Augsburg, ISBN: 3-929338-31-9 (2006)

7 Ausbildungs-Skripte für "Holistic-Manual-Therapy".

Leopold Renner (2000-2006). Publisher AFA

2 Ausbildungs-Skripte für ADIY (ADIY 1 und 2),

Leopold Renner (2001 – 2006), publisher AFA

Leitfaden der osteopathischen Technik, Leopold Renner (1987), published by leopold Renner, teaching manual for the students of the Josef Angerer School in Münich, Giselastrasse 4.

Various professional IBA articles (Assymetropathie internet library) in the restricted members area of the AFA (www.renner-methode.de/Fachverband)

Grundlagen der menschlichen Statik im Rahmen der Asymmetropathy: publisher AFA

Annex

Producers f the "ADIY-Insoles ":

Marlene Petrick Hofmarkstrasse 9 84435 Lengdorf/Kopfsburg

phone: 0049 (0)8083 1318

Bestellung@adiy-sohlen.de www.adiy-sohlen.de

Producer of "ADIY -Tea":

Homovital Medicenter Eichenstrasse 2 83125 Eggstätt

phone: 0049 (0)8056 90440

Apotheke@homovital.de www.homovital.de

You can use a thin DIA A5 notebook or a thin wood board (30 x 12 cm 3-4mm) as an "ADIY-Sitting Board" Left ADIY-Sitting Board works in the direction of OPF (NSr, NNSI). Right ADIY-Sitting Board works in the direction of PF (NSI, NNSr).

Contact addresses: leopoldrenner@t-online.de

christianhueffer@web.de

On Human STRUCTURE

The main goal of human structure is the horizontalization within the LISFACT-Group. The lower horizon, comprised of the iliac crests, should be parallel to the upper horizon, comprised of the eye line (ill. 121)! The "N-world" has the goal of coming to a still point SEDATION (0 = switching on of the rest period).

The STATOF-Group should behave in a non-adaptive manner. A slight eye slant in the right direction (age/gender) should be visible. The "NN-World" has the goal of remaining active (1 = the switching on of the active phase, and respectively the switching off of the rest phase = (ill. 122)

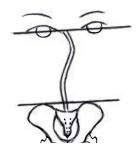


Illustration 121

Illustration 122

Tip:

If you want to be sure that everything is structurally correct do the following:

a. Have someone make the first frontal image of your face in the standing position and draw in the eye, ear and mouth lines. (ill. 123).

b. Stand on each pair of insoles that seem to be effective and have someone take a second image. Again, draw in the three lines (ill. 124).

c. Stand on the opposite insole, (for example the opposite of the Excess-insole *O*

would be the deficiency-insole, the opposite of the PF correction -insole O would be the OPF correctioninsole O etc). Have someone take a third image and draw in the three lines (ill. 125).

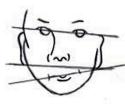


Illustration 123

(1777)

Illustration 124

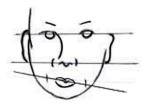


Illustration 125

Assessment: 1. Standing without an insole does not show an ideal image (ill. 123). That means: insoles are indicated, or the addition of an insole must give a better result (ill. 124).

2. Choose the insole type that produced the best possible image (for example: ill. 124).

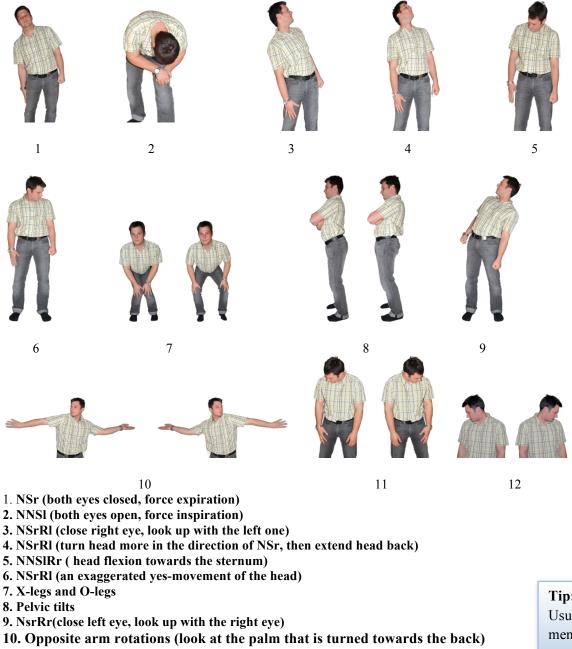
3. Avoid the insole type that produces the least inappropriate image.

On Human DYNAMICS

We call the basic program of human asymmetric dynamics the "Twelve Favorites". Twelve suggested movement direction for the human PF- side and twelve for the human OPF- side.

- Use the General Test to the Right to help you decide which direction:
- An uncomfortable General Test to the Right and a comfortable General Test to the Left means: Use of the *12 Right Favorites (in the OPF direction)*!
- If the test has the opposite results: use the 12 Left Favorites (in the PF direction)!

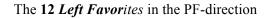
The 12 Right Favorites in the OPF- direction

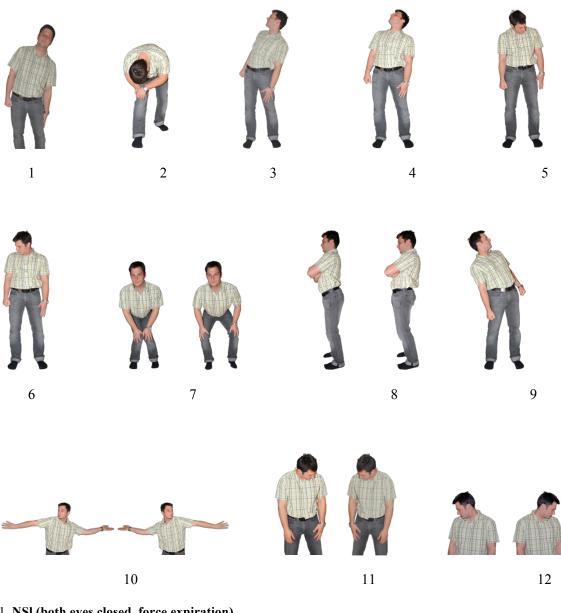


11.Polar bear swinging of the head to both sides (force inspiration)

12. Exaggerated yes-movement to both side (force expiration)

Tip: Usually best for men





- 1. NSI (both eyes closed, force expiration)
- 2. NNSr (both eyes open, force inspiration)
- 3. NSIRr (close left eye, look up with the right one)
- 4. NSIRr (turn head more in the direction of NSI, then extend head back)
- 5. NNSrRl (head flexion towards the sternum)
- 6. NSIRr (an exaggerated yes-movement of the head)
- 7. X-legs and O-legs
- 8. Pelvic tilts
- 9. NSIRI(close right eye, look up with the left eye)
- 10. Opposite arm rotations (look at the palm that is turned towards the back)
- **11.Polar bear swinging of the head to both sides (force inspire)**
- 12. Exaggerated yes-movement to both side (force expire

Tip: Usually best for women

The "Healthy Reaction" of Humans

The extreme difficulty of the definition of the term "health" is the reason for which so many actually healthy people with an impairment of well-being are referred to as sick only because they have symptoms that are similar to those that are really sick.

A measurement, comparison, or description is difficult because **health** constitutes the absolute individual asset that is determined individually and is so to say unique because there are as many individual forms of health as there are people on this earth. One is forced to make a detour if one wants to attest one's health. This detour goes the way of defining normal age- and gender- biophysical types of reaction. We call this procedure a Health Diagnosis. A sure and visual indicator can be seen in the Gender- Hologram (see next page).

You react in a healthy manner and can be put in the "healthy" category when one or more of the following test results are positive:

Category 1 = OPF- group of persons (NNSI, NSr)

1. Test: Iliac crests are level or become level after the Right-3-Combination (NSr, NNSl, NSr) 2. Test: Extend head back towards the neck and look up. It should be easier to close the right eye or equally easy to close both eyes in this position.

3. Test: Observe the face shape from the front: the mouth, ear, and eye lines should be as level as possible or there could be a slight mouth and ear slant.

4. Test: Proportions = equal weight pyramid (frontal image of body). Spherical, full body with pronounced forms. Dynamic!

5. Test: General Test to the Right is comfortable.

6. Test: Flexion forward is comfortable, extension to the back is uncomfortable!

7. Test: Low arches.

8. Bodyweight: NNSI is not above GNW, NSr is above GNW.

9. Gender hologram

Category 2 = PF- group of persons (NNSr, NSI)

Test: Iliac crests are level or become level after the Right-3-Combination (NSI, NNSr, NSI)
 Test: Extend head back towards the neck and look up. It should be easier to close the left eye or equally easy to close both eyes in this position.

3. Test: Observe the face shape from the front: the mouth, ear, and eye lines should be as level as possible or there could be a slight mouth and ear slant.

4. Test: Proportions = equal weight pyramid (frontal image of body). Rod formed, muscular body with a tendency towards angular forms. Static!

5. Test: General Test to the Left is comfortable. 6. Test: Flexion forward is uncomfortable, extension to the back is comfortable!

7. Test: Taunt lifted arches.

8. Bodyweight: NNSr is not above GNW, NSr is above GNW.

9. Gender hologram

Highest priority is given to the test 1,8, and 9. They are sufficient to put you in the healthy category. The more positive results you have, the more stable your own health will be.

If the test results of 1,8, and 9 are negative you probably need therapeutic help (HMT-therapist list). ADIY can be effective in this case but not in all cases

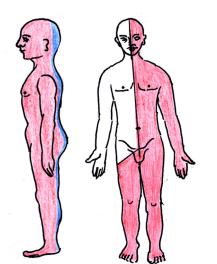
Symptom – Qualifying for the Male Gender

Male movement, reaction, and compensation patterns are usually projected in the red NNSr- area (NN-world is relevant), or in the violet NSI-area (N-world is relevant).

The red symptoms are in the *front* and *outer front*, the violet symptoms are on the *back* and *inner back*. This is a normal behavior! Your body is behaving in a healthy way.

An incompatible symptom pattern projection that appears in other parts of the body (for example blue or green) hints at an incompatible and *opposite gender mode* of functioning that a body can accept without getting sick but only on a short term basis. This behavior is not normal!

NN-World



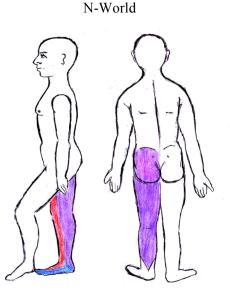


 Illustration 126
 Illustration 127

 General Test to the Right and Flexion Test Comfortable
 General Test to the Right and Flexion Test Uncomfortable

ADIY Tips to help get rid of *red* and/or *violet* symptoms:

Start: 3 General Movements to the Left (p.33, ill. 14-16)
Procedure: 2 Symptony Movements (p. 51-52, ill. 44-47) 3 Female Movements (p. 66,67, ill. 44-47, done in the opposite direction)
NNSr- Cat (p. 76, ill.67)
12 Right Favorites (p. 116)
Goal: TME 1 = NNSI standing (p. 33, ill. 15) TME 2 = NSIRr standing (p. 80, ill.73)
Insoles: ADIY- Adult- Insoles "M" (normal feet)
ADIY- Male – Insoles © (deformed feet)
NNSr-tea, calcium, bitters, use more salt, drink less, no heat, cool down, avoid sun, increase the quantity of vegetarian fare. Start: 3 General Movements to the Left (p. 33, ill. 14-16)

Procedure: mechanical program (p. 77-78, ill 69-72)

Variation for NSIRr (p. 84, ill. 73)

"NSI" Shoulders (p. 86, ill. 80)

"NSI" Knees (p. 86, ill.79)

12 Right Favorites (p. 116)

Goal: TME = NSIRr standing (p. 80, ill. 73)

Insoles: ADIY- Mono-M-Insoles

NSI-tea, potassium, bitters, more salt, local warmth, hot spices, sunbaths, reduce quantity of vegetarian fare.

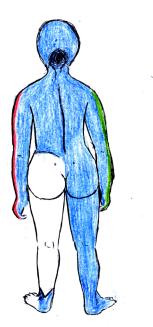
Symptom Qualifying for the Female Gender

Feminine movement-, reaction- and compensation patterns are normally projected only in the blue NNSIarea (NN-world is relevant) or in the green NSr- area (N-world is relevant). The blue symptoms are to be found on the back and inner back, the green ones in the front and outer front portion of the body. This is normal behavior! Your body is behaving in a healthy way.

An incompatible symptom pattern projection that appears in other parts of the body (for example red or violet) hints at an incompatible and *opposite gender mode* of functioning that a body can accept without getting sick but only on a short term basis. This behavior is not normal!

NN-World

N-World



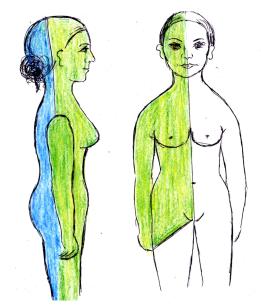


Illustration 128

Illustration 129

General Test to the Right and Flexion Test Comfortable

General Test to the Right and Flexion Test Uncomfortable

ADIY Tips to help get rid of *blue* and/or green symptoms:

Start:3 General Movements to the Right (p. 33, ill. 14-16)

Procedure: 4 Basic Movements (p.57, 58, ill.14-16) 2 Pelvic Movements (p.59, ill.52, 53) 3 Women's Movements (p. 66,67, ill. 59-61) 12 Left Favorites (p. 116)

Goal: TME 1 = NNSr standing (p. 80, ill.72) TME 2 = NSrRl standing (p. 33, ill. 16) Insoles: ADIY- OPF Correction- Insoles, Special Women's Insoles

NNSI tea, magnesium, bitters, use less salt, drink more, lacto-vegetarian fare, fasting, local warmth, sun, peace, silence, walking, meditation.

Start: 3 General Movements tot he Right (p. 33, ill 14-16)

Procedure:4 Basic Movements (p. 61,62,ill.55-58) "NSr" Shoulders (p. 86, ill. 80) done in the opposite direction "NSI Axis (p. 76, ill. 66), done in the opposite direction 12 Left Favorites Goal: TME: NSrRI standing (p. 33, ill. 16) Insoles: ADIY- Mono-F Insoles

NSr tea, bitters, calcium, more salt. Drink enough, avoid the sun, keep cool, movement, increase vegetarian percentage of food, communicate.

The Asymmetry of the Autonomous Nervous System (ANS)

SYMPATHETIC NERVOUS SYSTEM (S)PARASYMPATHETIC NERVOUS SYSTEM (P)

Heart:	acceleration, higher blood pressure, increase in circulation	slowing down, lower blood pressure, decreased circulation		
Vascular:	vasoconstriction (brain, CNS = vasodi- lation)	vasodilation (brain, CNS = vasoconstriction)		
Lungs, bronchial tubes, pulmonary vessels:	expansion	constriction (asthma)		
Stomach- and intestine peristalsis:	inhibition	stimulation (diarrhea)		
Liver function:	inhibition	stimulation		
Gallbladder secretion:	stimulation	inhibition		
Urinary bladder:	urinary retention	urination		
Kidneys:	inhibition	stimulation		
Genitals: inhibition of blood flow	inhibition of blood flow stimulation of blood flow, erection, orgasm			
Hollow organs (Uterus): atony stimulation, menstruation				
Eyes:	widening of eyelids, pupils contraction of eyelids, pupils			
Perspiration and saliva:	inhibition stimulation, (watery and abundant)			
	Reduction in spleen and liver size	enlargment of spleen, enlargment of liver		
Pancreas, small intestine:	inhibition	stimulation		
Muscle tonicity:	uscle tonicity: decreases, vascular dilatation increases, vascular contraction			
SYMMETRIC FACTORS				

Asymmetric dispos	ition of the	Asymmetric movement of	the	Gender: female or male	Constitution, character
inner organs inner organs					
Age: young or old Binary function of the rest- and		Static	and anatomic leg length	"N" or "NN" relevancy, PF or OPF-	
active phases				behavior	
ASYMMETRIC FACTORS					

Sympathetic stimulation (S+)	Sympathetic sedation(S-)	Parasympathetic stimulation	Parasympathetic sedation(P-)
Slant: NNSr, PF Male gender Expansion, inner and upper "S" dominance on right side Right shorter leg Calcium, bitter food Fire: warm, dry Spherical signatures Age: young	Slant: NNSI, OPF Female gender Reduction, outer and lower "P" dominance on left side Left shorter leg Magnesium, salty foods Water: cool and moist Spherical signatures Age: young	(P+) Slant: NSI, PF Male gender Expansion, outer and lower "P" dominance on left side Right shorter leg Potassium, spicy foods Metal: cool, dry Rod signatures Age: old	Slant: NSr, OPF Female gender Expansion, outer and lower "P" dominance on right side Left shorter leg Wood: warm, moist Rod signatures Aging process

CONTROLLING FACTORS

NNSr- movements sphere-formed things, bitter things kyphosis, NN- position, lots lots of movement, sportSports	Less salt, more water, cool NNSI- movements spherical-formed things, salty things lordose, NN- position Rest, moderate movement REGULA	salt-, water+, warmth NSI-movements, rod-formed things, spicy, lordose, N-position, rest, moderate movement	salt+, water-, cool NSr-movements, rod-formed things, sour things, Kyphose, NN-position, alot of movement, sports
Mono-M- Insole $O(S+)$ Specia Insoles, NNSr- tea, calcium, more salt, water and warmth	Special Insoles NNSI-tea, magnesium	Mono-M- Insoles © Special Insoles NSI-tea, potassium,	Mono-F- Insoles© Special Insoles NSr-tea, sodium,

The Role of Asymmetric Healing Movements (ADIY) and their Effect of the Autonomic Nervous System (ANS)

Modern medicine sees the autonomic nervous system from the standpoint of polarity between the sympathetic and the parasympathetic nervous systems. For a comprehensive understanding of the autonomic nervous system and its functional reality, it is not sufficient to look at the autonomic nervous system from the sole standpoint of the polar relationship of the sympathetic and parasympathetic protagonists. Modern medicine assumes, in a linear and causal manner, that a reduction in the sympathetic will automatically lead to an increase in the parasympathetic and vice-versa. Here it seems that a further differentiation is necessary to be able to understand what happens functionally.

The influence of the *sympathetic* portion of the ANS can be important (large quantity = stimulation = S^+), or less so (small quantity = sedation = S^-) and the other way around; the *parasympathetic portion* of the ANS can be important (large quantity = P^+ or less so (small quantity P^-). It must not necessarily follow that a decrease in the *sympathetic* automatically leads to an increase in the *parasympathetic* and vice-versa.

Whether stimulation (+) or sedation (-) occurs is dependent on certain factors that have an effect on the ANS (see example on page 121 under regulatory factors). For example, a sacrum that slants to the right has a stimulating effect on the sympathetic portion of the body (S+) as much as a shorter right leg or as much as taking calcium and/or bitter substances.

What has, until now, been neither known from a medical standpoint, nor sufficiently researched, are the effects of asymmetric factors on the ANS (see page 121 under Asymmetric Factors).

A few Examples:

1. Unequal vegetative quantities result through the anatomically asymmetric disposition and functioning of the inner organs.

- 2. The gender "male" usually shows S+, "feminine" usually S-.
- 3. The constitution "full usually shows either S+ or P- and the constitution slim, the opposite.

4. Young individuals, in contrast to those older usually show S+, older individuals the opposite of young ones show P+.

- 5. Active body phases belong to S+ while rest phases belong to P+ (normal conditions).
- 6. The N-world is dominated by the parasympathetic and the NN-world by the sympathetic.

The ANS, also called the autonomic nervous system, usually cannot be deliberately influenced. In contrast to this, many external factors can have an influence (see example on page 121 under Regulatory Factors). As in, for example, an increased quantity of cooking salt (NaCl) that increases the influence of the sympathetic (S+) and sedates the influence of the parasympathetic (P-) at the same time. Cooking salt is thereby a classic *regulating factor*.

Summary:

The ANS regulates itself in the case of health (autonomic behavior). An S-excess would normally be balanced by a S-deficiency (vegetative counter-regulation, but not through a P-excess because this would be the wrong way and lead into the pathology trap (vegetative deregulation).

The prerequisites for an intact vegetative self-healing capability is then the harmony between symmetric and asymmetric factors and between control and regulating factors. If we are able to create this balance, we can call ourselves healthy.

GLOSSARY

General Test to the Right = comfortable, means that the person concerned is in his/her "NN-world". This test belongs to the most important of all because it gives an indication of the present affiliation to the "N" or "NN" World.

Personal Favorite: The Personal Favorite (PF) described the temporary and changing state that all body structures (inner so much as outer and in neutral and non-neutral body position) should show in order to guarantee optimal flexibility and adaptation capabilities of the body to the environment. Men can reach this goal easier than women. They must react in a more flexible manner for this reason. "PF" is identical to the asymmetrical physiology of humans.

Traditional Chinese Medicine (TCM)

In contrast to the western 4-Element Theory of Empedocles, which emphasizes the static character of the being. Chinese philosophy is affected by the Five Elements Theory, where becoming, transformation, and decay describes the regularities of a **dynamic process.** Here we are talking about a Daoist theory of describing nature.

-The theory is based on the 5 basic elements (changing phases), which are Wood, Fire, Earth, Metal and Water.

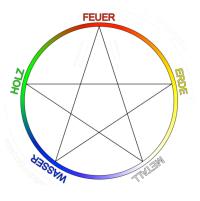
- -Wood represents breakup, expansion and the development of a stimulus to action.
- -Fire represents action, the dynamic phase, and form.
- -Earth represents transformation and change.
- -Metal represents maturity, contraction, condensation, dissolution and decline.
- -Water represents contemplation, recognition of the situation, and rest.

The interaction of these elements produces a cyclical development and stimulus that influences the most varied processes that can be put to use in the organic and organizational domains. In Daoism all declarations are seen as symbols and not as reality itself. Therefore there are no claims to exclusivity for its validity and it is possible that different declarations and theories exist simultaneously. This is similar in the western worldview of classical physics where the domain of validity did not diminish through quantum mechanics or the Theory of Relativity.

In the Chinese way of thinking every event is made up of the polar cooperation of active (yang) and structural (yin) energies. The causal western way of thinking defines every effect as the result of a previous cause. In contrast, the Chinese see a dynamic process dependent on the simultaneous workings of active and structural forces. Yin and Yang count as the most common norm/convention. In Chinese thought it is evident that in every yin and yang there is also a yin aspect and yang aspect contained within. Therefore, excess must also contain an aspect of deficiency and deficiency an aspect of excess. This is easily demonstrated with a glass that is filled with liquid. The more the glass is filled, the less will be the empty (or deficient) portion of the glass. The more the glass is emptied, the less will be the full (or excess) portion and the empty portion will increase. The cyclical dynamic process defines the filling and the emptying of the glass. (These basic premises are explained in the script with practical descriptions of "excess in deficiency" and "deficiency in excess".)

Further decisive factors are the Five Elements or the Five Phases of Transformation.

The Five Elements represent phases of transformation of processes or qualities of action. At the same time we do not refer to elements in the sense of components but of aspects of a cyclical, dynamic process. The passage through this cyclical process changes the point of departure for the following cycle. We are not talking about a constantly monotonous repetition but of an evolutionary process.



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The changing phases moving clockwise can be illustrated with the seasons of the year:

Water forms the resting point of origin and an essential part of all dynamics. It can be compared to winter. Wood, the next element, is seen as an expansive preparatory phase that corresponds to spring. Fire is the active high point and stands for summer. Earth, as a wandering element brings about evolution and can be compared to late summer. Metal, in contrast, concentrates and warrants its outcome (ripening). Once again the following phase is a transition to the rest period (Water).

In this system the cybernetic system and the interaction between the individual regulatory control elements, control variables, and feedback systems are described as a nourishing, weakening, and control cycle (more on this in textbooks on TCM).

The autonomic nervous system (ANS), also referred to the visceral nervous system forms the peripheral nervous system of mammals together with the somatic nervous system. It steers body regulation and adaptation processes that cannot be deliberately influenced. In this way the ANS controls life essential functions like heartbeat, blood pressure, breathing, metabolism and digestion. Many more organ systems like the sex organs, blood vessels, sweat glands and inner eye muscles are also innervated by the ANS.

The ANS, along with the enteric nervous system (gastrointestinal system), are subdivided into the sympathetic and parasympathetic nervous systems.

Stimulating and control (ergotropic) impulses are regulated through the sympathetic nervous system while regenerating (trophotropic) impulses are regulated through the parasympathetic system. This interplay enables the smooth function of the cycle of activity and rest.

Final Words

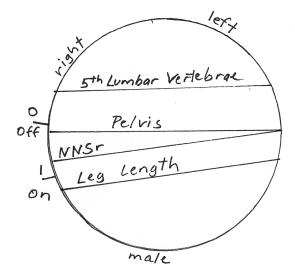
We hope that this manual was comprehensible and that it led you safely through the labyrinth, unknown until now, of both of your polar body worlds.

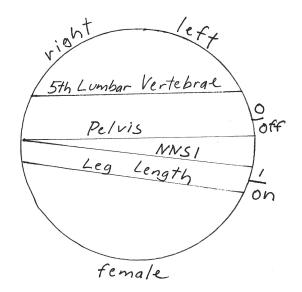
Life is made up of asymmetric movements thereby eliminating dysfunction. Health is not much more than a maximum potential of flexibility in accordance with individual capability as well as genetic-, age-, and gender-specific factors and possibly the occurrence of trauma and adaptation.

ADIY, as it is presented here, is the practical implementation of new knowledge that has the goal of living life with the maximum amount of flexibility, which enables you to move close to your ideal state (health). We wish you much success with the implementation of this information.

As further reading we suggest the textbook "Der Heimliche Favorit" by L. Renner. We have crossreferenced throughout this manual. You can get updated information on the internet at the following address: <u>www.renner-methode.de</u>.

Gender Hologram





List of Terms

NNNon-neutral (bent, round body position or elevated positionNSI- chinProminent chinNSr chinRetro-chinNNSI- foreheadForward jutting, more vertical foreheadNNSr-StirnRetro forehead, flatterRRotationSSide-bendingEExtensionrRightIleftRrSrEGeneral Test to the Right (right rotation, side-bending right, extention)UUUUSTATOFSacrum Tibia Axis Axis Thoracic spine Occiput Frontal bonePFPersonal Favorite (right movement direction)OPFOpposite Personal Favorite (left movement direction)NSrNon-neutral (forward flexion), side-bending right	Ν	Neutral (erect, upright position or supine positi- on)	
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	NNSI	-	
INST INCUTAL (In upright position) side-bending right	NSr	Neutral (in upright position) side-bending right	
NSI Neutral (in upright position) side-bending left	NSI		
Should-state The disposition intended by nature	Should-state		
Should-way The Should-way brings the body back to the should-state if there are discrepancies from the disposition	Should-way	should-state if there are discrepancies from the	
ANS Autonomic or vegetative nervous system	ANS	Autonomic or vegetative nervous system	