Effectiveness of Healing Energy on significantly lowering Blood Glucose in Diabetic patients: a pilot study report

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Abstract: Effect of Healing Energy was studied on 15 diabetic patients over a period of two weeks. Both male and female patients in the age group of 33 years to 70 years with long diabetic history were enrolled in the study. Six full day energy healing sessions, with a gap of two days in between, were conducted for all the enrolled patients. Blood Glucose and other vitals like blood pressure, oral temperature and pulse rate were measured before and after the sessions. Evaluation of the data shows a typical pattern indicating interaction of Healing with Blood Glucose level. The data also shows that there is a washout effect of Healing Energy. Partial contribution of Healing Energy towards lowering of Blood Glucose was established in comparison to control group.

Keywords: Diabetes mellitus, Healing energy, Blood Glucose

Introduction:

Diabetes mellitus is a chronic disease, for which there is no known cure. People with diabetes have high blood glucose, also called high blood sugar. (National Diabetes Information Clearinghouse). In normal humans, the body absorbs glucose with the help of a hormone called insulin and uses it for energy. Diabetes develops when the body doesn't make enough insulin or is not able to use insulin effectively, or both. (Insulin is made in the pancreas, an organ located behind the stomach). Today's medical science believes that diabetes is treatable with proper medication but to reverse diabetes is difficult. Management of Diabetes concentrates on keeping blood sugar levels as close to normal with a healthy diet, exercise and weight loss in addition to use of appropriate medications. Thus, most of the efforts are focused on the symptom, which is to control the high blood glucose level. There are several alternative Healing techniques for Diabetes ¹. According to these techniques, Diabetes is a result of energy imbalance in our body. A person having Diabetes produces less or no insulin and hence the body cannot absorb Glucose and convert it into useful energy. As per Diana Guthire and Maureen Gamble², the potential for the use of

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energy-based therapies in diabetes is great and they have given a detailed descriptions of energy based therapies used for diabetes control. The energy healing therapies such as Healing Touch (HT), Therapeutic Touch (TT), Reiky, Acupuncture³, Acupressure, Yoga, Meditation etc. have shown tremendous potential in improving management of diabetes. Zimmerman⁴, with the help of SQUID discovered that a huge pulsating biomagnetic field emanated from the hands of a Therapeutic Touch (TT) practitioner. The frequency of the pulsations ranged from 0.3 to 30 Hz, with most of the activity in the range of 7-8 Hz. Hu H.⁵ in a review which appeared in the Journal of Traditional Chinese Medicine found that acupuncture has a 2 fold benefit on diabetes. Firstly, it increases insulin synthesis in the pancreas, secondly, increases the utilization of glucose by increasing the number of receptors on target cells, resulting in the lowering of blood sugar. Though the literature is full of references claiming how one or other healing technique is useful for control of diabetes and other diseases by energy Healing techniques, there are no or few reports of a clinical trial which is scientifically designed and documented as per requirements of GCP⁶. Since Diabetes is affecting a large population all over the world, any attempt to find a solution to control of Diabetes will help millions of people regain their health back and live a happy life. We report here our findings of a small but significant pilot clinical trial, which was designed and conducted as per requirements of GCP, on effect of healing energy on control and possible management of diabetes in human subjects.

Experimental:

Study design: The study design was kept simple. The study was a single treatment, multiple dose (*multiple treatments with Healing Energy*), clinical trial inclusive of a No Treatment Control Group. The study was designed in such a way that the enrolled subjects will undergo atleast six full day Energy Healing treatments (will also be referred as 'treatment') during the clinical trial. Randomization (except for sixth treatment as described later) was not possible because all the subjects were housed in the same room and received the treatment from the healer at the same time. The treatments were scheduled every third day with two ambulatory days in between. Each full day treatment was planned to have three 1 to 1.5 hour interval treatments, two such treatments before lunch and one such treatment after lunch. Subjects enrolled in the trial were requested to report between 8 am to 8:30 am during the study. Since the objective of the present study was to investigate if Healing Energy is able to control the blood Glucose level, the blood glucose was measured for all patients before beginning of the treatment, in between the healing treatment sessions and at the end of treatment.

Ambulatory blood Glucose was also measured on two days following the treatment. For first seven days, which included three treatments, subjects were requested to report after consuming their regular breakfast and taking their regular medication. Random blood glucose was measured for all subjects in between 8:00 and 9:00 hours. This was approximately one hour after breakfast. After vitals and blood glucose measurement, subjects attended the treatment session. After completion of treatment, blood Glucose level was measured for all subjects. The Data analysis was carried out to evaluate if treatment with Healing Energy had any effect on subjects' blood Glucose level. From eighth day to sixteenth day, subjects were requested to report fasting. Breakfast was served on these days after recording vitals and blood Glucose.

Patient population: Patient population enrolled in the clinical trial included both male and Female patients in the age group of 35 to 75 years and suffering from Diabetes Mellitus since one to ten years. Patients with average fasting sugar level of more than 150 mg/dL and average PP sugar level of more than 200 mg/dL were enrolled in the study. The patient population included male and female patients, smokers, non-smokers, vegetarian and non-vegetarian, alcoholics and non-alcoholic, thus representing general population. A total of 21 (15 for treatment group and 6 for Control group) patients, who were willing to participate, were enrolled in the study. The inclusion & exclusion criteria followed in enrolling the patients is given below:

Inclusion Criteria:

- i. Patients who were diagnosed to have Type II diabetes were eligible for inclusion in the trial.
- ii. Patients with average fasting sugar level of more than 150 mg/dL and average PP sugar level of more than 200 mg/dL.
- iii. Patients who were 18 years or above were eligible for inclusion
- iv. Patients who were ready to participate in the trial on their own will and who signed the 'Informed consent form' were eligible for participating.

Exclusion criteria: Patients were excluded from participating in the study if they meet any of the following criteria

i. Patients participating in other clinical trial concomitantly

- ii. Patients who participated in this clinical trial previously
- iii. Patients reporting HIV positive or active hepatitis or active infectious disease
- iv. Pregnant and lactating women
- v. Patients who cannot sit on chair for longer duration for the Healing Energy treatment, approximately 1 to 1.5 hours.

Removal of Patients from therapy or assessment: Patients who could not attend three or more consecutive sessions were excluded from assessment.

Control group: Control group consisted of six randomly selected (to avoid any bias) patients from a total of 21 enrolled patients who fulfilled the inclusion / exclusion criteria. The control group was housed in a separate facility[#]. The facilities for both Treatment and Control groups were identical. The schedule, blood Glucose measurement, breakfast & lunch menu etc. for both Treatment group and Control group wear kept identical. The time intervals for healing sessions were identical between two groups. A different Healer, who mimicked the same kind of behaviour as the real healer, conducted the dummy healing sessions for Control group.

Type of energy: The healing energy was a type of Chakra healing energy.

The pilot study was conducted after approval from Ethics committee.

The average age of the subjects enrolled in the study was 53.47 ± 10.7 years, average weight was 64.27 ± 9.29 kg and average BMI was 25.09 ± 4.24 . Patients were requested not to discontinue their regular medications during the study.

Results and discussion:

Previous unpublished data had indicated that blood Glucose level of a Diabetic person attending the Energy Healing treatment shoots up initially. During subsequent treatments, the blood Glucose level at the end of the treatment session exhibits a maximum, starts decreasing slowly and over a period of time (days) reaches a constant low value. This typical pattern was attributed to the interaction of Healing Energy with human body. It was postulated that as a result of this interaction there is a short duration of hormonal imbalance

*Note 1: Earlier observations indicated that the Healing Energy is effective up to a radius of approximately 1.5 km (unpublished data). Hence the control group was housed in a facility which was at a distance of ~5 km from the facility where Treatment group was housed to avoid any interaction of the Healing Energy with patients in Control group.

in the body, which results in the observed high blood glucose levels. Upon subsequent healing sessions, this hormonal imbalance slowly decreases and body starts controlling the blood

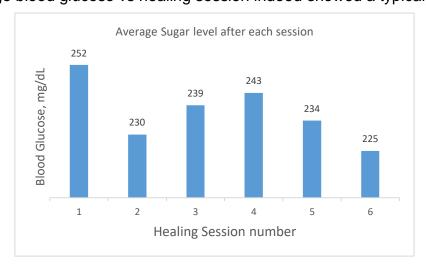
glucose level more efficiently. To verify this earlier observation, blood glucose level was measured for all subjects, enrolled in the present study, at the end of each treatment session.

The data is tabulated in Table 1.

Table 1

Session #	th	N			
	Minimum	Maximum	Average	<u>+</u> SD	
Session 1	132.0	358.0	251.9	63.6	15
Session 2	147.0	405.0	230.0	65.7	15
Session 3	128.0	340.0	239.2	59.4	15
Session 4	138.0	425.0	243.1	71.7	15
Session 5	175.0	386.0	234.4	53.4	15
Session 6	149.0	288.0	224.8	42.9	14

A plot of average blood glucose vs healing session indeed showed a typical profile



After all six sessions were complete, data analysis showed that the average value observed at the end of first healing session was higher than the average values observed at the end of other sessions. It was also observed that, except for session 1, the average blood glucose levels of the patients show increase from 230 mg/dL to 243 mg/dL and then decrease from 243 mg/dL to 225 mg/dL on 6th healing session (treatment). This trend was similar to the one observed earlier (unpublished data) and this trend is typical in that, it shows the healing energy interacting with the body. This data and the trend also shows that the Healing sessions in the present study are not sufficient and additional healing sessions are required to control the blood glucose level and bring it within normal range. A simple extrapolation indicated that a minimum of 15 treatment sessions may be required to effectively bring the blood Glucose level close to normal (~100 to ~120 mg/dl). No such pattern was observed in control group.

Washout effect: When subjects reported on the first day, none of the enrolled subjects were exposed to Healing energy. Hence, the random blood Glucose level of these subjects was considered as the baseline values, just for reference. The average random blood Glucose value prior to the first Energy healing session was 239.6 mg/dL. The average blood Glucose showed a decreasing and increasing pattern on treatment and ambulatory days of the study as shown in table 2.

Table 2

Healing session /	Blood glucose levels (random) in mg/dL of subjects				
Day #	on Healing session and no Healing Session days				
Day #	Minimum	Maximum	Average	<u>+</u> SD	
Healing session 1	129.0	367.0	239.6	77.6	15
Day 2	152.0	289.0	227.8	39.0	15
Day 3	144.0	339.0	220.7	56.2	15
Healing session 2	108.0	413.0	229.8	86.0	15
Day 5	112.0	324.0	215.1	55.9	15
Day 6	99.0	396.0	206.3	89.5	15
Healing session 3	106.0	370.0	217.7	69.7	15

This pattern of decreasing of blood glucose levels for two ambulatory days after the healing session and an increase on third day shows that there is a washout effect of healing energy. This means that the Healing Energy does interact with the body and shows the desired effect, but the effect does not remain for a longer period. Such a behaviour is observed during other types of Energy healing treatments as well (*Though this is mentioned on internet, no published data could be found as reference in the literature*). From this observation, it can be inferred that, the Energy Healing sessions should be scheduled every alternate day to ensure continuous effect of Healing Energy on controlling blood Glucose.

To evaluate whether the repeated sessions of Healing Energy has any effect on controlling the random sugar after breakfast, on the 6th healing session day, seven subjects from treatment group were selected randomly. After recording their fasting blood glucose (along with other subjects and control group), and breakfast, the subjects attended one hour healing session. At the end of the one hour healing session, blood glucose of these seven subjects was again measured. The control group was treated similarly. The resulting average blood glucose levels of the subjects from treatment group were compared with the corresponding average values over the trial period as well as with the data from Control group. The data is tabulated in Table 3 and is plotted in Fig. 2.

Table 3: Effect of repeated sessions on Blood Glucose level

Blood Glucose testing	Blood Glucose, mg/dL (±SD)					
condition	Treatment	Control				
Data from start of the present clinical trial						
Ave. Fasting	163 (±16)	250 (±39)				
Ave. Random 1h after breakfast	246 (±47)	291 (±37)				
Data on 6 th treatment session (Day 16)						
Ave. fasting	165 (±38)	270 (±45)				
Ave. Random 1h after	173 (±30)	347.6				
breakfast	173 (<u>1</u> 30)	(<u>±</u> 77)				

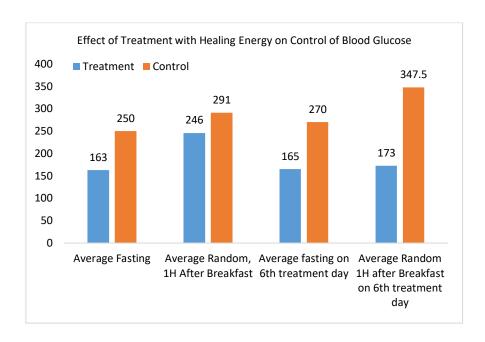


Fig. 2: Average Blood Glucose levels in mg/dL of Treatment and Control group before and after 1 H Energy healing session on 6th treatment day

The average fasting sugar of these seven subjects on the 6th Healing session (day 16) was 165 ± 16 mg/dL. This average value was close to the average fasting value of 163 ± 16 obtained during the trial period. After breakfast and one hour healing session, the average random sugar of these seven subjects was 173 ± 30 mg/dL which was lower than the corresponding average random blood Glucose level of the treatment group (246 ± 47 mg/dl) over the trial period. This observation suggested that repeated Healing sessions did have some effect on controlling blood Glucose. Though 173 ± 30 mg/dL blood Glucose is still on higher side, additional healing sessions will be required provide better control of blood Glucose.

Data of the seven subjects from the treatment group was compared with the control group. The average fasting blood glucose level for Control group on the 6^{th} Healing Session (Day 16) was 270 (\pm 45) mg/dl. This average value of the control group is higher than the one obtained for treatment group (165 \pm 38). This difference itself shows that the subjects who were exposed to the healing Energy were experiencing better control of blood glucose as compared to the control group.

The average random blood glucose level of control group, 1Hr after breakfast was 347.6 (±77) mg/dl. This value is much higher than the corresponding value $(173 \pm 30 \text{mg/dl})$, for the treatment group. The random blood Glucose data for treatment and control groups was subjected to t-test. The t-test gave a value of 0.00026 when tested at 0.05 significance confirming significant difference. The significant lower blood glucose levels in Treatment group as compared to the Control group indicate that treatment with Healing Energy is contributing to controlling the Blood glucose levels more effectively than the regular medication alone.

It is well documented⁷ that diabetic patients have great impact of the physical, psychological and social well-being due to coping with daily treatment requirements, keeping control on type of food and food intake and to live with the fact that diabetes will stay with them lifelong. Though it was not a primary objective, it was evident from the feedback from the patients that they were more relaxed about diabetes, their food intake has increased, the stress level decreased and overall wellbeing and quality of life improved as they attended the Healing sessions. It was also interesting to note that there were no dropouts from the study.

Long term effect: Long term (1 year after the study) effect of the treatment with healing energy is very encouraging. Three out of 15 treatment group patients have completely stopped taking any medication. Their blood glucose levels are normal. This in itself is very significant finding. Details of the follow up and related data will be published separately soon.

Conclusion: The study conducted showed that the Healing Energy does interact with the body and shows a pattern resulting in initial increase and then decrease in average blood glucose levels of the subjects. Extrapolation of the data on the increase and decrease pattern shows that the subjects need to attend atleast 15 full day Energy healing sessions to effectively control blood glucose levels. It was an important observation that there is a washout effect of the Healing energy and hence the Healing sessions have to be spaced on alternate days as against after every two days in the present study. After five Energy Healing sessions, in comparison to the overall average values and the data from control group, the control of Blood Glucose could be partially attributed to interaction of Healing Energy. A pivotal study is planned on larger patient population and several more tests to understand the mechanism of interaction of Healing energy with Human body resulting in lowering of Blood Glucose in Diabetic Patients.

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