

Guided Digital Medicine™ and the Solution to Migraine and Chronic Headaches

by Savely Yurkovsky, MD

This article is based on the novel medical system – **Guided Digital Medicine™**, which operates diagnostically and therapeutically on the most fundamental level of the body – Energy. Its author, Savely Yurkovsky, MD, is internationally known as a teacher and expert in Bioenergetic Medicine. His recent extraordinary book, *Biological, Chemical, and Nuclear Warfare – Protecting Yourself and Your Loved Ones: The Power of Digital Medicine*, presents fascinating clinical cases and scientific basis that explain the nature and the tremendous power of this system in all diseases.

The prevalence of migraine and other types of headaches in our society and their economic burden constitute a good reason for a big headache in and of itself. There are between 28 million formally diagnosed migraine sufferers, 14 million undiagnosed ones, and 45 million afflicted with chronic headaches of other types – a total figure of 87 million. This means one in three Americans suffer from migraines, with the combined cost of drugs and other treatments, plus missed workdays, totaling 67 billion dollars annually. Another contingent of “just” 90% of the total population

gets some kind of the ailment defined as a common headache each year. No wonder the headache market has become a golden calf for the drug companies and pain clinics.

Since the proposed etiologic factors vary from disturbed neurotransmitter or prostaglandin metabolism to nutrient or hormone imbalances, food allergies, or muscle tension and others, the triggering factors appear to be even more abundant: stress, hormonal cycle and menopause in women, weather changes and food allergies, excessive excitability and lack of sleep, viral and yeast infections, depression and caffeine, and even cold wind and sex. Even though the multitudes of therapeutic approaches directed against the aforementioned factors have produced some degree of success, the above statistics have affirmed that these successes have not been overwhelming, to say the least.

Headaches, like any chronic disease, are usually sustained by multiple anatomical and physiological breakdowns that invariably produce chains of other homeostatic aberrations; therefore, many theories and approaches become formally correct in identifying and addressing a perceived culprit. Yet, the true success in both the short-term and, even more importantly, long-term benefits to a patient concerning the malady and attainment of better health will always depend on our ability to eradicate

the key fundamental factors that, whether conspicuously or otherwise, orchestrate the entire pathological theatre of events.

It is my intention, with the use of Bio-resonance testing (BRT) and successful corrective treatment based on the findings, to share with the reader the key culprits behind the majority of, if not all, headaches. First, I offer a word of introduction concerning BRT for readers who are unfamiliar with this term. Bio-resonance testing serves the single most important purpose among all other diagnostic approaches in its ability, non-invasively and free of any discomfort, to tap into any organ or tissue in the human body and determine its energetic status, i.e., health, loss of health, and the factors responsible in the event of pathology. Besides accomplishing this task in seconds and for a fraction of otherwise enormous diagnostic costs, BRT's advantage is quite obvious, since, as a rule, no laboratory, imaging test, or even biopsy is able to yield nearly as much information. It is based, among other mechanisms, on the phenomenon of resonance in physics, in which an organ or tissue being tested via exposing the body externally to a field of the corresponding sample will elicit a stress response in case of pathology. This response will be displayed by a certain reaction on a part of the body. This display can be in the form of muscle response,

as in Applied Kinesiology testing, or in skin electric response, as in EAV (ElectroAcupuncture, according to Voll) or VEGA testing. Once the positive response is elicited, a corresponding organ or tissue can be subjected to further interrogation through other samples containing toxic or infectious agents, foods, or medicinal items, etc.

There are numerous testing techniques, technologies, and approaches in existence; all can elicit an infinite amount of information, and all can be fairly accurate, but the single most important factor that counts the most is the practitioner's view and understanding of what constitutes the most fundamental triggering elements in the disease process vs. the ones that are merely secondary phenomena or results of the proverbial domino effect. Certainly, another important aspect is the choice of therapeutic means that are supposed to address the findings.

Prevailing Anatomical and Physiological Patterns and Pathogenic Factors Responsible for Migraines and Other Headaches

It is impossible within such a complex system as the human body, which encounters some 50 trillion cells and unfathomed cell interactions, to draw rigid divisions or relationships of any kind. This is the main reason why pharmaceutical products of any kind and other interventions are unable to contain their action within the borders of their intended designs and possess infinite anticipated and unanticipated actions. Therefore, the information below attempts merely to present just general clinical patterns for the sake of establishing a working phraseology.

1. Inflammation of the Brain Pattern

Pain pattern: often severe and anywhere in the head; might be accompanied with the sensation of heat

2. Vascular Pattern

Throbbing type usually on the sides of the head

3. Tension Pattern

a) Starts from the neck/shoulders area and extends to the back of the head

b) Starts from temporomandibular joint (TMJ) tension/pain, which is often accompanied by teeth grinding

4. Sinus Pattern

Begins usually from the frontal and occasionally from maxillary sinuses

5. Bone Pattern

Begins in the bones of skull, in the sinuses, or even in the teeth

6. Neuralgia Pattern

Usually located on the side of the head extending down to the same side of the face

Etiologic Factors

There are close to 300 organic and inorganic toxic compounds that are capable of invading brain structures and, thereby, of disrupting their physiologic functions. However, from my Bio-resonance testing experience (and as this has been the case in the great majority of all chronic diseases), two of these agents – mercury and lead – remain the most ubiquitous toxins in the US and all industrialized nations. Not surprisingly, a recent study has confirmed that millions of New Yorkers, or one in every four, have elevated mercury levels (<http://www.ehponline.org/docs/admin/newest.html>). One should keep in mind that probably the entire rest of the population that is not afflicted with formally elevated mercury levels cannot be redeemed as healthy either. Not surprisingly, the official and grossly outdated view on the matter has been reversing itself slowly, as no mercury level present in the body has been conceded as safe in recent scientific literature. Lead has remained as common in industrialized societies as it is neurotoxic.

From the neuropathogenesis point of view, there is barely a single anatomical structure or physiologic mechanism pertaining to the brain that either of these two metals, separately or together, would spare from assault. Among these, the sources of toxicology pinpoint, are damaged blood brain barrier, oxidative assault of neurons, edema, hemorrhages, destruction of cellular membranes,

alternations of RNA and DNA synthesis, disruptions of enzyme and neurotransmitter activities and their production. In reality, the entire list of all of the pathogenic mechanisms is much longer.

Needless to say that these metals, and toxins in general, do not limit their body invasion to what we perceive as a target or sick organ but do invade and impair multiple organs and systems with their corresponding functions: immune, endocrine, detoxifying, excretory, gastrointestinal, musculoskeletal, and so on.

Infectious Agents

Toxicants induce immunosuppression and, depending on its extent, will turn the body into a virtual beehive of infections: parasitic, fungal (candidiasis), viral herpetic neuralgias, and bacterial or tick-borne as Lyme, Babesiosis, and others. It is worth mentioning that Lyme disease is a very commonly overlooked agent behind many headaches and mental-emotional disorders in general. Lyme testing produces a high incidence of falsely negative blood tests, and even when physicians suspect the presence of Lyme, these tests mislead the pursuit. Lyme headaches can be of devastating severity. The raging inflammation can resemble symptoms of meningitis or encephalitis. Besides, Lyme is a very common culprit behind TMJ and other musculoskeletal problems affecting the neck.

Head and Spinal Injuries

The effect of head and spinal injuries is another commonly missed factor in chronic headaches, since many traumas may occur even in early childhood and the patient may not be aware of the initial trauma.

The Combined Picture

Due to the aforementioned fundamental etiologic agents, any secondary mechanisms and factors – with their corresponding mechanisms and patterns – are possible as the role players in migraines and other headaches. These could include a leaky



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gut with multiple food allergies due to parasitic and candida infections, as well as metals damaging the intestinal mucosa, blood sugar imbalance of stress intolerance due to intoxicated and exhausted endocrine system, spinal and cranial misalignments, or hormonal problems in women whose intoxicated and infected ovaries, thyroid, or other glands produce "twisted" hormones. These "twisted" (or even intact) hormones may be misread by the "twisted," in their turn, gonadal or thyroid receptors in the brain and elsewhere. Even changes in weather can create a problem, since an intoxicated or infected brain and its structures are slow to adapt to the resulting stress or to other life stressors, such as lack of sleep or EMF and digital rays. Understand, too, that in many cases, an interplay of all the aforementioned patterns and factors is often encountered.

Treatment and Its Priorities

The fundamental pathogens beginning with toxicants are always the focus. Both their removal from the body and concurrent weakened organ support and restoration are carried out through a novel homeopathic system presented by this author in prior articles published in this journal. Certainly, the importance of a healthy low-carbohydrate and sugar-free diet as well as other prudent lifestyle modifications is emphasized.

Here are just a few case samples:

Case #1

A middle-aged man suffered from extremely severe seasonal migraines for many years. These migraines could not be controlled by narcotics and migraine meds and, in addition, necessitated oxygen inhalations. Based on BRT, mercury and lead in the brain were addressed through just one to two treatments. Following this, the migraines did not return even to this date, some eight years later.

Case #2

A young bodybuilder and law enforcement agent presented with severe migraine headaches, hypertension, depression, neck-back pains, decreased energy, and sugar cravings. He was consuming four medications daily for migraines, hypertension, neck-back pains, and depression.

Based on BRT, he was found to have mercury, Lyme, and candidiasis. After just a few visits, he has completely recovered and remained problem-free after discontinuing all of his drugs.

Case #3

A young man presented with years of severe migraines and chocolate addiction. The latter was blamed for the headaches. Diagnosed by BRT as suffering from the residual effects of head injury, which he has acknowledged, he was treated with a specific homeopathic remedy for head and spinal injuries – Natrum Sulphuricum – in a very high potency, 100M. A few weeks later, while already headache-free, he complained of intense pain in his lower jaw that he never experienced before. BRT indicated mercury, which, not uncommonly, was evidently introduced into and then released (by the remedy) from the injured brain tissue. This was addressed promptly, and now three years later, he's been completely migraine-free – and still eats chocolate daily.

Case #4

A middle-aged woman presented with severe migraines predominantly on the side of the head/face and sometimes in the entire head area. Other symptoms were fatigue, brain fog, and non-specific pains. The head pains were brought on almost instantly by computer use, which was a big problem since she makes a living as a web designer, and were also brought on by her monthly cycle.

She was diagnosed as having mercury and herpes lodged in her trigeminal nerve, mercury in the brain and ovaries, among other organs, as well as Lyme infecting the brain. She had been told in the past that she had been cured by antibiotics from acute Lyme. All these conditions, as in other cases, have been addressed homeopathically. At the present time, she enjoys good vitality and clear thinking and experiences only occasional, mild-to-moderate headaches, even after months of daily computer use.

Case #5

A young woman presented with a severe pulsating migraine in the temple area. BRT suggested mercury lodged in the wall of the temporal artery. She was cured promptly following the homeopathic regimen, and to date, the pattern has not returned for almost a year.

Case #6

A young man was brought to the office with a history of ravaging migraine headaches, experienced on a 24/7 basis, over a period of two-and-a-half weeks. Neither alternative treatments nor multiple strong drugs dispensed by pain specialists at the pain clinic at the university hospital could afford more than fleeting relief. Even repetitive injections with Demerol and Morphine received through emergency room visits were described by him as "injections of water."

BRT indicated mercury lodged in the brain, cerebral artery, and its innervating nerve and also in cerebrospinal fluid, among other tissues and organs. Shortly after the homeopathic treatment in the office, he fell into a deep sleep and, upon awakening a half-hour later, reported great relief. All drugs were discontinued, and the headache was completely gone within 24 hours as he continued the prescribed treatment at

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home. He took a few more treatments, and now, two years later, in spite of having been a chronic headache sufferer for many years, he has been completely migraine-free. He also has continued with acupuncture maintenance sessions close to home.

A word of caution concerning Lyme treatments in migraines or other associated conditions: this author has found that in the great majority of **chronic** Lyme cases, the spirochete will invariably release mercury following anti-Lyme therapies. Consequently, the patient's condition may become much worse instead of better. These episodes are often erroneously written off by Lyme specialists, in this author's opinion, as Herxheimer reactions.

Conclusion

Migraine and other headaches, as the rest of chronic diseases, do not require cumbersome medical interventions for their solution. Ascertaining and skillfully addressing the true culprits behind the illness with simple and fairly inexpensive means is usually more than sufficient.

Savely Yurkovsky, MD offers complete training in the treatment of yeast infections and all of the chronic degenerative diseases through his novel approach: FCT – Field Control Therapy® or Guided Digital Medicine™. He is internationally known as an author and teacher with an extensive background in the thorough study of scientific principles behind the numerous alternative and conventional approaches. Having evolved a unique bio-energetic medical system that integrates a great deal of pertinent but, until now, underused knowledge from medical and non-medical sciences, he has been able to transform the often vague nature of medical specialties from “hit and miss” paradigms into a far more effective, exact, and predictable science. He has founded a teaching organization, SYI Integrated Health Systems, Ltd., which is dedicated to sharing this medical system. It was presented at many professional symposia, including the annual Bioterrorism 2005 conference: “Unified Science & Technology for Reducing Biological Threats & Countering Terrorism” with

affiliation to the Homeland Security Office and Harvard Medical School. Along with several other doctors from premier medical schools in the US, he has been nominated for the prestigious Bravewell Leadership Award for “significant contributions to the field of medicine” and “compelling vision

for the future of medicine.” For training information, contact SYI Integrated Health Systems, Ltd.; website: www.yurkovsky.com; e-mail: yurkovsky@PowerOfDigitalMedicine.com; 914-861-9161; fax: 914-861-9160. ♦



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