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MODERN ACUPUNCTURE TECHNIQUES

## A Review of Recent Research Studies on the Efficacy of Esogetic Colorpuncture Therapy™ —A Wholistic Acu-Light System

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**Abstract:** This article reviews recent studies conducted in Europe which sought to evaluate the effectiveness of Peter Mandel's Esogetic Colorpuncture Therapy (ECT). These investigations addressed the use of specific ECT therapies for treating a variety of difficult health problems: migraines, childhood insomnia, bronchitis, ADD or learning disorders, and uterine fibroids. Limitations in research design and sample size necessitate that these studies be viewed as pilot or preliminary research. However, in all the studies, the findings showed dramatic improvement of symptoms after ECT treatments. This suggests that ECT may offer fast, economical, non-invasive and non-toxic methods for treating the selected health problems and that ECT continues to show promise as a powerful new method of wholistic healing.

IN a previous issue,<sup>1</sup> the authors introduced Esogetic Colorpuncture Therapy™ (ECT), a new system of wholistic acu-light therapy. Developed by German naturopath and acupuncturist Peter Mandel, ECT "offers a systematic method of using colored light ap-

plied as a stimulation at acupoints in order to facilitate the healthy exchange of information between the physical and subtle bodies, to clear the energetic remnants of trauma, and to support the evolution of the individual."<sup>1</sup> The authors discussed the theories and research which served as a basis for the development of ECT, as well as briefly describing three case histories which demonstrate the potential of this unique healing modality. In a subsequent article,<sup>2</sup> the authors presented an interview with Peter Mandel on Kirlian Energy Emission Analysis™ (EEA), his method for correlating and assessing physical and psychological symptoms via Kirlian emission phenomena, which is used in conjunction with ECT.

In response to the growing interest in the work of Peter Mandel, the present ar-

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Terminology and Concepts: Please see the Endnotes for assistance

Workshop: The next U.S. workshop with Peter Mandel will be held on October 29-31, 1999 in Denver CO. See page 84.

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### *Esogetic Colorpuncture Therapy™ (ECT)*

In contrast to the use of needles in acupuncture, ECT restores cellular communication by introducing vibrational information into the body in the form of different colored light frequencies via the acupuncture meridians, thereby re-establishing homeostasis.

ECT involves the placement of the illuminated tip of the acu-light pen instrument at selected acupoints. The acu-light is a small, handheld instrument with colored-glass tips which emit incandescent light. The process is non-invasive and extremely gentle.

Colorpuncture therapy is done in conjunction with Kirlian photography in accordance with Mandel's system of Energy Emission Analysis™. Subtle changes in energy states are carefully tracked by means of Kirlian photographs taken before and after treatment; the light treatments are specifically aimed at correcting imbalances revealed by the photographs.

In addition to relieving bodily symptoms, treatments are also designed to expand self-awareness and gently "unwind" and release any traumas, emotional scars and negative beliefs that are held in the subtle energy body and contribute to a constant state of imbalance and ill health.

The research of German biophysicist, Fritz Albert Popp, provided Mandel with the theoretical basis for ECT. In his studies of human cell communication, Popp demonstrated that normal living cells emit a steady stream of photons, i.e., *biophotons*, and hypothesized that they act as carriers of information in living organisms. Popp further observed that a cell will show an increased emission of biophotons whenever its functions are no longer in a state of balance.<sup>3,4</sup> Disruption in a cell's homeostasis can lead to a change in the balanced flow of information (light) in the body. As with the expected effects in the image of a pebble dropping into a still pond, a change in the biophoton emissions of one cell will eventually disturb biophoton emissions in neighboring cells. This transformation from harmoniously oscillating light eventually leads to *incoherence*, i.e., disease.<sup>5(p46),6</sup> Mandel carried Popp's observations one step further by suggesting that the resultant cellular changes also eventually affect the electrical receptivity of related zones and acupoints on the surface of the skin.

ticle summarizes and evaluates five research studies which evaluated the effectiveness of ECT. All of these studies were conducted in Europe and therefore may be difficult for English readers to obtain. The studies were done by various researchers in different clinical settings. Each study addressed the use of ECT for treating different health issues.

### *Study 1: Migraines and Colorpuncture<sup>7</sup>*

This study on the treatment of migraine headaches with ECT notes that 8% to 12% of the population suffers from migraines and 33% suffer from tension headaches. Although there are several theories on the cause of migraines, existing drug therapies usually treat symptoms, and have the potential to produce long term toxic effects. Some patients are helped by alternative therapies such as biofeedback, acupuncture and laying-on-of-hands, however, the author was unable to find quantitative or qualitative studies of their effectiveness.

The study subjects consisted of 56 persons, 11 males and 45 females, ranging in age from 9 to 60 years, with an average age of 40 years. One of these patients suffered from cluster headaches and the remainder from migraines without aura. Patients were classified according to symptoms: Severe (unable to work): 49; moderate (difficult to work): 3. The average frequency of symptoms was rated according to the number of migraine attacks each patient suffered per month; the average number of years that the patients had been suffering from migraines was 14. Among these subjects, 94.3% were taking analgesics.

The specific ECT treatments used in this study were selected individually for each patient based on Mandel's Kirlian EEA method of energetic evaluation. Using Kirlian photographs, the researcher identi-

fied the "function circle"<sup>8</sup> (paired meridians), as well as other criteria indicating the need for energetic balance. Treatments were individualized for each subject and included combinations of ECT therapies for toxicity, imbalances in hormone and stomach acidity levels, imbalances in Kidney-Bladder and Liver-Gallbladder meridians, and control therapies numbers 1 and 8 to balance the brain, or the "coordination system."<sup>9</sup>

Duration of each ECT treatment was 60 minutes; treatments were administered at intervals of one to two months. Patients were observed for a period of up to 60 months, starting at the time of the initial therapy. The number of treatments per patient ranged from 1 to 15; 70% of the patients received 4 or less treatments.

Results: 65% of the subjects were assessed as cured (no migraine attacks during the last 3 months); 30% were improved (attacks were less severe and it was possible to work without difficulty); 5% reported no improvement. In particular, subjects receiving ECT control therapies numbers 1 and 8 showed the highest rates of effectiveness: 88% cured and 53% cured, respectively. Also, the data showed a higher cure rate (71%) among subjects receiving four or less treatments than in those receiving five or more treatments (38% cure rate).

Follow-up evaluations conducted on all study subjects over periods of up to four years revealed that the success of the ECT treatments persisted. However, the author does not clearly indicate if all subjects remained symptom free for all four years.

#### *Comments on Study 1*

The primary limitation of this study is the lack of a proper control group or double-blind design. All participants in the study received ECT treatment and the therapists knew they were giving the treatment to everyone. Thus, the study does not provide a

#### ***Kirlian Energy Emission Analysis™ (EEA)***

Mandel's empirical observations of more than 200,000 Kirlian photographs over a five-year period were repeatedly verified clinically. This research laid the foundation for discoveries on the phenomenology of energy emission.

Interpretation of Kirlian photographs enabled Mandel's development of an organ map (or topography), which correlated energy emissions. It became evident that long before symptoms manifest, bodily changes, as well as past emotional and physical trauma, are energetically present and are perceivable as distinct coronal expressions of the Kirlian phenomena. Subsequently, a basic working hypothesis emerged: If bioenergy within the body represents information, then manifestations of harmonious energy (as seen in the energy emission corona) would be a sign of normal cell function, and vice versa.

In EEA practice, Kirlian photographs are simultaneously taken of the tips of the fingers and toes of all four limbs. Clinically, these photos are used to obtain indications of where disturbed energetic information may be originating.

The topography of the EEA method consists of 20 zones located at the beginning and terminal regions (on the fingers and toes) of the acupuncture meridians/channels. On a Kirlian photograph, a normal or healthy emission pattern is composed of two rings: an inner ring, the "thermal circle," consisting of a dense ray pattern; and an outer ring, the "bioluminescent circle," containing a less dense or thin "ray" pattern.

In abnormal or unhealthy emission phenomena, three principal types can be observed and indicate: (1) deficiency, (2) toxicity, and/or (3) degeneration. Additional phenomena have specific diagnostic significance.

Within minutes following treatment with ECT, changes in Kirlian emissions can be demonstrated. According to FA Popp, the human energy body, or energy field, is characterized by an extremely fast impulse velocity, such that the resonance patterns within the cells, organs and systems are communicated throughout the organism in a very short time.<sup>10</sup> Mandel observes that the clinical effects of treatment by ECT as revealed by Kirlian phenomenon is entirely consistent with this hypothesis.

way to clearly discriminate the extent to which confounding factors such as a "placebo effect" may have contaminated the results. It is further unclear how the study subjects were actually chosen. Were they randomly selected from a larger population or did they include all the qualified patients enrolling in the clinic over a given period of time? The sample is small (50 cases), making it difficult to allow reliable generalization of results to the general population. One could further argue that the fact that 94% of the study sample appear to have been using analgesics at the time of the study may have further contaminated the findings. However, since all patients had been suffering from migraines for at least 14 years, it may be safe to assume that analgesics had been previously taken with no marked change in symptoms.

Finally, a further weakness of this research design involves the use of different ECT treatments for each subject. There were no controls for the effect of this variation upon the data.

Given these limitations, one should view this study as a pilot or preliminary research project. However, the most positive aspect of the study is the dramatic improvement rates. A cure or improvement rate of 95% among subjects' symptoms which remained stable for months or years is certainly a higher success rate than is being achieved with standard medical treatment. Finally, these results were achieved with a very small number of treatments in patients who appear to have had severe symptoms.

### **Study 2: Chronic Insomnia in Children<sup>11</sup>**

Sleeping disturbances in children of preschool age, including difficulty falling asleep or waking frequently during the night, occur in about 10 - 20% of the population. A review of previous research in this

area revealed that few treatment studies had ever been undertaken. Of those that have been done, most found that therapeutic treatment of childhood insomnia typically involved long recovery periods and extensive commitment by therapists and parents.

This study was conducted over a 3-year period (1989-1992). The study subjects consisted of 80 children (50 boys and 30 girls), ages one year or less (20%), one to three years (67.5%) and three to five years (12.5%). All of these children suffered from nightly sleep disturbances ranging from persistent difficulty falling asleep to chronic insomnia. All had been symptomatic for at least three months prior to joining the study. The researcher noted that a medical intervention had already been attempted in 19 of the children without success before beginning the study treatments with ECT.

During the study, the same treatment was given to all the children: Red light on bilateral Kidney-1 (Yongquan) and violet light on Yintang (Ex-HN3), GV-20 (Baihui) and GV-19 (Houding). All points were radiated for one minute. Treatments were administered every 7 - 15 days until a cure or improvement was observed. The maximum duration of therapy was four weeks; the average number of treatments was 1.90.

Results: Cured: 45 children (56%); improved: 30 (38%); and no improvement: 5 children (6%). Thus, 94% of the children in the study showed improvement with the ECT treatments. *Cure* was defined as the ability to regularly fall asleep within 30 minutes and regularly sleep through the night; *improved* was defined as a reduction of at least 50% in the frequency of waking, consequently disturbing the parent's sleep less often.

The author's observed that, in comparison with other treatment methods for childhood insomnia, ECT was quick, effec-

tive, harmless, painless and easy to administer.

#### *Comments on Study 2*

This study also lacks the proper control group or double-blind design needed for more reliable results. Again, the sample does not appear to have been randomly selected from a larger clinic population, and 80 cases is still a very small sample size.

The primary positive aspect of this study is that the improvements in sleep patterns were observed in a majority (over 96%) of the cases. Since the treatment method used in this study was the same for all patients, the random variation introduced by differences in individual treatment has been eliminated. And, the fact that children in the study received an average of 1.9 treatments again suggests that ECT provides a fast and economical method of treatment for this problem.

#### *Study 3: Acute and Chronic Bronchitis*<sup>12</sup>

This study considered the effectiveness of ECT for treating respiratory tract infections, specifically acute and chronic bronchitis and bronchial asthma. Specialists in pulmonary medicine, the authors noted that these are conditions which have been increasing over recent years in both children and adults, thus necessitating an increase in prescription medications to combat these problems. The focus of this study was to evaluate the efficacy of ECT for relieving bronchial inflammation and reducing or eliminating the need for drug treatments including antibiotics.

A total of 50 subjects was selected, most with bronchitis and some also suffering from asthma exacerbated by the bronchitis. Patients ranged in age from one to over 15 years. There were 56% male and 44% female. The selection process included interviews with their family physician, internist

or pediatrician. Only patients with "strong" coughs were included; they were evaluated according to degree of expectoration of suppurating sputum, severity of dyspnea, spirometric analysis of respiratory low volume, and chest x-rays. None of the patients had previously been treated with ECT.

Based on the researcher's diagnosis, patients were either given ECT alone or in combination with medications. Among the subjects, 59.3% received bronchodilators, 5.1% received antibiotics, 16.9% used cortisone inhalers, and 18.6% received no medication.

Five ECT treatments were used, specifically: upper, middle and lower lung interference, medulla interference and medulla ellipse. These treatments support energetic regulation in the lungs and medulla oblongata.<sup>13</sup> The treatments took approximately 3-5 minutes to administer and were administered by medical assistants in the clinic.

The researchers reported that the ECT treatments resulted in quick and often immediate relief of subjective symptoms, as well as objective improvement per post-treatment physical examination, radiological and spirometric tests. Altogether, 80% of the subjects showed very good improvement, 14% showed moderate improvement, and 6% showed no improvement, yielding an overall effective rate of 94%. The researchers observed that use of medications was reduced, as fewer patients than usual required medication or the period of medication intake was shortened after treatment. Moreover, patients often reported prompt improvement of often uncontrollable coughing.

#### *Comments on Study 3*

The study does not include a control group or double-blind design and its sample is relatively small. Evaluation of treatment effectiveness may be somewhat confounded

by the fact that over 80% of the study subjects were also receiving some sort of medication for their symptoms. However, one of the objectives was to evaluate the effectiveness of ECT for reducing the extent to which such medications were required.

On the positive side, considerable care went into screening potential subjects for the study. All cases were evaluated medically including objective tests of pulmonary function, thus helping to standardize participants. Post-treatment assessment included subjective reports by the subjects and repetition of objective tests, thus rendering the findings more reliable.

#### **Study 4 — Learning Disorders and ADD<sup>14</sup>**

Attention deficit disorder (ADD)—a learning disorder involving developmentally inappropriate inattention and impulsivity, with or without hyperactivity—accounts for 3-10% of behavioral problems in school-aged children. The authors of this study note that, because of the subjective nature of these symptoms, ADD is a vaguely defined syndrome and consequently many children are labeled ADD without proper evaluation. The etiology is unknown; various theories propose biochemical factors, neurologic immaturity, allergies or environmental factors, minimal cerebral dysfunction, or pre-, peri- or post-natal disturbances.

Five children classified with ADD were selected for this study based on behavioral feedback from parents and teachers as well as special education tests. Each of these children satisfied the researcher's criteria of three main behavioral components: impulsive behavior, poor concentration and hyperactivity.

Using Mandel's method for analyzing Kirlian photographs, the researcher identified energy system imbalances in each child. Based on these findings, the treatment pro-

tolocol for all five children included three phases: 1) treatments to correct strong "laterality" imbalances between right and left brain hemispheres; 2) treatments to balance and regulate the limbic system (an area described by Mandel as a "garbage can for old emotions" which, when energetically burdened, can block creative thinking and analytical learning processes<sup>15</sup>); 3) pre-natal therapies to clear energetic imprints of early trauma,<sup>16</sup> a potential root cause of ADD symptoms. ECT treatments were administered to these children over a period of nine months.

Results: All five children showed dramatic improvement in school performance, most performing at the top of their class. One child actually skipped a grade. Follow-up at nine months after treatment was completed revealed that improvement had been maintained in all children.

#### *Comments on Study 4*

Since this study included only five children, with no comparison or control groups, it can only be viewed as a pilot investigation. There is no possibility of reliably generalizing the study results to the general population.

Given this, an interesting aspect of this study is the depth and complexity of the treatment protocol used. In this situation, ECT made it possible to address both brain function and possible early trauma easily and quickly. The observed improvements in the children's behavior and performance are encouraging. It will be interesting to see this research pursued in a larger, more scientifically reliable study.

#### **Study 5: Uterine Fibroids (Myomas)<sup>17</sup>**

The treatment of fibroids, the most common benign neoplasm of the female genital tract, is a difficult challenge. The conventional treatment options are hormone therapy or surgery, each involving potential

side effects. In this study, 100 women with fibroid growths confirmed via gynecological examinations, ultrasound and cytological tests were selected. The fibroids found in the study subjects included all types as classified according to anatomic location depending upon whether they were attached to the uterine wall, interstitial to the uterine wall, growing within the mucous lining or atypical. Cases which required immediate surgery due to acute torsion of pedunculated fibroid or long-term excessive bleeding were excluded. The women in the study ranged from 30 - 50 years old; all had given birth to an average of two to three children. Their histories varied from asymptomatic regular menses to symptomatic irregular menses. None of these women had previously received any ECT treatments.

Subjects were classified into four groups based on their Kirlian EEA photographic findings. This enabled the researcher to identify characteristic signs of energetic imbalance for persons with fibroids and then track the evolution of these signs, according to the length of time that the fibroid had been growing. Notably, he observed a consistent relationship between changes in the energetic phenomena in the uterine and kidney areas of the EEA photographs. He suggests that this occurs because tissues in these areas develop at the same time embryologically.

All subjects received a simple, standard ECT protocol: Light treatment of Governor-3 (Du-3), GV-5 and GV-7 with colors green, blue and green, respectively. In especially advanced cases, GV-7 was also treated with a green bionic lamp. Subjects were treated 30 - 60 times (the elapsed time period was not specified) and each treatment lasted 30 minutes.

Results: Post-treatment, subjects were assessed using follow-up gynecological examinations, ultrasound and cytological tests

which revealed that fibroids had completely disappeared in 33% of the women, fibroid size had decreased in 45% (effective rate: 78%); there was no change in 22% of cases which included 12 subjects (12%) that required surgery. All subjects reported that they were able to be more physically active, felt better emotionally, had less pain in the lower back and abdomen, and/or were able to sleep better.

#### *Comments on Study 5*

This study has a slightly larger sample size than any of the others. However, it again lacks the proper control group or double-blind design required for eliminating the placebo, etc. The researchers do not mention whether the patients were receiving any medication at the time of light treatment and there is no follow-up data. Moreover, the improvement in fibroids is not correlated to the age of the women, which might help to eliminate the factor of natural improvement in fibroids in post-menopausal women.

On the other hand, this study uses thorough and scientifically objective evaluation procedures for pre- and post-treatment assessment of fibroid growth and change. This makes the observation of patient improvement more reliable. The fact that all patients received the same ECT protocol makes the data more consistent. And finally, like all the other studies in this review, the results show impressive results (78% overall improvement) using therapies which are considerably more economic and less painful than medication or surgery.

#### *Conclusion*

Because of the limitations in research design and sample size, all of these studies should be viewed as preliminary or pilot research. In future studies, these limitations could be overcome by evaluation of larger



groups of subjects, randomly selected from a certain population according to the specific criteria of the study and randomly assigned to treatment and control groups, possibly using a double-blind approach to treatment. Perhaps a method could be devised whereby one group received ECT treatments with the light source "turned off." If such an approach could be used without the patient noticing the absence of light, this would be one way to eliminate possible placebo effects. Furthermore, to the extent that treatment protocols can be made consistent for each participant and the use of other medications can be eliminated, the reliability of the findings would be greatly enhanced.

At the same time, all of this research is being carried out by health practitioners in clinical settings. In these situations, scientific research procedures must be weighed against the clinician's responsibility to the care of the client.

Despite these limitations, all of these studies suggest, at least preliminarily, that ECT has powerful healing potential. All the studies reported positive, and in some cases lasting, improvement in the vast majority of cases. Each of the studies addressed health problems for which there are either no viable medical treatments or for which current treatment methods involve the use of medications or surgeries with potential risks. The ECT treatments used were easily and quickly administered. As one of the researchers pointed out, the treatments can be administered by staff assistants trained in the particular techniques. Often it took very few treatments to achieve a positive result. Finally, the treatments are non-invasive, painless and non-toxic. For all these reasons, these preliminary studies suggest that ECT has tremendous potential as a method of wholistic healing and merit serious consideration and investigation.

## Endnotes

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3. Popp FA: *Biologie des Lichtes (Biology of Light)*. Verlag Paul Parey, Berlin, 1984, p 38. (In German)
4. Popp FA: *New Horizons in Medicine*. Haug Publishers, Heidelberg, 1987, p 141. (In German)
5. Mandel P: *Esogetics: The Sense and Nonsense of Sickness and Pain*. Energetik-Verlag GmbH, Sulzback/Taunus, 1993, pp. 46, preface (p 3). (English translation)
6. As part of his research to demonstrate biophoton communication between cells, Popp conducted the following experiment: In two hermetically sealed jars made of quartz glass, he placed trays of living cells in a nutrient solution. He then deliberately introduced a virus into one of the jars and infected the cells. When the jars were touching, the cells in the neighboring jar immediately became infected. When the same experiment was repeated with regular (non-quartz) glass jars, the virus did not spread to the second jar. Quartz glass is known to transmit ultraviolet rays of light while regular glass does not. Out of this came Popp's conclusion that the ultraviolet light was transmitting the impulse of disease.
7. Pagnamenta F: Migraine and chromopuncture, in: Mandel P: *Colors: A Pharmacy of Light*, vol 2. Esogetic Verlag GmbH, Sulzback/Taunus, 1996, pp 188-197. (In German)
8. Mandel has developed a series of ECT therapies to balance energy flow in the meridians, which he refers to as "function circles." Each function circle consists of a pair of meridians, i.e., kidney/bladder, liver/gallbladder, lung/large intestine, stomach/spleen and heart/small intestine. Drawing upon the theories of Chinese medicine (notably Five Element theory) as well as more recent theoretical developments in Germany, Mandel has formulated his own theories regarding these meridian pairs and the life journey of man. Notably, any imbalance in one of the five function circles is associated with particular emotional stresses or burdens, as well as the confrontation with specific life issues or life lessons. ECT treatments for the function circles work to clear emotional burdens and provide an impulse toward the resolution of life issues, even as they restore the energetic balance that will improve physical symptoms. For more information, German readers are referred to Mandel's *Compendium of Colorpuncture*, volume 2, pp 214-244.
9. Mandel has developed a series of treatments addressing what he calls the "coordination system" of the body. This system consists of seven parts of the brain and endocrine system which



Mandel believes occupy a key position in regulating the functioning of all the body's systems. These seven organs are the thalamus, hypothalamus, limbic system, corpus callosum, medulla oblongata, pineal, and pituitary. Mandel has developed treatments in which colored light is applied to specific points and zones to balance and regulate these seven aspects of the coordination system, either individually and as they work together. Coordination 1 and 8 are two of the treatments which balance and harmonize the functions of these organs. For more information for English-speaking readers, see Mandel's *Esogetics: The Sense and Nonsense of Sickness and Pain*, pp51-65. German speaking readers, see Mandel's *Practical Compendium of Colorpuncture*, volume 2, pp169-201.

10. Popp FA, Becker B (eds): *Electromagnetic Bioinformation* (ed 2). Urban & Schwarzenberg, Munich, 1988, pp. iv, 146-147.
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12. Katzmayr D, Katzmayr T: Esogetic medicine bronchitis study. *Ganzheitliche Zahnmedizin*, March 1997. (In German)
13. The interference treatments are more recent development in Mandel's ECT. As such, they are not described in any currently available publication. In a seminar in December 1995, Mandel talked about the way in which physicists describe energy as moving in waves, which overlap and thus form "interferences." An interference is a pattern of energy waves in which wave peaks and valleys overlap creating a certain holographic effect. Mandel has related this theory of interference patterns to bipolar acupoints of the body. To treat the interference area related to a specific bipolar point, Mandel first applies light to the point on each side of the body and then strokes the area of energetic wave overlap between the two points with light (rather like the areas where the ripples would overlap when two pebbles are dropped in a pond.) He calls these interference treatments a special repair unit and says they give a particular push to clear energetic stagnation and sickness. Mandel has developed a complete set of interference treatments to address various systems and organs in the body, including the upper, middle and lower lungs and the medulla oblongata, as were used in this study.
14. Fischer S: *Children's Learning Problems: How to Support Them With Colorpuncture*. Unpublished master's thesis, University of Tübingen, Germany. (In German)
15. The limbic system is one part of what Mandel refers to as his "coordination system." He believes it is very important to energetically clear and regulate this area of the brain, as it plays a key role in the interaction between body, mind and emotions. He notes that emotions such as anger, joy, sorrow, pain, fear and phobias must be processed via the limbic brain. When the buildup of emotions being switched through this area becomes too great, the regulatory capacity of the limbic system is disturbed and hence, the body is

affected. At the same time, Mandel notes that the limbic brain is actively involved in all learning processes. He believes that this portion of the brain is important to treat in all children and adults with learning difficulties, and has developed specific ECT therapies to regulate the limbic system. See Mandel's: *The Sense and Nonsense of Sickness and Pain*, pp 56-60.

16. Mandel has developed and refined a series of ECT treatments designed to clear the energetic residue of traumas which occur during the prenatal phase of life. He has said repeatedly that one cannot underestimate the tremendous impact which these early imprints have upon the human being's lifelong physical and mental health. Today, Mandel has specific ECT therapies to address all stages of prenatal development. German readers see: *Colors: The Pharmacy of Light*, volume 1, pp 98-105.
17. Woronoff V: *Studies in Esogetic Medicine: Treatment of Fibroids with EEA and Colorpuncture*. Conducted at Rostow-am-Don, Klinik für Terminalpunktdiagnose und Farbtherapie, March 1996. (In German)

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#### Workshops/Training

The authors work in cooperation with the International Mandel Institute to offer training in Esogetic Colorpuncture Therapy and Kirlian Energy Emission Analysis throughout the United States. These programs include both introductory workshops designed to teach simple self-healing regimens, as well as separate programs leading to professional certification. The training is designed in cooperation with Peter Mandel, and certification is granted through the International Mandel Institute. →

#### Workshops/Training (continued)

The authors also sponsor special workshops taught by Peter Mandel in the United States. Mandel's next American seminar is being offered October 29-31, 1999 in the Denver area. For information regarding training in Esogetic Colorpuncture Therapy and Kirlian Energy Emission Analysis, as well as Peter Mandel's upcoming seminar, contact:

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#### Resources and Equipment

Equipment used in Esogetic Colorpuncture Therapy includes the Perlux P117 (updated model of the earlier Perlux B111), the Perlux Infrared acu-light pen, the Soul-Spirit color set, etc. Additional products used in Esogetic therapies include the Esogetic Herb Oil, the Color-Sound Therapies and the Esogetic Sound Pattern audio-tapes.

For information on the products, equipment, and/or books by Peter Mandel, contact:

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#### About the Authors

Manohar Croke and Rosemary Dass Bourne are certified practitioners of Esogetic Colorpuncture and Kirlian Energy Emission Analysis, and received training from the system's originator, Peter Mandel.

Manohar Croke practices at the Boulder Wellness Center in Boulder, Colorado. She is the founder of the Institute for Esogetic Colorpuncture and Energy Emission Analysis, USA and is an American representative for the German distributor of the books, tapes and products used in ECT.

Rosemary Dass Bourne is also an acupuncturist and Doctor of Oriental Medicine and brings this knowledge to bear in her private ECT practice in San Anselmo, California.

Ms. Croke and Dr. Dass are certified by the International Mandel Institute as instructors and commit a large portion of their time to sharing the skills and information related to Esogetic healing processes. They are also contributing authors to *Light Years Ahead: The Illustrated Guide to Full Spectrum & Colored Light in Mind/Body Healing*, published by Celestial Arts Publishing, Berkeley, as well as co-authors of numerous other articles regarding this work. □

