

An Experimental Evaluation of Kinesiology in Allergy and Deficiency Disease Diagnosis

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An accurate, reliable, and quick method for determining vitamin-mineral imbalances and food allergies is critical in establishing a balanced behavioral biochemistry. Dr. George Goodheart has clinically observed that whenever a patient was deficient in a specific vitamin or food factor, a specific muscle which he found to be associated with the nutrient was almost always unilaterally weak (weak on right or left side of the body) when the muscle strength was tested using kinesiology procedures (Goodheart, 1976). Goodheart and coworkers have established an association between approximately 50 vitamins and minerals on the one hand, and 50 associated muscles which are weak when the nutrient is deficient. According to Goodheart, chewing or ingestion of the critical food factor results in dramatic restoration of muscle strength within 10 seconds.

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The purpose of this study was to test some of Goodheart's observations in a more formal manner and to adapt his principles to cerebral allergy testing. Ten naive subjects were given 10 muscle tests by six trained testers. Pearson Product-Moment Correlation between testers was .91, suggesting that muscle testing is reliable between testers. Subjects with unilateral weak muscles were then given either a placebo or the nutrient which Goodheart believes to be associated with the unilateral muscle. The increase in muscle tone measured approximately 10 seconds after ingestion was 21 percent for the nutrient group and was a statistically significant ($p < .05$) increase in comparison with the placebo group. The placebo group showed a small nonsignificant pre-post decrease in muscle tone. Muscle tone was measured by a Jaymar dynamometer with the muscle tested according to kinesiology procedures described by Kendall and Kendall.

In the cerebral allergy testing part of the study, a 15 percent decrease in muscle tone of the pectoralis major clavicular was used

as the criterion for cerebral allergy. The muscle testing method was then compared to results obtained by a Philpott-type fast with progressive reintroduction of foods. Correlation between foods identified as provocative by muscle testing and by the fast was .81. Observation of clinical results obtained with muscle testing suggests the method has substantial clinical utility.

In summary, kinesiology muscle testing may be statistically reliable and valid for the rapid assessment of nutrient imbalances and cerebral food allergies. The method is appealing because both the patient and professional immediately see the effect of the nutrient on the muscle, tone. Research on the correlation of muscle testing with clinical lab tests of nutrient deficiencies and assessment of clinical improvement using muscle testing method is needed.

REFERENCES

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