



The „cross“ we bear

Diseases in the area of the vertebral column – often indications of mental problems

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Introduction

Disease does not alight upon us from the outside like an irritating insect. It often originates on a higher plane of our consciousness. Many physical disorders are often caused by mental problems. If the latter are not resolved, they may become intensified in the form of organic diseases. One of the main organs in which such conflicts take root – sometimes unrecognised or mistaken for a long time – is the vertebral column. There are many indications of this in our everyday language: *bowed down, stiff as a board, my back's killing me* or on the other hand, *upright, erect, mobile* and others.

More and more patients are presenting with back problems these days in medical practice. Even children and young people are frequently affected by misalignment of the vertebral column. Where are we to look for the root causes of this? Unbalanced nutrition, which may lead to acidosis, poor posture, poor seating on unsuitable furniture, lack of movement, uneven loads, malpractice in sports, all are undoubtedly important reasons for some of these disorders. However, to attribute them to these things alone would mean viewing the vertebral column as an isolated organ or separating it from the overall solidarity of our existence. But since it is part of this, it should definitely be looked at from a holistic point of view.

Anatomic structure and classification of the vertebral column

From top to bottom it consists of the following sections: cervical spinal column with seven vertebrae, thoracic spinal column with twelve and lumbar region with five vertebrae. Below that are the sacrum and the coccyx.

In each vertebra there is a cavity, the vertebral space. If we line up the vertebrae, this makes a canal in which the marrow lies, running right up to the brain. Embedded in this bone marrow is the central nerve cord of the body. From this all the nerves which supply the organism run out: each individual vertebra, with its nerve branches, is allocated to an organ or system. In addition however, each vertebra is the seat of a spiritual-mental aspect. This may be understood in the following way: as our centre, the vertebral column enables us to walk erect and thus, as the bearing element, forms our *present*. The left side of the body stands for the *past* and also represents the *feminine, receptive* aspect and our maternal heritage. Correspondingly, the *future* lies in the right half of the body, as do the *masculine, giving* aspect and the paternal heritage. On the left side there are traces left by our life hitherto; on the right, for example, there are often muscular concretions or spinal distortions, whose form and extent indicate future fears.

In addition the three main sections of the vertebral column reflect our *ego*, with its different

planes, just as man consists of body, soul and spirit: the lumbar region symbolises the earthly existence, matter, daily experience, our base. These vertebrae are big and strong and contain a lot of matter. According to Dr. Guido Schuhmacher, the five lumbar vertebrae signify: will, wisdom, gravity, patience and love. Problems with the lumbar spine are often rooted in the material realm, for example material fears produce blocks in the lumbar spinal column.

The thoracic spinal column symbolises the psyche, the mental realm, the emotions. With its many more delicate vertebrae, it corresponds to the twelve basic emotions: kindness, mercy, patience, gentleness, humility, peace, joy, freedom, purity, truth, knowledge and devotion. Mental, emotional problems produce blocks in the thoracic spinal column.

The cervical spinal column symbolises the spiritual realm, the forces of order, our spiritual-conceptual equipment. These very fine vertebrae correspond to the seven forces of order: order, willpower, wisdom, gravity, patience, love and compassion. Problems in the spiritual realm, including things carried over from our previous life, produce blocks here. According to Schuhmacher, the fourth vertebra is the „missionary vertebra“.

Supply areas allocated to the individual vertebra

Cervical spinal column



1st Cervical vertebra (Atlas): blood supply from head, skull, facial bones, inner ear, brain, pituitary gland, sympathetic nervous system, 7th Chakra

2nd Cervical vertebra (Axis): eyes, optic and auditory nerves, tongue, forehead, facial cavities, 6th Chakra

3rd Cervical vertebra: teeth, n. facialis, auricle, cheeks, ears

4th Cervical vertebra: mouth, lips, nose, eustachian tubes

5th Cervical vertebra: vocal cords, throat, neck glands

6th Cervical vertebra: neck muscles, tonsils, shoulders

7th Cervical vertebra: synovial bursae of shoulders, elbows, thyroid gland, 5th Chakra

Thoracic spinal column:

1st thoracic vertebra: forearm, hand, trachea

2nd thoracic vertebra: heart valves, coronary arteries, 4th Chakra

3rd thoracic vertebra: chest cavity, lungs, bronchi, breasts

4th thoracic vertebra: gall bladder and biliferous ducts

5th thoracic vertebra: liver, blood, solar plexus, 3rd Chakra

6th thoracic vertebra: stomach

7th thoracic vertebra: duodenum, pancreas

8th thoracic vertebra: spleen, diaphragm

9th thoracic vertebra: adrenals

10th thoracic vertebra: kidneys

11th thoracic vertebra: urethra, ureter, kidneys

12th thoracic vertebra: small intestine, lymph system, fallopian tubes, 2nd Chakra

Lumbar spinal column:

1st lumbar vertebra: large intestine

2nd lumbar vertebra: abdomen, appendix, thigh

3rd lumbar vertebra: gonads, bladder, knee

4th lumbar vertebra: sciatic nerve, prostate, lower back muscles

5th lumbar vertebra: lower leg, malleoli, feet

Sacrum: hip bones, pelvis

Coccyx: rectum, anus, 1st Chakra

Spinal displacements

Displacements of the spine and discs irritate the nerves which terminate there and may disrupt the functioning of the relevant organs.

a) Types of spinal displacement:

- shearing movement a displacement of the vertebrae along their longitudinal axis
- sliding vertebra a displacement inward or outward from the longitudinal axis
- vertebrae may also *tilt*.

In extreme cases we find all three processes simultaneously.

If several successive vertebrae are displaced, we say that there is a displacement of the spine in that area:

- to one side: scoliosis
- outward: kyphosis (hunchback)
- inward: lordosis (hollow or 'saddle' back)

b) Causes of spinal displacements:

- poor posture: injury to limbs. If one re-aligns the limbs and rests them, the correct spinal posture is usually re-established too.

- crooked pelvis: the pelvis is our foundation or seat. A pregnancy or fundamental life crisis may destabilise it for example.

A difference in the length of the legs is often diagnosed and this usually derives from a malposition of the pelvic girdle. If in such a case a shoe insert is prescribed, this is a professional error!

- hyperacidity and other metabolic disorders
- long-lasting, deep-seated problems.

Treatment measures

a) With medicine and equipment

Since malpositioning of the limbs (shoulders, hips, knees, talocalcaneal joint) is often the cause of spinal problems, one first has to make a diagnosis with that in mind. A subsequent precise examination of the spine will reveal, among other things, areas of distortion. By stroking gently to the left and right along the spinal processes for example, displacements can be felt. At these points I first inject a mixture of NOTAKEHL 5X, QUENTAKEHL, Traumeel, Neuralgo Rheum, Discus (Heel) or Disci cum Stanno (Wala) left and right of the vertebrae, as wealing, and where there is nervous irritation, I also use VITAMIN B COMPLEX SANUM in the affected area. I



then relax the whole spine with a suction massage using the Pneumatron.

Depending on the psychomental constellation (see spinal column and classification thereof), the patient is given a single homeopathic agent at high potency. If there is also inflammation in the area of the vertebrae – the surrounding tissue may be hot, swollen and raw – I prescribe Intradermi fluid N, to be added to a daily, hot bath, together with NOTAKEHL and QUENTAKEHL drops and Traumeel ointment to be rubbed in daily. If on the other hand the tissue is clogged up and taut, I recommend hot baths with sea salt and hot sea salt packs on the affected areas, and NOTAKEHL and QUENTAKEHL drops and Traumeel ointment rubbed in. As an additional measure, magnetic field treatment with six to eight Hertz on the south pole often proves beneficial and may also speed up the healing process.

At the next consultation, the spinal column is prepared with a Breuss massage and then corrected by the DORN method. If pains persist, wealing using the aforementioned agents is applied, plus a Pneumatron massage and magnetic field therapy. The patient should continue with the prescribed baths and packs in the post-treatment phase as far as possible. If it is feasible, he should also have his back

rubbed in daily with hypericum oil. This oil should be massaged gently into the intervertebral foramina. If the inflammatory states have receded in the spinal area, the patient receives a combined injection of NIGERSAN 6X, MUCOKEHL 7X, SANUVIS, Discus (Heel) and Traumeel for stabilisation, prior to the manual treatment, every three to four weeks. The manual treatment is always followed by a Pneumatron massage and magnetic field treatment.

b) Accompanying measures

During the massage treatment there is a good opportunity for a therapeutic dialogue between the treating specialist and the patient. If an insoluble conflict emerges from this, I offer my patients further, more in-depth therapy in the form of curative hypnosis, catathymic image experience or psychokinesiology. It is very important to investigate the psychomental aspect of the problem, in order to achieve as long-term a relief from symptoms as possible. If one treats the spinal column at the physical level only, in my opinion the old problems often very quickly return.

c) Therapy for ischialgia

In the context of spinal therapy, ischialgia requires particular care. The patient complains of burning pains in the whole of the lower part of the body, from the hips down to the toes. He or she also suffers from

considerable limitations on movement when stretching and bending the limbs and experiences difficulties in lying down, above all on the affected side and on the stomach.

First of all it is important to calm the irritated nerve. This is done using an intracutaneous injection at vertebrae L 3, L 4, L 5 and S 1, with the following agents: QUENTAKEHL, NOTAKEHL 5X, Traumeel and VITAMIN B KOMPLEX SANUM (N.B. very painful – warn the patient beforehand!). For additional therapeutic effect with the intracutaneous injection, I use the line of the bladder meridian right and left of the spinal column, which is always involved in tensions of all kinds. Then I massage along the painful line of the ischiadic nerve and stroke it with a gentle pressure, just below the patient's threshold of pain tolerance, lengthways and crossways. Then the patient rests on the magnetic field mat with the south pole at six to eight Hertz in the area of the lumbar vertebrae for a further 20 to 30 minutes. Usually the pain is already noticeably lessened after the first treatment. For treatment at home, in parallel or subsequently, I prescribe NOTAKEHL and QUENTAKEHL drops, to be rubbed in along the painful nerve and hypericum oil and Traumeel ointment to be applied in the lumbar area. If heat is tolerated, I also recommend here salt baths and baths with Intradermi Fluid N added. Cold applications are less suitable, since the adjacent



renal area can be cooled down too much.

If the inflammation is still severe at the second treatment, something which can clearly be palpated in the temperature differential in the lumbar area and in considerable pressure pain, I repeat the first treatment sequence. Only then do I correct the spine using the DORN method, following this up with a Pneumatron massage and a manual massage of the ischiadic nerve as described above. This is followed by a rest on the magnetic field mat. These measures are repeated at two to three day intervals until the patient is completely free from pain.

With ischialgia it is important to check the whole spine always, and where necessary to correct it, since here too the originating point may be somewhere else (the ischium too is a part of the *whole* person). A psychogenic appraisal of the patient is particularly important with this type of nervous disease. It often conceals

a problem in the patient's interpersonal relations. I offer therapeutic consultations, the aforementioned psychokinesiology or other psychotherapeutic methods as support.

For some time now I have had excellent results with additional medication in the form of shark cartilage and glucosamine sulphate from Nahani. An inflammation recedes pretty quickly and damaged connective tissue regenerates well. The patients soon feel they are on the road to recovery. This medication seems equally successful with other spinal and articular diseases. As with every new therapy however, it is also important with orthopaedic problems not to act solely as „bonesetters“ but to work as holistic therapists here too.

Translator's note: in German 'Kreuz' means 'cross' but also 'the lower back', so there is a play on words here which cannot be reproduced in English; also some

of the words and phrases at the end of the first paragraph work better in German than in English.

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