

## Four T.T.A.P.S. Seminars:

**Parts 1-3 correct many neurological conditions.**

**Nerves control secretory, excretory and other body chemistry events in the body according to *Guyton's Physiology*.**

**Therefore Parts 1-3 reduces or eliminates necessity for nutritional intervention in those cases where the neurological insults are the sole or partial cause of the nutritional issues regarding those secretory, excretory and other body chemistry events in the body.**

1. **Reflexes** [minimal scar tissue causing nervous system withdrawal abnormalities].

**USE OF REFLEXES TO RESOLVE PAIN AND BIOMECHANICS OF CHRONIC NEURO-MUSCULAR-SKELETAL CONDITIONS**

**PATIENT TREATMENT BY USE OF MYOTATIC, WITHDRAWAL, CROSSED EXTENSOR REFLEXES, REFLEXES OF POSTURE AND LOCOMOTION, RECIPROCAL INHIBITION**

**T.T.A.P.S.<sup>TM</sup> PART 1 [parts 2-4 complement this one]**

**TRIPLE YOUR MONEY BACK GUARANTEE**

**If I, and you, can't perform substantially as claimed in this flyer, at the seminar-  
- AND KEEP THE HOURS!                      This Seminar is Based on Results!**

Whenever an insult is put into the nervous system, the reaction is to *withdraw* from the insult that caused the major or minor injury or injuries. The wound heals. So why is there still a problem?

The *memory* of the injury, called *facilitation*, is still in the brain, so the brain still acts like it's a relatively fresh injury and stays in the withdrawal position, including **loss of ranges of motion of joints, fibromyalgia, regional pain syndrome, pain, numbness, tingling [paresthesias and neuropathies]**, abnormally **weak or tense muscles [sapping energy and ability to sleep normally]** or other symptoms with the particular withdrawal reflex syndrome of that incident. Several approaches to normalize the reflexes are shown.

In *most* cases, quickly and *significantly* reduces or eliminates the following symptoms, usually on the same visit:\*

- **Fibromyalgia pain**
- **Sciatica (Laseque's)**
- **Necessity of using a Cane or walker to walk (from leg weakness)**
- **Herniated or Bulging Disc (Milgram's)**
- **Unoperated Rotator Cuff and Frozen Shoulder Syndrome**
- **Regional Pain Syndrome [RSD]**
- **Cranial Nerve symptoms (Nystagmus, Strabismus, Weber's)**
- **Hearing Loss of Differing Frequencies and Tinnitus**
- **Foot Drop**
- **Carpal Tunnel or Thoracic Outlet Syndrome (Phalen's, Reverse Phalen's, Tinel's, Adson's)**
- **Cold or Burning Hands or Feet**
- **Raynaud's Syndrome**
- **Burning Tongue Syndrome**
- **Burning Pain in Lower Extremities or Genitals**
- **Female Cyclical Menstrual pain**
- **Vaginal prolapse**
- **Numb Hands and Feet**
- **Loss of Vibration Sense in Feet/Toes**
- **Dizziness and Vertigo**
- **Positive pinwheel test**
- **Bladder leakage**
- **Dropped Transverse and Cuboid Arches**
- **Polyhydrosis and Hyperhydrosis**
- **MS and Parkinson's symptoms**
- **ALS and Guillain-Barre symptoms**
- **Cogwheel rigidity [stroke]**
- **Seizures**
- **And MUCH, MUCH MORE...**

**\*Fulfills the ACA: "Evidence Based Medicine and Best Practices"**

<https://www.acatoday.org/Practice-Resources/Position-Statements/Evidence-Based-Research>

**Techniques are:**

- **Not Reflexology, KOREN, AK, CRT, PNT, TBM, Transverse Friction Massage, Spinal Reflex Therapy, Contact Reflex Analysis ***or anything else you've ever seen or heard of*****
- Based on known tenets of acupuncture, trigger point therapy, reflexes and Neurology
- Found in laws and tenets in Dorland's Illustrated Medical Dictionary, Chusid's Neurophysiology and Guyton's Textbook of Medical Physiology, and others, as taught in all CCE-accredited Chiropractic Colleges
- **Verifiable by Standard Orthopedic and Neurologic examination**
- Published in JMPT on techniques being taught

**See descriptions of several patients and doctors reaping results from this approach.**