

AVS

Summer '01

Vol. 1, #4

Auditory / Visual Stimulation

Includes:

An Interview with Tom Budzynski, Ph.D.

AVS Buyer's Guide: Part 1

The Shakti Helmet

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AVS Journal Vol. 1, #4 / Summer '01

Welcome to our fourth installment of the AVS Journal. To all of our subscribers, contributors and advertisers - thank you! Your support enables this magazine to remain a reality. And to you first-timers - we hope you find our journal to be useful and informative.

Anyone involved in the retail end of AVS certainly knows the need for a "current" light and sound instrument buyer's guide. In our first article, Jeff Labno presents the first of his three part series on purchasing light and sound instruments that will prove invaluable to anyone, beginner or advanced, seeking AVS equipment. Jeff utilizes his 23 years of AVS experience to describe to you exactly what you need to know, and what to ask, before purchasing your personal light and sound unit.

In the next article, Ruth Olmstead presents a case study utilizing AVS in the treatment of chronic Vocal Tic Disorder. This is another excellent study contributed by Ruth, and is a perfect example of how AVS can benefit those seeking non-drug alternatives. Incidentally, Ruth has a brand new AVS unit called the Synaptic Stimulus Trainer. Ruth has spent a great deal of time researching the effectiveness of the fourteen sessions she created for her "SST", and we believe her system is one of the most powerful for positive behavioral change.

Several years back, when I became a light and sound dealer for InnerQuest, Inc., there wasn't a whole lot of information or research available on light and sound. And of the information that was out there, the actual research that gave this technology credence, all seemed to come from not much more than a handful of professionals. Dr. Tom Budzynski is definitely one of those individuals, and the AVS Journal is honored to have Dr. Budzynski as our e-interview guest. Here is your chance to learn a little bit about the man who helped create this industry, and to hear his opinion concerning the state of AVS.

Everyone associated with the Mind-I list knows the wit and knowledge of Scott Miller. We are fortunate to present an article by Scott introducing us to a unique and very interesting device: the Shakti Helmet. Through Scott's talent of transforming thoughts to words, you will learn what the Shakti Helmet is and the potential it holds for those who possess these ingenious helmets. We bet you find them as intriguing as we have, and invite you to contact Scott for additional Shakti information.

Are you involved in education? Are you interested in creating an AVS program at your school? Be sure to read Dr. L. Jerry Cunningham's NFB / AVS in the Caldwell School District article. The information Dr. Cunningham shares will definitely prepare you for all the little things students can do to create havoc with such a program, and what Jerry and his staff did to overcome those constant manipulations. This is a must read for anyone remotely thinking of beginning a program with young students!

Of course no AVS Journal would be complete without a contribution from

Michael Stevens. This time Michael introduces us to Peripheral Trance. It is a fascinating little tool anyone can employ, and we are positive that you will find it beneficial and effective. And don't pass up our New Products section. We have several new items featured in this issue, many a "must have" for those who enjoy AVS technology.

We hope all of you find this issue to be enjoyable and informative. And again, we thank you for supporting our magazine. Before closing, I would like to mention one more item. Our next issue, the Fall '01 edition, will be our one year anniversary. We believe you will be quite surprised at who will be contributing! It'll be available in November.

- Michael Landgraf
Editor

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AVS Buyer's Guide: Part 1

by Jeff Labno

Introduction

The very first AVS Buyer's Guide was written by Michael Hutchison and was published in one of his Megabrain Reports in 1990. This was a time when AVS became an international media darling. This publicity triggered a "gold rush" of new companies making new AVS devices.

Problems, however, quickly emerged with Michael's guide, even before he finished writing it. Manufacturers were continually changing features, trying to make their machines better than their competitors. Then, there were companies who suddenly went under, while new ones appeared out of nowhere. Michael never did figure out how to accommodate these dynamics of sudden change in his writings.

The next buyer's guide to come along was called the Mind Machine Buyer's Guide, published in 1993. It provided in depth and comprehensive coverage of the most popular machines available. It is interesting to note that the publisher is still selling this publication via ads in journals, yet, it has not been updated since 1993.

Good manufacturers make ongoing changes in their product(s) because they listen and respond to their customer's needs. If you wanted to contrast and compare all the features of the different machines, you would need to revise your list every six months.

Comparing all the different features is actually not very useful anyway in helping the public decide which machine to buy. Comparing features confuses most people. This guide focuses rather on the issues which are important to the consuming public.

AVS Buyer's Guide

AVS machines first appeared in 1958 in the research community and were used to induce hypnotic, or suggestible states of mind. They were called brainwave synchronizers. Commercial units began to appear in 1984, and the competitive industrial spirit emerged around 1987.

More than 100 different models have been manufactured since that time in the United States, Canada, Europe, Japan and Taiwan. With so many models to choose from, how can one decide for themselves which machine is best to buy? You probably can not. Each manufacturer bills their machine as the best. Each one sounds better than the next, at least on paper. We hope that this guide will make selecting a machine easy and simple for you.

Buying a machine

All machines come equipped with everything you will need to get started. Listed below are the main points people consider when purchasing a machine. Included with these main points are valuable guidelines to assist you in buying the best machine for your needs.

Your best source to guide you in buying the correct machine is an AVS dealer who represents several different manufacturers. They generally know how to contrast and compare the many features you will read about in the literature.

Manufacturers often change the capability of their products frequently. Additionally, machines come and go. A reputable dealer who knows the different manufacturers can be your best guide to advise you on what is current, and the best machine for you to buy.

Machines come with programs designed to help you with sleep, visualizing, memory, focus, meditation, dreams, peak performance and energizing. The type of program people most frequently mention as the most enjoyable is one that uses the Schumann Resonance (7.83 Hertz) for healing.

Machines contain anywhere from about twenty internal programs to over one hundred. Manufacturers ascribe a name to each program to best describe their results. At the same time, sleep programs are sleep programs. They all take you into the delta brainwave zone despite their name. Do not decide on which machine to buy because of the names of programs described in their literature. All machines have programs for all four brainwave zones. These four brainwave zones encompass all the states of mind which accomplish anyone's needs.

Most people only use about eight or so programs that are available. This means that you can use any machine for basic needs. When buying a machine, lots of programs (+30) is better only if you like lots of variety, or love fiddling with technology.

Many machines offer a computer link so that you can create your own programs, or download additional programs from the manufacturer's web site. Less than 5% of purchasers ever create their own programs. This means that you will probably only utilize this function if you are a great aficionado of this technology. The biggest need for doing your own programs used to be to change the length of time of a program to shorter or longer. Today's machines have enough different length programs in the same category, or you can expand or shrink the time setting.

Light glasses come with all machines. Much too frequently light glasses which accompany a machine are made using inexpensive lights. The result is when you use these glasses, you see a "flickering effect". Quality glasses using ultra bright lights produce rich and beautiful colors and patterns. You can always upgrade your light glasses, and now a wide variety of colors are also available in ultra bright.

You may be light sensitive and therefore the light intensity is not an issue. All machines however have a light intensity control so that you can

turn down or increase the light intensity. Most people prefer ultra bright light. Over 85% of customers purchase ultra bright when given a choice.

All machines come with stereo headphones. The headphones you get are just average. If you want quality headphones, you will have to purchase them separately. One good feature to look for in good headphones is: they cover the ear so that they block out exterior sounds. The next important feature of quality headphones is that they extend the frequency range of what is possible to hear into lower ranges and higher ranges both. A good frequency range to look for is 16 to 22,000 Hertz.

Using quality headphones means that you will enjoy the external music you introduce into your experience to a much higher degree. Quality headphones bring greater richness of sound which generates a greater passion of experience into every session. Quality headphones start from about \$150 to well over \$10,000. Sennheiser is a great choice due to comfort and overall cost.

The sounds which accompany the internal programs are generally not very interesting. These sounds are strobe pitches, chords, pink sound, binaural beats and dual binaural beats. Most people prefer to introduce their own favorite sounds using a cassette or CD player and mixing the sounds from the preset programs such that they are in the background. You can plug all machines into your CD or cassette player using the stereo patch cord which comes with your machine.

Using the CDs or cassettes you already know you like and enjoy is the place to start. You can easily introduce your favorite music for energy, escape or meditation. Try using language tapes for learning. Behavioral modification tapes are also great. As long as you like the content of any CD or tape, your session will be a winner.

The most talked about and utilized sounds are binaural and dual binaural beats. Beat frequencies are great because you can use your machine as a beat frequency generator. This capability means that you can use your machine for "sound therapy". In the past, binaural beat generators cost about \$500 which exclusively generated binaural beats and dual binaural beats. Buying a machine with this feature means that now you are getting two machines in one.

The best way to create your own personal programs is to plug your machine into an external CD or cassette player and mix your AVS sessions with your favorite CDs and audio cassettes.

Some machines offer two-user capability. This is a great feature because it is nice to share the experience with family, friends and others. When they offer two-user capability in that there are two plugs for light glasses and two plugs for headphones, you are guaranteed the best experience. This means that there is no power degradation by plugging in two users.

You can use splitter or "Y" cords in some machines which have just one plug for light glasses and headphones. You will need two splitter cords: one for light glasses, the other for headphones. There is a degradation of power when this happens such that the light glasses do not illuminate as brightly

as possible (about 85%). Some machines (under 4.5 volts) do not carry enough power to illuminate two light glasses at the same time. Ask your dealer for details. Some may not know, so shop around.

The user's manual for your machine is probably not enough for you to get the most out of using it. There are two publications which are excellent to help beginners understand and utilize your machine. "Mind States / An Introduction to Light & Sound Technology" (ISBN# 0-9662596-0-2) by Michael Landgraf helps you to get started in using your machine, suggesting how to use the different brainwave states to achieve what you want. Michael also explains how professionals are using this technology, and he also directs you to write a diary of your experiences. "An Insider's Guide to Light & Sound" by Jeff Labno is a succinct summary of using your machine in the best possible way. Jeff explains how to maximize your experiences, based on his 23 years in this industry.

This concludes Part 1 of the AVS Journal Buyer's Guide. Any input you offer us on how to improve this guide is definitely appreciated. We will follow up on your input in the upcoming issues. Two additional parts of the Buyer's Guide shall appear in the next two issues of the AVS Journal.

Part 2 shall cover advanced features of AVS machines. Some of the topics shall be a comparison chart of different machine features, Audiostrobe, dual monaural beats, sparkle feature, bi-color glasses, different colored light glasses, cranial electro stimulation, biofeedback, vibro-tactile environments, Neurophone applications, complex motion systems and advanced programming.

Part 3 shall cover medical use, medical research abstracts, behavioral arts use, behavioral arts abstracts, implementation in commercial environments, discussion of professional publications, and a list of places to experience AVS technology.

Please let us know of any topics you would like us to include in our upcoming issues. We are also working on a list of places to refer people to use AVS machines. If you own a mind spa or have an office where people can go to experience an AVS session, please let us know and we will add you to the list.

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Treatment of Chronic Vocal Tic Disorder: A Case Study Using Auditory and Visual Stimulation

**by Ruth Olmstead, M.A., Psychological Resident
Dr. Mitch Spero, Supervisor
Licensed Psychologist / FL #PY0004098**

This case study examined the effects of auditory and visual stimulation (AVS) treatment intervention for Chronic Vocal Disorder, as measured by Parent Reports. The patient was a 9-year-old boy who was diagnosed with 307.22 Chronic Vocal Tic Disorder. According to the Diagnostic and Statistical Manual of Mental Disorders Fourth Edition (DSM-IV) characteristics of Chronic Vocal Tic Disorder include:

- * Single or multiple vocal tics (i.e., sudden, rapid, recurrent, nonrhythmic, stereotyped vocalizations), which have been present at some time during the illness.
- * The tics which occur many times during the day nearly every day or intermittently throughout a period of more than one year, and during this time there was never a tic-free period of more than three consecutive months.
- * The disturbance causes marked distress or significant impairment in social, occupational or other important areas of functioning.
- * Onset is prior to age eight.
- * The disorder is not due to direct physiological effects of a substance or general medical condition.
- * Criteria is not met for Tourette's Disorder. The patient was referred by his parents, a physician and homemaker, for his uncontrolled "vocalizations."

His vocal tics consisted of sounds such as clicks, grunts, yelps, snorts, and coughs. His parents reported that since their son was about four years of age he has made unusual sounds, but that during the past few years his teachers have been commenting that he makes "disturbing" sounds approximately three or four times a day in class.

The patient reports that most of his vocalizations typically occur after he completes his homework (when he believes "he is bored") and just prior to falling asleep. Both parents also noted that their son made the most prolific vocalizations at night when he was preparing for bed, which would last for approximately 20 minutes before falling asleep. AVS was used at 13 Hz for a duration of 20 minutes for five sessions. Sessions took place weekly for the first three sessions. After a three-week break, an additional session was administered. Results were measured by weekly Parent Reports, a survey consisting of 20 questions regarding change in a number of areas such as behavior, sleep patterns, affect, and vocalizations. After the initial session the patient's father reported that he heard no vocalizations that evening, though he did report hearing vocalizations several days later in the week prior to his son's bedtime.

The Parent Report after the second session indicated a significant decrease in the patient's vocalizations. The Report after the third session demonstrated the most significant change, with only one or two reported vocalizations occurring in a three-week period. No vocalizations were reported at home by either parent or the child after the fourth session, however, the patient's teacher did report some infrequent vocalizations approximately three times a week, though very short in duration.

To date, a significant reduction in vocalizations has been sustained

for approximately six months, though it is not yet known if future stressors may induce an increase or recurrence of symptoms.

According to the Child/Adolescent Intake Form and Clinical Interview with the patient's mother, the patient was born prematurely at 34 weeks, and the Pre-Labor use of the drug Albuterol was reported. All developmental milestones were reportedly met within normal range. Medical history is otherwise unremarkable. The patient is reported to be an outstanding student, and exhibits no cognitive, behavioral, or learning difficulties, and is not taking any medications.

It should be considered that this was an informal experimental trial of a non-drug treatment intervention for Vocal Tic Disorder and no quantitative measures were taken with the exception of Parent Reports and Teacher Reports. This case study, though valid only qualitatively, may lend efficacy to utilizing AVS as a possible intervention for this type of disorder, and replication of the present study with larger number of such patients is necessary before advancing such studies.

Reference American Psychological Association (1994). Diagnostic and Statistical Manual of Mental Disorders, 4th Edition. Washington, DC: Copyright Ruth Olmstead, Ft. Lauderdale, FL 2001

An "E-Interview" with Tom Budzynski, Ph.D.

Q: Please begin by sharing with our readers a little bit about yourself...

A: "I graduated from the University of Detroit with an EE degree and spent 7 years as an aerospace engineer. The most intriguing project was as field support supervisor of the inertial navigation system on the SR71 Blackbird at Area 51, otherwise known as Groom Lake, Nevada. Testing went on around the clock for 3 shifts but supervisors could be called out of bed if problems arose - and they sure did. After 4 years of this I got out of engineering in 1964 and began to catch up on psychology courses at UCLA. I eventually got a master's and doctorate in psychology at the University of Colorado. While there I learned of the beginning work of Joe Kamiya with alpha EEG feedback. I, with the help from my buddy John Picchiottino (we had met at Hughes Aircraft in California several years before) I built a Kamiya-like unit which fed-back a 400Hz tone whenever alpha bursts occurred. I then used it to desensitize a friend with a severe thanatophobia (fear of death and death related stimuli). I guess it was the first incident of a clinical application of what later would be called neurotherapy.

Together John and I developed the first surface EMG (muscle tension) biofeedback systems. They featured digital quantification and may have been the first such instruments for muscle EMG and later EEG. The late '60's and '70's were magical years for biofeedback of all kinds. We were invited all over the world to present workshops, lectures and papers. In those years John and I started a small company, Bio-Feedback Systems, Inc., the first biofeedback company. I also started the first commercial biofeedback clinic

called the Applied Biofeedback Institute. With Johann Stoyva, Kirk Pepper, Charles Adler, and, of course, John Picchiottino, we gave the first workshops in biofeedback at Snowmass at Aspen. The '90's showed a resurgence of interest in EEG feedback with the advent of computerized systems called QEEG (quantified EEG systems). I now teach workshops in neurotherapy and the excitement in this area is almost the pitch of that in the early '70's in biofeedback. With my wife Helen, a Professor Emeritus at the University of Washington, I have been conducting research in applications of AVS to school performance and cognitive improvement in the elderly. I also have a small private practice of neurotherapy. I can be reached at: tbudzyn@cs.com."

Q: How did you initially get involved with this technology? What equipment did you first use? When was that?

A: "About the mid-70's we used the Whole Brainwave Synchroenergizer with some of the clients seen in my Denver clinic. Denis Gorges, the inventor, had done a 3 day workshop at our place and generated a lot of interest. We found that this powerful device helped some clients off prescription tranquilizers. A group of 6 psychic healers who tried it claimed (independently) that it opened all the Chakras at 6 Hz and only the ones from the chest up at 10 Hz. Each of the healers reported very creative visual imagery, e.g., strange faces, people, vistas, etc. A bit later our clinic was visited by 20 managers of a large supermarket chain. Nineteen of them simply reported the retinal effects. One, a women, re-experienced a traumatic surgery from 2 years before. With the advent of modern AVS devices we began to integrate their usage into our neurotherapy practice. In the last 2 years we have engaged in some serious research with AVS."

Q: How often do you personally experience a light / sound session? Any favorite? Do you simultaneously utilize other modalities such as biofeedback or tactile stimulation and motion during sessions?

A: "I use the AVS units in bursts when I seem to need it. Then I may use it twice a day. I'll usually try a new unit when it comes my way. I am most experienced with Robert Austin's Synetic's gear because I did work as a research director for Synetics at one point. I also like David Siever's units and we have used both Synetic System's and Siever's units in our research. I'll often use my own self-help CDs or audio cassettes along with the visual part of the AVS program. I do use the AVS during certain neurotherapy sessions, e.g., boosting 14 Hz with AVS when doing an ADD protocol."

Q: What's your definition of the perfect light / sound instrument? What would the light glasses be like?

A: "The question of what would be the perfect AVS is difficult. I guess I

would like one that is computer programmable as some now are. It would be nice if some of the LEDs would be at the very corner of each eyefield so that a single hemisphere could be stimulated by each. I would like more binaural tone capability such that multiple frequencies could be computer selected. I personally like the new deep blue LEDs, and units that can blend combinations of primary color LEDs so as to make any color are fascinating. Of course, a more expensive unit might be driven by the dominant EEG, i.e., the frequency of the AVS would be linked to this EEG frequency. Such units have already been developed by a number of individuals and I consider these extremely powerful devices for brain change.

In 1990 I had Todd Stone, now a technician for Synetics, build me a device that I called the "Hemifield," because it contained an eyeframe with red LEDs in the very corners of the left and right visual fields. They could be individually controlled in frequency and intensity. I did some research that proved one could independently effect contralateral frequency-following EEG responses with the device. I reported on some later research with the Hemifield about 1991 at the Futurehealth Brain Research Conference in Key West, Florida. Eyeframes that claim to selectively influence one or the other hemifield can be checked out if you have EEG printout capability. Remember, the LEDs must be placed such that they only stimulate the outer corners of each eye."

Q: What considerations should someone new to AVS take into account when purchasing their first instrument?

A: "Advice to someone new to the AVS area should take into account how experienced they are with computers. Real "techie," computer programmers, and engineering types would enjoy the computer-programmable units. Many of my private neurotherapy clients however, want easy-to-use units with no complicated instruction requirements."

Q: You have participated in many research studies utilizing light / sound. Is there one study in particular that left an indelible impression on you?

A: "Along with George Rozelle I carried out a single case study with a stroke client who was written off by the medical establishment. We used the EEG-driven AVS designed by Len Ochs, Harold Russell and Bob Austin's group. The client made an amazing recovery and we sent him back to some of his original MDs and therapists for more testing. Needless to say they were quite surprised. We got that published in the 1995 Biofeedback & Self-Regulation journal. However, the most satisfying AVS research study was the one in which we improved school performance at Western Washington University and which was published in the 1999 Journal of Neurotherapy. We had heard about the large numbers of Korean students using AVS units and decided to do a careful study to see if the claims were true. We got our subjects from the Counseling Center where they had sought help because they were having academic problems. There were 2 groups, one that got the AVS training of 30 sessions of 14 and 22 Hz alternating and the other was a waiting control that would get the training after the pre-post testing if they desired. We used Synthetic Systems units and expected some change in the EEG but we also got statistically significant changes between the groups in

GPA when this was compared in the quarter before training with the quarter after training. At present we are engaged in a study with elderly individuals and we are using pre-post Microcogs (computer scored cognitive tests) with David Siever units. Preliminary findings look good so far."

Q: What do you believe are the most important issues facing the light / sound industry today?

A: "Important issues facing the AVS industry are the question of whether AVS can be made to selectively stimulate certain areas of the brain and my own personal quest - can AVS produce a "one-with-the-spirit" state, i.e., an unforgettable, ineffable, wonderfully fulfilling experience. We have some pilot work that looks promising."

The Shakti Helmet

by Scott Miller

As I prepare to write this, I set the portable CD player at my feet, insert the specially created CD, and unwind the six feet of wire, one end of which gets plugged in to the headphone jack of the player. The other end I connect to an odd looking, duct tape covered bicycle helmet. Concealed beneath the silvery fabric are several symmetrically arranged electromagnetic solenoids whose locations align more or less with brain structures which hold the distinction of being voted (or at least nominated for) "most likely to produce a somewhat predictably altered state of consciousness".

The CD contains six ten minute tracts of sound pulses whose amplitude, wave form, and duration have been (hopefully) carefully designed to affect the targeted areas - the amygdala and the hippocampus -when said pulses are fed into the helmet which translates them into electromagnetic pulses. In the university lab - a larger, well funded lab, unlike my own single room which serves as design studio, mind/brain lab, and library - a device called a Digital to Analog Converter is used to store and reproduce these pulses.

Final step before donning the helmet is to use a gauss meter to adjust the solenoid output to the optimum setting of 10 milligauss. Actually, because this is the final session of my second six session series, I decide to adjust the output up just a bit. The suggested protocol is to allow a three week break between each series, so should anything undesirable occur, I'll have a sufficient period for my neurological patterns to readjust themselves (they will readjust themselves won't they?). Forward the CD to tract 4 (so the three ten minute tracts 4, 5, and 6 play for a total session time of 30 minutes) and push play.

Normally, I would settle back and just wait, but I thought it might be appropriate to compose this while my brain is undergoing the electromagnetic bombardment - especially since this second series was designed to restore some of the mental functions occluded by the first series of sessions...

Having been interested in the intentional manipulation of consciousness for many years I was intrigued by research at Laurentian University (Sudbury, Ontario) by expatriate Michael Persinger, a neuroscientist who migrated to Canada during the Vietnam war era for what I assume to be conscientious reasons - then again, perhaps he just loves damn cold weather. Anyway, at his university lab, Dr. Persinger was experimenting with electromagnetic pulses applied to the brain. There were rumors of his involvement with the military intelligence community in various mind control experiments but I have never found any evidence to that effect. (And since his lab only recently obtained Pentium computers, I doubt that he was the recipient of any black-ops funding. On the other hand, there were published articles -many by Persinger himself - about simulated UFO abduction experiences produced by application of these secret wave forms, and even stories about mystical visions and full blown religious experiences.

What I never could find, either in the articles or from searching his patents, were the specifics needed to reproduce these events. The apparatus, the field strengths, and specifically, the wave forms used by Dr. Persinger were alluded to, but never specifically listed. So when a mention was made of a Todd Murphy, who had connections to Persinger, offering a homemade magnetic stimulation helmet complete with a way of producing the proper pulses and wave forms to those willing to participate in an experiment (and pay their own way), well, I couldn't fill out the pre- screening application fast enough.

Todd Murphy calls his version of Persinger's helmet Shakti (according to a 1929 account by Dr. Hans Koester, in the Journal of the Siam society: The Goddess Shakti is the "power" which pervades the whole of the universe, and from which the Universe has emanated. There is nothing within the manifest world which is not Shakti in its essence.) Well, this must be quite a helmet, and although there are myriad definitions of Shakti, this one sums it up quite nicely.

I've done what I call the software / metaprogramming route - intensively with Silva Mind Control, various forms of trance work, Scientology, Neuro-Linguistic Programming, Psychotherapy, Zen, Avatar, and dabbled in the Fourth Way, Monroe's Hemi-Sync, Center Pointe's Level 4, Crowley's Magick, and so many others. All these offer ways to manipulate consciousness by altering the intellectual processes in how we interpret that which confronts us both externally and internally.

I've also spent much time working the hardware route with EEG and GSR biofeedback, Light and Sound technology where flashing lights specific sound frequencies or pulses attempt to alter the brainwaves via the visual cortex or auditory pathways respectively. CES with it's whole head approach to inducing biochemical or mechanical changes to the brain. But here is a direct approach to actually changing my wetware. Targeting specific locations of the brain to encourage specific changes in their function. Early on, my goal was as Albert Einstein stated - depending upon who translates it - "To know the mind of G_d.". Well, this seemed a pretty worthwhile goal until one day I realized that if everything was revealed to me and it wasn't up to the level of what I expected, I would be pretty darned disappointed, so I've decided to just let that one be a mystery. I'll be satisfied (for now anyway) with a more expanded viewpoint, some deeper insights, a further integration of my analytical and intuitive faculties, and of course, total dominion over all the creatures of the earth. Shakti

seemed to offer a new route to at least some of these things...

As soon as it arrived, and I began the tedious process of testing my brain—seeing how each side of my brain responded to each magnetic signal. Properly set up, Shakti should produce positive, even pleasurable sensations -improperly set up, it could cause irritation, even depression. There are two hemispheres of the brain, and two signals. Testing involves applying each signal to each side for ten minutes each - four tests in all - and noting the subjective effects. Any uncomfortable feelings, mild panic attacks, waves of fear, or acute awareness of the angel of death standing behind you are interpreted as indications that you are applying the wrong signal to the wrong location. Conversely, pleasant sensations are interpreted as applying the desired wave form to the appropriate area. Theories and in depth explanations of this are available at the Shakti web site. Once the testing is done, and the helmet set up accordingly, the magnetic stimulation sessions begin...

You may contact Scott at: scott@wizardsgate.com
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Neurofeedback and Audio - Visual Stimulation Program in the Caldwell, Idaho School District.

By L. Jerry Cunningham, Ph.D.

The Caldwell School District continued its Neurofeedback and AVS program throughout the academic year of 2000-2001. It became clearly apparent last year that with the department's limited budget for this program and the limited amount of time that could be devoted to neurofeedback, that we needed to find some additional and more cost-effective procedures. We had used AVS in the preceding year and had been pleased with a somewhat positive response to this intervention. Also the Micheletti dissertation had certainly lent some credence to this procedure's possibilities. The interesting possibilities of this modality included the considerably lower equipment expenditure as compared to neurofeedback and also the possibility of conducting simultaneous multiple sessions.

We therefore continued with a conservative utilization of neurofeedback and began exploring the possibility of utilizing AVS in a multi-client format. We began with individual Pro Tutors by Photosonix, and interlinked the light and sound intervention with music. In order to do this we obtained portable cassette recorders, made multiple copies of the music we planned on using and began exploring the possibility of multiple-student sessions. It must be remembered that the designated students were in an elementary setting and the ones referred to this program were the students with the most severe behavioral problems in the school. It became clear immediately

several of the elementary classroom teachers. Several teachers reported that the utilization of the Brain Gym procedures quickly brought quiet and calm to their classrooms. Some of the teachers were literally astonished at the effectiveness and speed of these interventions. Therefore, it was decided to use these as a part of the AVS therapy. Students would be taught the various Brain Gym postures, and we would start the therapy with these postures, and often maintain some of them throughout the entire light-sound session. These interventions certainly helped quiet many of these disruptive children and along with consistent challenging of the manipulations, the sessions eventually began to quiet and become more orderly. It is very clear that in order to utilize the AVS procedures for more than one child at a time that very careful attention must be paid to group size, maintaining very clear order and boundaries and confronting consistently any manipulative tendencies. Also anyone who attempts these procedures in a group context may well find the Brain Gym procedures invaluable.

An aside to the Brain Gym modality and its interface with AVS is the child's inherent love of these positions and postures. It seems that they are very friendly to the disruptive child's nervous system. It was not uncommon as the year progressed to have some of the children come in, sit down, and immediately assume one of the Brain Gym postures. The classroom teachers also reported a similar phenomenon. Often many of the students would come into the classroom and immediately assume one of the postures. It was not uncommon in Lincoln School last year to see children walking down the hallway in the posture we called "Brain Buttons". This posture necessitated the interlocking of the fingers, palms facing each other, and turning them upward in a prayer-like position. This was perhaps the most child-friendly posture that we introduced.

The staff of the Psychology - Special Education division decided to write two small grants to two different agencies in order to purchase multi-user AVS devices. We were given both grants, and subsequently bought four AVS expander units that permit the training of ten children at one time. We also purchased CD players for each expander as well as mixers and microphones. This expander equipment would simplify the equipment assembly needed each day; we would have one sound source and one musical composition for the entire group and we could talk to them through the microphone during the session. This would allow us to give various suggestions, affirmations and also to monitor and address the manipulations. We did not get the entire system operative by the end of the year, but it is believed this will improve and simplify the procedures which we plan to continue during the next academic year.

During the year, I discussed several times with Michael Landgraf the possible advantage of using colored lights rather than the traditional red LEDs. Mr. Landgraf has been immensely helpful throughout our entire program and has not only donated equipment but has been a constant source for information. In any event, we began exploring the use of different colored lights and colored filters. This curiosity was prompted in part by the traditional light therapy procedures that use instruments such as the Lumatron, which vary not only color but frequency. We therefore purchased with the grant money a number of different glasses, and Mr. Landgraf developed an even larger number of colored gel filters to be used over white LED glasses.

It is yet unclear about the clinical utility of the various colors, but certainly there were strong preferences indicated by the children. It was, however, another potential area for manipulation. But once the parameters

that addressing more than one disturbed child at a time significantly complicated the procedure.

There were also many technical difficulties associated with our limited budget and limited space. Our schools are filled beyond capacity and thus the room assigned to us for this procedure was both small and used for other purposes. Therefore it was necessary for us to assemble the various Pro Tutors and cassette recorders each morning and disassemble them each time the room was needed for other purposes. Scheduling difficulties also are a reality in the school since children cannot be taken out of their reading blocks, and they are resentful if they have to miss their recesses or noon hours. But in spite of these limitations we proceeded with the program.

It was impossible to manage more than five of these children at one time. Not just because of the space limitation, but also because of the difficulty in managing their disruptive and manipulative behaviors. It astonished me, a seasoned clinical psychologist, at the tremendous numbers of manipulations these kids could manufacture. These occurred not only at the beginning of each therapy session but also occurred non-stop during the treatment intervention. These included such things as "I have to go to the bathroom really bad and I can't wait", "my nose is running really bad and I have to blow it now", "I have to call my mother, I forgot to tell her something", "I don't want to do this now, can I do it later?", etc. At first I tried to be accommodating and allow some response to their needs, however, they became so disruptive that I had to scale down the number of students in the treatment group at the same time and then make very clear rules about how the session would begin and how the treatment would be conducted. This included such things as go to the bathroom before you come to treatment, blow your nose, realize that we will adjust the light intensity and sound volume at the beginning of the session and the levels will remain there for the 20 or 30 minute session. The constant demand for intensity and volume adjustments was perhaps the most disturbing of all the manipulations. They not only wanted them adjusted many times during the treatment, but they wanted to adjust the levels themselves. Once the onetime adjustment was initiated the manipulations diminished considerably.

Therefore it became very clear that in order to conduct multiple sessions that the number of students needed to start small, and the rules made very clear, and the manipulations challenged consistently. Most of these children have Attention Deficit Hyperactivity Disorder, and their ability to sit still is certainly a challenge for many of them. However, the movement disruptions have many manipulative qualities. It's not that the child could not sit still, but the manipulative payoff was so extensive that the behavior was constant unless again consistently challenged. Once the movement and manipulative elements are challenged and controlled the number of students can be gradually increased. Therefore, with multiple-student sessions, it is my recommendation that the clinician start with two or three students, and once order and routine take effect, then add one student at a time. It will be possible to work up to 5 or 6 students and perhaps more by following these procedures.

In order to intervene in the movement disorder and the various manipulations I began drawing from the Brain Gym procedures. The psychology and special education staff became interested in these interventions at the beginning of this school year and we taught a variety of these procedures to

were set and followed, children would routinely request a particular color at the beginning of the session and remain with that choice throughout. The blue and indigo colors were certainly the most popular among the children. It seemed that the blue color was clearly more relaxing and quieting than the red or white. It was not uncommon with the blue filter for the child to fall asleep, or become very deeply relaxed. However, some children consistently preferred the green filter, others the yellow, etc. I was particularly interested in the old research on the specific calming of the intense pink colors on aggressive and violently prone children and adolescents. Good pink LEDs do not exist at this time, and the mixture of red and white LEDs clearly do not produce the visual experience of pink. Again Mr. Landgraf developed pink filters, and some children liked them, but still more refinement needs to be done to get the intense pink experience that was used in the previous research. It then remains to be explored as to whether the intense pink used in an AVS format will have a profound quieting effect especially on the child or adolescents aggressive impulses. This is an area that we will explore in more detail in the Fall. The current gels allow too much light through the filter, and thus the pink experience is diluted.

The issue of the type of music utilized during the light-sound interventions may be very important. At the first of the year we utilized music that was familiar to children such as Disney classics, Lion King, etc. The children certainly liked these musical selections, but clearly they were overly stimulating at times, and the children would be bouncing all over the place in response to the rhythms or singing loudly. They did however, like the experience of the session with this type of music. However, the author felt that it might be that there was music that was healthier for brain dynamics and that utilizing music that had been shown to have scientific therapeutic effects might be more productive. To this end, the author began shifting to a number of compositions from Mozart, Bach, and other classical musicians. This shift was met with great cries of despair from the children. However, with persistence the shift was accomplished. By the end of the year, the children/student's were requesting their favorite Mozart selections. Some preferred the piano compositions, others the violin. The author would allow different students to take turns making the selection at the beginning of the therapy session. Next year, we will expand the musical selections to include the scientifically designed music by Steven Halpern, the music of Ravi Shankar and other new age musical selections. In the plant-music research the music of Ravi Shankar had the most profound effect on the growth of plants. Music is a powerful medium and it just may be that the combination of "brain-healthy-music" with the light-sound interventions will increase the benefit of both the music and light-sound intervention.

Near the end of the year we introduced two additional interventions that appear promising and will be continued and explored in the following academic year. These were Emotion Free Therapy and Heart Math. Emotion Free Therapy is a procedure that involves tapping on various acupuncture points while holding disturbed thoughts or feelings in consciousness. The tapping is thought to renormalize the thought-emotion field that is accessed by tuning in to the problem thought and or feelings. Various children seemed quite responsive to these interventions and it appears that they hold a great deal of promise. Once again children, once taught the procedure, would spontaneously use the procedures to address negative feelings that occurred either at home or at school. One fifth grade student in particular used them extensively and would frequently teach his peers how to use them to address

their emotional dysfunction.

Heart Math was obtained at the end of the year and was used on a very limited basis. It teaches the subject how to synchronize their heart rate. It is a form of biofeedback and has a considerable amount of impressive research in both child and adult populations. It involves learning to initiate and hold positive feelings when stressed, learning appropriate breath patterns, and listening to specifically designed music. The music was designed by Doc Childre, founder of Heart Math Institute, to specifically promote relaxation and heart synchronization. The biofeedback portion informs the subject when the procedures are working and the heart signal is synchronized.

In summary, it was a clear conclusion that these children present a very serious and profound challenge and that no one intervention is the total answer. As with last year, it was very clear that both the parental involvement and the dietary issues were crucial to address. Caldwell School District has a very sizeable poverty ridden population with all of the attendant family and social dysfunction. It has become increasingly clear that the probability of the child making significant progress is highly linked to the parental willingness to change the diet in a healthy direction. In private discussion with both Dr. Paul Swingle and Michael Joyce, they concurred that the dietary issue is very central to affecting long term change in these children. Also the greater the parental involvement with the program, the greater likelihood that the above described intervention will have a successful outcome. Those children who we have used both neurofeedback and AVS intervention and the parent accompanied the child to the therapy session and would follow both the dietary and parenting suggestions, made by far the greatest progress.

There is one additional therapeutic procedure that we utilized in conjunction with a private clinical psychologist. We had exhausted all therapeutic intervention that we had at our disposal with Aaron. Aaron was very resistive to both neurofeedback and AVS. He resisted all reasonable and consistent efforts. The family explored dietary interventions, food allergy screening and then removal of the offending allergic foods, as well as some home parenting suggestions. Even with all of these interventions Aaron remained the terror and bane of the entire staff at the school. He was referred for attachment therapy, which involved the holding procedure, formerly known as Rage Reduction Therapy. Within 5 or 6 sessions, Aaron was a changed boy. He would cooperate with our therapeutic intervention, became a pleasant child to be around and the school staff was finally pleased and relieved.

You may contact Dr. Cunningham at: jer8@mindspring.com

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Peripheral Trance

by Michael Stevens

This issues' topic is going to be so simple that many people may simply dismiss it as something not worth experimenting with. Please experiment with this technique! Albeit simple, it is one of the most POWERFUL little tricks I am aware of...use it!

First, let's cover why you would want to learn this. How would you like to have an easy to learn and do, simple, quick, technique that you can do anytime, anywhere that is safe, effective, fun, consistent, and reliable? A technique that that allows you to maintain a state of "relaxed alertness" that you can use to instantly release any negative self talk, help you focus your attention and awareness where it is needed, and learn and recall information at least twice as quickly! We'll also discuss how to integrate this technique with a light and sound session so that you'll get more enjoyment and more effectiveness from your sessions. You'll also learn how to use this technique to be more "in the moment" with your sessions (which instantly cuts off any external distractions or thoughts you do not desire).

What is it? Peripheral Trance is, in it's simplest terms, focusing one's attention to their peripheral vision. This small, easy action widens one's field of view and awareness. A mild trance will usually occur, and that is a good thing. Peripheral Trance is often described by my clients as a feeling of "relaxed alertness".

Now here's what the amazing benefits from this are....The ability to focus energy (including attention), and the ability to have an enjoyable state of mind are BOTH yours as long as maintain peripheral trance. Let me explain. This state of mind is awesome for learning new information. Alfred Korzybski said in his book "Science and Sanity" that "All learning is state dependent". This means that you recall information easiest when you're in the same state of mind as you were when you learned the information. If you have a consistent, reliable state of mind that you can access when you're learning information AND needing to recall it, you should be able to process that information much more effectively and easily (and have more fun doing it) than if you have inconsistent, unreliable states of mind.

Some of you may not understand what I mean by inconsistent and unreliable states of mind. So, for example, you're studying for some sort of written exam. When you are studying for the materials in the comfort of your own home, you tend to be more relaxed, but when you get into that intimidating class room, many people sometimes just go blank and can't recall anything because of test taking anxiety. OUCH! This situation is often what happens when mind states don't match. The state that the information was learned in (being relaxed at home) was not the same as the state when it needed to be recalled (feeling anxious in the classroom). This is because of inconsistent (meaning that the mental states did not match) and unreliable (because you can't consciously reproduce the state the material was learned in) states of mind.

Here's how to do it! First, find some sort of focal point. Most commonly, I have people focus on a spot on a wall (if there is a wall

present). The easiest way to do this when you first start is to make a "spot" (usually a large black, solid circle, about 2 inches in diameter) on a 3x5 index card and tape it on a wall, so that the card is about 45 degrees above eye level.

Second, simply focus on that spot on the wall. Let that spot become the center of your entire universe. Put all your focus on that spot on the wall.

Third, when all your focus and energy is on that spot on the wall, slowly start spreading your awareness around you. Spread your awareness all the way out to the edges of your peripheral vision. Then wrap your awareness around your body, and spread it behind you until your awareness is spread in each and every direction, including above you and below you.

Fourth, once you have your awareness completely expanded, remember the sound that an airtight container makes when closed, and seal in this feeling of expanded awareness.

Cool, huh!

This technique has successfully been used to get take care of ADD/ADHD, anxiety, simple negative emotions, and a myriad of other things! In the class room, students who use this technique typically have their grade point average raise 1.5 points (e.g. from a "C" to a "B+").

To expand the possibilities, this technique can be easily used with AVS sessions. The best time to use peripheral trance with AVS is if you have difficulty "getting into" a session. You may be starting a sessions while having other worries on your mind that the day brought. In this case, simply use a "spot" in the myriad of patterns from the light frames and go into the technique.

It is also useful to use this technique if you wish to maintain control if unresolved negative emotions suddenly pop up during a session. If this happens, peripheral trance can quickly bring you back to a calm, centered, resourceful state.

If you want to experience a sort of "thwacking" during an AVS session, simply alternate rapidly between peripheral trance and foveal vision. To do this, expand your awareness, then pull it all back to that single spot in front of you (at this point, you should be completely unaware of anything in peripheral vision), then rapidly expand your awareness again.

Have fun with this technique, and please contact me if you have any feedback or questions! Use peripheral trance all you want. There is no limit to the amount of times you can use it in life. Let me know about any new uses you find for it!

Michael Stevens is a Certified Master Practitioner of NLP, Certified Master Hypnotist, and Certified Master Practitioner of Time Line Therapy™. He is the president of his company/ fun factory, Mind EFX, which specializes in making trance-formation entertaining. Mind EFX can be contacted by calling (818) 367-8447, outside the Los Angeles area TOLL FREE at (866) MIND EFX



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New Products Information:

Inside the new Proteus Editor and operating system upgrade

The trouble with this upgrade sequence was that we kept thinking of neat new features to add - some of which took more than a month to code, debug and test! However, we've capped the feature set, written some real documentation, and have posted the results to the Software section of www.syneticsystems.com/proteus/resources.htm. Includes two components: the Proteus operating system (OS) and the Proteus Editor program for Windows. You can upgrade the OS directly from the editor - it takes just a few moments - and this adds support for the new features. Here's a brief list of what we've added:

- Independent frequency control of the two color channels, in addition to real-time color cross-fades between red and green. This allows you to set the red and green channels to completely independent frequencies - now you can simultaneously elicit two different brainstates, or with old-style monochrome glasses, set the left and right eyes to their own rates.
- Real-time session editing and previewing using a personal computer (Windows 98 or later). Use this to test segments, groups of segments, the entire program ... or just the segment start or finish parameters. Absolutely essential for creating and testing your sessions, due to the "real-time" interaction.
- Biofeedback control of most session parameters. Possibly the most powerful of all new features, use this to construct feedback loops between Proteus and Thoughtstream (and future biofeedback devices). Imagine creating sessions during which the lights slow down and fade out as you relax ... But speed up again if you start to fall asleep. Or, alternate between biofeedback and light/sound stimulation. Great opportunity for you to exercise your creativity here!
- Second memory bank (Uxx) added for additional flexibility. Keep the factory sessions in the Primary bank, transfer your own into the Utility bank.

- Total possible internal sessions increased to 199. Probably more than you will ever use.
- Dual binaural beats option for those of you who wish to experiment with these. Of course you can create your own waveforms with the waveform editor and use those to create your "beats". Imagine adding just a little harmonic content to a sine wave, then using that to create "nested" binaural beat sequences.
- Randomizer tool quickly creates sessions which vary randomly within programmable constraints. For example, create a new session with 30 segments, then randomize the stimulation patterns between 13 and 18 Hz to "beta-perk".
- Session tables can be printed out for easy reference.
- Supplemental commands have been added - these allow super-precise control of pulse rate (0.20 to 51.1 Hz, with 0.01 Hz overall resolution), expanded audio pitch (40.0 to 999.9 Hz with 0.1 Hz resolution) and brightness, volume (0 to 255, resolution of 1).
- Reorganized segment editing screen.
- Enhanced cut-and-paste editing capabilities.
- Ability to make global changes to key session parameters - just highlight the segments you wish to change and right-click on the flag you want to change.

What's next? Well, we'll revamp and expand the tutorials on our site, and perhaps of more interest to most users, add more sessions. We're considering a contest with prizes to those who write the most interesting sessions, and we would like to be contacted by professionals who would like to license programs for distribution to others.

A main focus will be on the biofeedback control capabilities - this very powerful feature holds much promise. And we're putting our finishing touches on a new, multichannel biofeedback system, which will also interface with Proteus.

Mental Games 3.0 preview.

Mental Games 3.0 will soon be ready for release - this will include a number of helpful new modules, including a powerful personal database with performance tracking and reporting capabilities. Toss out your paper logsheets! Release date: September.

EDA Bioscan upgrade from Comptronic Devices Limited

The response to our newly designed EDA Bioscan has been tremendous. People are really excited about the bar-graph and new styling. We do have some of our previous models available at a 50% discount. Limited quantities.

DAVID Paradise XL / CES

We anticipate by September having our new Paradise XL / CES device ready. This will be a Paradise XL with the Oasis built in! For your safety (shock hazard), we are going to continue to use the 9 volt battery and opto-isolation as we do now with the Oasis. The case will basically be the same as the Paradise light and sound devices, but a bit thicker to accommodate the 9 volt battery. The CES part can be run independently at 10 Hz (healthy alpha) or the Paradise XL may be operated on its own, or both may be synchronized.

Freeze-Framer

Comptronic has now added "Freeze-Framer" to their collection of quality products. It consists of a small heart beat monitor that plugs into the COM port of your computer and a CD ROM. The software is easy to use and the instruction book is very clear and concise on how to breathe properly. The Freeze-Framer monitors your heart rate variability and provides a summary of how effective your heart/breathing rhythms are. It includes some basic "games" that can be played with your heart rhythm. The forest, which starts off in black and white, is Dave's favorite. As you do well, colorful flowers appear followed by a waterfall, rainbow and forest animals, all in living color. Retail for \$395.00 US and \$595.00 CDN.

Thinking Cap

Soon, Comptronic will be measuring cerebral blood flow or hemoencephalography (HEG) in conjunction with QEEGs for our AVS research. The HEG device, called the "Thinking Cap", was developed by Hershel Toomin of the Biocomp Research Institute. It consists of a strap with a small near infra-red emitter and receiver, spaced along the strap about 1 inch (2 ½ cm) apart. It's a full blown neurofeedback system. As cerebral blood flow is increased light is blocked by the blood and this is shown on the computer screen. Soon this system will be able to interface with the affordable BrainMaster. We have already had our BrainMaster modified to accommodate the Thinking Cap and are awaiting the arrival of the software, due shortly. Retail for \$995.00 US and \$1,495.00 CDN.

The new Lifescapes Programs. What! More AVS programs? Don't we have enough already? These are no ordinary programs, they are a creation by Tool's light and sound specialist, Jeff Labno. Jeff has been doing programming for two decades, so he has many insights which can benefit all of us.

These programs are awesome: they are extremely visual both in the beginning and the end; designed to get anyone's attention right away. They quickly take you down into a deep hypnotic state of rest, then bring you into the target zones or the theme areas of each program.

Jeff patterned these programs after the maverick machine, the Synchro-Energizer. He was able to take analog programming "real-time" and use a digital format. These programs are a great contribution to AVS because it is the first time that mainstream needs are met with "time-tested" programs that really work. For Photosonix machines only.

Disc #1 Conquering Life's Changes: Moving On (divorce, job changes, bankruptcy, moving, loss of a friend or family member, suicide of a loved one); Interpersonal Relationships (romance, dealing with "coming out", family conflicts); Stage Fright (business meeting preparation, getting ready to give a performance, preparing for an interview); Self-Esteem (losing weight, handling inherent obesity, self-worth, not being happy with one's self); Sports Performance (visualizing goals, peak performance, getting in the zone, being comfortable with your own abilities and limitations). \$24.95

Disc #2 Conquering Life's Crises: Pre / Post Operative (minimizing worry, maximizing healing); Chronic Illness (dealing with cancer, AIDS and other life-threatening illnesses); Aging (diminished endurance, unsatisfactory sexual performance, trouble with memory); Trauma (accidents, coping with the shock, starting to heal); Death & Dying (the fear, preparing for it, dealing with the aftermath). \$24.95

The Neurophone. What fun! You get instant energy, and lots of it. Imagine plugging into your favorite CDs and instantly you feel energized, alert, and full of life!

Using the Neurophone with AVS is a high-tech ultra learning advancement. If you want super-fast learning, immediate delivery to the brain, and a "no-brainer" making learning effortless, then this puppy is for you. Transducers vibrate the skin stimulating tactile receptors, which activate an entirely different part of the brain than input from the ears. Patrick Flanagan invented the Neurophone when he was only 13 years old and was heralded by Life Magazine as "one of the top scientists in the world".

"I can personally say that this technology has thoroughly changed my life. Beat frequencies take effect far more quickly. Using learning tapes such as foreign languages, guided visualization, or your favorite music enhances your experience such that you achieve far deeper states in shorter periods of time. Your energy level accelerates rapidly and quickly when using the Neurophone." -Jeff Labno. \$895.00

The BioCircuits. If you want to "up-the-amps" of your personal session, this "non-plug-in-the-wall" technology is a must. To use the BioCircuits, you lay down holding copper handles (one in each hand) with wires connecting them to copper screens (one placed under each foot/ankle). They were devised to accelerate physical healing.

What is impressive about the Circuits is that you feel waves of energy moving throughout your entire body. These waves of energy are relaxing and nurturing, producing what feels like a healing cocoon of energy around you.

Your sessions will be much more visual and your states of rest will be deeper and more rejuvenating. Try Schumann Resonance programs with the Circuits, you'll be truly transfixed. Basic Copper Circuit \$109.95

The Sound Health Series is the best sound series we've heard in a very long time. They put you immediately into clear and focused states, depending on the CD you choose.

This series contains each of the following "theme CDs": learning, productivity, motivation, relaxation, inspiration, de-stressing, concentration and thinking. The classical pieces were re-written and performed by the Archangelos Chamber Orchestra.

We've tried these CDs with AVS machines and the music quickly transforms your mood so you can clarify your goals and objectives. These recordings are of superb clarity, and the performance of the music is outstanding. 8 CD set: \$109.95

The Motivaider has been around for a very long time helping people. This technology is a definite "sleeper"; it is simple, but you'll be surprised at how effective it is. Imagine going very deeply into an AVS session, then the Motivaider reminds you that now it is time to focus your mind on something specific.

It is a timing device, which vibrates on a strobe basis, depending upon how you set it. You can set it for just a few seconds to 24 hours. People are using it with their AVS sessions to remind them 10 to 15 minutes into their session to say affirmations, to begin meditating ... also people are using it for behavioral modification after doing a session. Once you are more removed from stress after doing an AVS session, then you can more productively activate your subconscious mind with affirmations throughout the day. Set the Motivaider for 20 minutes and it will vibrate every 20 minutes reminding you to think or say your affirmations. \$59.50

Calendar of Events

- Sept. 22-26 Stens Biofeedback Certification Workshop, San Francisco, CA. 800/257-8367
- Sept. 24-26 Comptronic Devices Training Workshop, Edmonton, Canada 800/661-6463
- Sept. 27-29 Stens Corp. / Chronic Pain & Headaches, San Francisco, CA. 800/257-8367
- Oct. 6-7 ProComp+/BioGraph Workshop, Joel Lubar, Ph.D., Montreal, Quebec, Canada, workshops@thoughttechnology.com
- Oct. 13-17 Stens Biofeedback Certification Workshop, Dallas, TX. 800/257-8367

- Oct. 18-22 Stens EEG/Neurofeedback Certification Workshop, Dallas, TX.
800/257-8367
- Oct. 23-25 Stens Corp/EEG Alpha-Theta Neurofeedback Training, Dallas,
TX. 800/257-8367
- Nov. 5-7 Comptronic Devices Training Workshop, Edmonton, Canada
800/661-6463

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-Nicholas Soffron, Ph.D., A.M, Psychotherapist



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