



Meridian Institute News

RESEARCHING THE SPIRIT-MIND-BODY CONNECTION

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Assessment Instruments Analyzed

In July 1999 (Vol. 3, No 4) we reported on the creation of two new assessment tools and requested your participation in a research project to develop normative data and analyze the psychometric properties of the instruments. We also advertised the instruments in *The New Millennium*, a membership magazine of the Association for Research and Enlightenment (A.R.E.). Over two hundred individuals took part in the project by completing three questionnaires:

- *Cayce Comprehensive Symptom Inventory (CCSI)* - This structured assessment questionnaire contains a wide variety of signs and symptoms of physical and emotional distress arranged in thirty scales. Each scale represents a pattern of etiology or pathophysiology used by Edgar Cayce in his system of assessment and diagnosis.
- *Approach to Life Inventory (ATLI)* - This brief questionnaire is based primarily on the Cayce philosophy as it pertains to spiritual, mental, emotional and interpersonal factors associated with health and healing.
- *SF-36* - This highly regarded and widely used questionnaire created by the Rand Corporation evaluates health and wellness. The SF-36 serves as a benchmark for comparison with the two new instruments. For the purposes of this study, we focused on two primary scale scores (M - mental; P -physical) that were used for comparison with the CCSI and ATLI.

Meridian Institute research director Douglas Richards has just completed the initial data analysis and is putting the final touches on a research report. Here are some of Dr. Richards' observations:

"The correlation coefficient is a measure of how strongly two scales are related. It ranges from +1 (identical) to 0 (not related at all), to -1 (opposite). Moderate correlations, in the range of .3 to .7, are often seen in questionnaire research.

"The strongest correlation is of the ATLI with the SF-36 Mental scale. Even though they use very different types of questions, they both appear to be measuring the same thing: the mental/emotional health of the person. The subscales of the ATLI, however, lead to therapeutic suggestions from the Cayce readings for mental/emotional issues. The ATLI is also positively correlated with the SF-36 Physical scale. This is not surprising, since mental and emotional factors have physical consequences and vice versa. The very low correlation between the SF-36 P(physical) and M (mental) scales confirms, however, that the authors of those scales were successful in separating physical and mental quality of life issues, a difficult task.

"Interestingly, age seems to have no relationship to the physical quality of life, and only a very small relationship to physical symptoms in general. Age is positively correlated with both mental quality of life, and the ATLI - that is, in this group of people, the older you are, the better you feel mentally and emotionally. These results are worth further exploration in a sample from a wider population.

"Surprisingly, the CCSI is correlated with both the SF-36 P and M scales; slightly more highly to the M scale, although this is not a statistically reliable difference. A look at the individual scales of the CCSI can help explain the high correlation of the SF-36 Mental scale with the CCSI. Most of the scales of the CCSI are correlated with the SF-36 M, at an average correlation of about -.30. That is, more physical symptoms tend to lead to a lower quality of life in the mental/emotional as well as the physical realm. But a few of the CCSI scales have a much higher correlation with the SF-36 M - from .50 to above .60. These include Scale 15: Hypothyroid, Scale 18: Psychological, Scale 19: Hypoadrenal, Scale 25: Brain Dysfunction, and Scale 29: Spleen Dysfunction. All these scales include one or more symptoms typically thought of as "mental," e.g., depression or confusion. Clearly these symptoms would have an effect on mental/emotional quality of life, explaining the high correlation with the SF-36 M. But the set of symptoms on these CCSI scales could lead to further exploration of the possible physical reasons behind these mental symptoms, such as thyroid or adrenal problems, with therapeutic recommendations from the Cayce readings."

Table 1. Correlations among the SF-36, CCSI, ATLI, and Age (n = 202).

	SF-36 M	Age	CCSI Sum	ATLI Sum
SF-36 P	.00	-.07	-.42	.19
SF-36 M		.33	-.53	.73
Age			-.13	.32
CCSI Sum				-.47

From a practical standpoint, all three instruments are currently being used in the HRRC Assessment Center (a division of the A.R.E.) as part of a holistic approach to evaluation. Administration and interpretation manuals for the CCSI and ATLI are available on the Meridian Institute website.

LITERATURE

PROBIOTICS REDUCE ECZEMA IN CHILDREN

Researchers at the National Public Health Institute in Finland reported that a probiotic (lactobacillus GG - a friendly bacteria found in live yogurt) could significantly reduce the chances of infants developing atopic eczema. Atopic eczema is a relatively common skin condition affecting about ten percent of children in the United States. In the mild forms the skin is dry, hot and itchy. In its more severe manifestations, the skin may become broken, raw and bleeding.

The double-blind randomized placebo-controlled study published in *Lancet* involved 159 pregnant women with a family history of allergies. The women were randomly given lactobacillus GG capsules or a placebo twice a day for about three weeks before giving birth. After delivery, breastfeeding mothers took the capsules for six months while bottle-fed babies were given the capsules mixed with water.

The infants were evaluated at three, six, twelve and twenty-four months. Twenty-three percent of the babies fed the probiotic developed atopic eczema, compared with forty-six percent of those given the placebo. In other words, the frequency of eczema in the probiotic group was half of the placebo group.

The researchers concluded, "Our results suggest that gut microflora have unique, yet largely unexplored endogenous immunomodulatory properties. These properties might be indispensable in the fight against the increasing frequency of atopic, and possibly other, immunological diseases."

Atopic eczema is regarded as one of a group of allergic diseases including allergic rhinitis and asthma. The recent rapid rise in atopic diseases has sparked interest in the cause and treatment of these chronic disorders. Increased intestinal permeability is one possible explanation of the link between the intestinal tract and endpoint organs such as the skin or respiratory tract. Also called "leaky gut syndrome," excessive intestinal permeability may allow substances that would normally be eliminated through the bowel to escape from the gut into the general circulation provoking an immune response.

The intestinal tract contains a major portion of the immune system. Some scientists believe that early exposure to bacteria such as lactobacillus stimulates and enhances the intestinal immune response in children, resulting in less atopic disease over the lifespan of the individual.

Edgar Cayce gave numerous readings describing leaky gut syndrome for a variety of disorders, especially skin diseases such as psoriasis. For more information on the Cayce hypothesis, see the peer-reviewed journal article, "Systemic Aspects of Psoriasis: An Integrative Model Based on Intestinal Etiology" on the Meridian Institute website.

Reference

Kalliomaki M. Probiotics in primary prevention of atopic disease: a randomised placebo-controlled trial. *Lancet*. 2001 Apr 7;357(9262):1076-9.

PRESENTATION

MULTIDIMENSIONAL AND INTEGRATIVE MEDICINE

Eric Mein and David McMillin gave a presentation at the American Holistic Medical Association (AHMA) 24 Annual Scientific Conference in Miami on May 3, 2001. The talk,

titled "Multidimensional and Integrative Medicine," focused on the concept of multidimensional healing as researched by Meridian Institute. The Cayce holistic model was explained using the phrase, "Spirit is the life, mind is the builder, physical is the result." The placebo response was identified as a common manifestation of spirit as it heals the body.

Participants were given practical tools for discussing and identifying the multidimensional aspects of healing, including six forms of healing listed on the *Healing Questionnaire* (cure, care, quality of life, empowerment, enlightenment, and soul development). Case reports from Meridian Institute projects were used to illustrate these complex concepts and provide guidance for integrating the multidimensional model into a clinical setting.

The transformational paradigm of healing was presented within the context of healing as a spiritual initiation for everyone involved (including caregivers and practitioners). The shadow aspects of transformation (such as projection and guilt) were discussed with an emphasis on respect for the patient's beliefs and values.

Participants were encouraged to use reflective meditation to get in touch with core beliefs and experiences of multidimensional healing. With such a personal understanding of the various forms of healing, clinicians are better able to communicate these ideas to patients. The *Healing Questionnaire*, an outline of the presentation, and links to audio excerpts from the talk are available on the Meridian Institute website.

HEALING

ULCERATIVE COLITIS

Ulcerative colitis is a painful and distressing illness that modern medical science regards as incurable and of unknown causation. Meridian Institute created a protocol for this condition based on the numerous readings given by Edgar Cayce for individuals suffering from this disorder. Although the Cayce readings provide an individualized treatment plan for each person, a common treatment pattern for ulcerative colitis includes an herbal formula (Tonic # 208) consisting of wild ginseng, Canadian snakeroot ("wild ginger"), lactated pepsin and stillingia. In addition to the tonic, the protocol treatment plan also includes a basic diet that focuses heavily on keeping a proper alkaline/acid balance while avoiding foods that produce toxicity and drain the system. Essentially, the diet consists mainly of fruits and vegetables while avoiding fried foods and refined carbohydrates ("junk food"). Certain food combinations are emphasized.

The following anecdote documents the results obtained by a seventy-seven-year-old man who had endured the bloody diarrhea and constipation associated with this disease for ten years before he obtained the *Ulcerative Colitis Research Protocol*. He started the treatment plan on December 18, 2000 and within sixteen days he reported that his bleeding had cleared and his stool was normal. "I can't believe it after ten years of problems - It's great!" On the follow-up data collection forms that are an integral part of each protocol, he credited his recovery to the Cayce diet (which he followed about 75%) and the #208 herbal tonic.

Over the years, there have been a number of individuals suffering from ulcerative colitis who have reported similar positive experiences using the Cayce approach. Based on this preliminary data, Meridian Institute is interested in developing a cooperative relationship with a clinician or researcher who is willing and capable of doing more extensive research in this area. An initial study could involve the use of the #208 herbal tonic described above. Interested parties can contact us via the phone number or addresses listed at the end of this newsletter.