

Pain-4-Pleasure?

Healing Hotspots in the Body with the ARP Wave System

The concept of pain is hard to explain. It means different things to different people. Physical pain is what this article is about, not the kinky stuff, though!

Medications, therapies and surgeries have all been put in place to help those with debilitating disorders and injuries. But somehow these have become so mainstream that people use them at the onset of pain, almost as if their tolerance for pain has gone down exponentially. Our culture doesn't seem fond of people suffering from pain of any kind; it is not seen anymore as part of the healing process. Healing pain has become big business

Pain is pain—whether it is short-term or chronic, and although inconvenient, there are a few important questions to ask:

- What can we learn from it?
- What can we do about it?
- Can we afford not to do anything?

BARE BASICS

When you hit your head, get kicked in the shins, or hurt your hand when falling down, we can point at both the pain and the spot of contact.

On the other hand, ask anyone after experiencing long-term pain, to say where it really hurts and that may not be the spot where the original injury started. Over time the body is trying to alleviate pain by shifting the way we move daily. For example: when you twist your ankle, in order to keep moving forward, you put less pressure on it by leaning more on the other foot.

The ankle is connected to the knee, the knee to the hip; and the hip is connected to the spine.

After a year or so we start having a nagging pain in the lower back. We can point at that pain, but that is not really where the pain started. It has accumulated to the lower back. Now we take pain medications, or anti-inflammatory supplements; maybe we visit a body-worker to help *adjust* our back. This may keep us busy for another six or nine months. Many people have success; others give up and try another treatment.

There is nothing wrong with this approach; it is totally understandable as well as commendable that we become proactive in working with the body. And many great and passionate therapists can tell miracle stories of improving their patients' lives. However, if the results do not measure up to the money invested in the treatments, we may become frustrated.

We could try body-conditioning routines such as yoga, Pilates, martial arts, gym workouts, or simply walking. These help to build flexibility, strength and endurance in the legs, abdominals, arms, hips, and back. We learn improving coordination and balance, and breathing to relieve stress and allow adequate oxygen flow to muscles.

BOTTOM LINE: the pain never seems completely gone, nor do you feel capable performing at that physical level you are used to. Something seems not right; something is missing!



SCAR TISSUE. When ligament fibers are torn, the body lays down collagen in an attempt to support, reconnect, and reinforce the damaged tissue. This collagen repair is commonly referred to as scar tissue. It is much weaker, less flexible, and easier to tear than normal ligaments because it is laid down in a random pattern and does not follow the same fiber orientation as the normal ligaments. This irregularity also inhibits the functioning and communication of the nerves, creating a "short circuit" in the body's electrical system. The ARP locates that short circuit and rapidly repairs it. [Image: Body Worlds]

ACCEPTING ACCOUNTABILITY (AA)

Pain doesn't discriminate between rich and poor, male and female, young and old, not even between skinny and heavy. But I do believe that we own our body, and that we have responsibilities to keep it in the best shape possible.

And that is a very confusing topic because most of us are self-justifying about our eating habits, activity levels and other lifestyle choices.

AA#1: What is a healthy weight if experts do not fully agree on how to measure it, or on how to get there and how to stay there? Meanwhile, we are the most obese and overweight nation in the world. And, when you look at the statistics further in the article, all that extra

weight cannot be held-up by our ankles, knees and hips. Nobody gets heavy overnight. This is a battle that may have started with a (undiagnosed) diabetic mother, but mostly is aggravated because of a high calorie/heavy carbohydrate diet. This may progress with age.

Cravings are not satisfied with more proteins, healthy fats, minerals and vitamins—none of which will turn into unused sugars! They need to be satisfied fast with fast-food choices that are all around us these days. And there are those who will not gain weight, in spite of a poor diet, but who do suffer from structural problems, over time.

Because of these choices, neither are we nourishing our skeletal system, nor our muscular system. This causes chronic weakness in both, resulting in damage and risk of injury. It is this chronic decline that lulls us asleep, and will catch us by surprise, often when it is (almost) too late.

This issue is also brought to light through the many decades of research done, or inspired by, Dr. Bruce Ames. **Bruce N. Ames, Ph.D.**, Emeritus Professor of Biochemistry and Molecular Biology, University of California, Berkeley states:

“There is considerable evidence supported by theory

that modest shortages of even a single micronutrient, though insufficient to cause clear clinical symptoms, will impair long-term health. And, since modest deficiencies have no overt symptoms there has been little incentive to correct these deficiencies”.¹

Through Dr. Ames’ work and that of others, nutrition is now being put on a firmer scientific foundation than ever before.

Dr. Ames also poses that proteins needed for long-term health (i.e. longevity proteins) defend against the diseases associated with aging. However, they become disabled in their survival and reproduction abilities because of a moderate deficiency of essential vitamins and minerals, such as Vitamin K, Selenium, Magnesium and B6. This is the case in the current western diet. We do live longer in this country, but the quality of living is hampered because of chronic poor health.

AA#2: The many health benefits of exercising are obvious. The problems of pain come in when people become active without the proper technique and without the proper nutrition. Diet needs to be adjusted as activity levels change. Proteins are responsi-

Staggering Statistics

Stopping the Pain— No Matter What the Cost

Thanks to the advancements in medical diagnostics, equipment and medications, a lot more loved ones are with us today who otherwise would have been lost because of injuries and pain. However, for every good invention and intention there are those who push the radical envelope in the opposite direction. Pain medications have become the most abused prescription drugs on the market today.

A **CBS Report** from February 11, 2009, entitled, **“Painkiller Use in U.S. Skyrockets,”** states:

“The amount of five major painkillers sold at retail establishments rose 90% between 1997 and 2005, according to an Associated Press analysis of statistics from the Drug Enforcement Administration. More than 200,000 pounds of codeine, morphine, oxycodone, hydrocodone and meperidine were purchased at retail stores during the most recent year represented in the data. That total is enough to give more than 300 milligrams of painkillers to every person in the country.

“Oxycodone, the chemical used in OxyContin, is responsible for most of the increase. Oxycodone use jumped nearly six-fold between 1997 and 2005.”²

An **AP investigation** found these reasons for the increase:

- The population is getting older. As age increases, so does the need for pain medications. In 2000, there were 35 million people older than 65. By 2020, the Census Bureau estimates the number of elderly in the U.S. will reach 54 million.
- Drug makers have embarked on unprecedented marketing campaigns. Spending on drug marketing has gone from \$11 billion in 1997 to nearly \$30 billion in 2005, congressional investigators found.
- A major change in pain management philosophy is now in its third decade. Doctors who once advised patients that pain is part of the healing process began reversing course in the early 1980s; most now see pain management as an important ingredient in overcoming illness.”

MORE ON NEXT PAGE...

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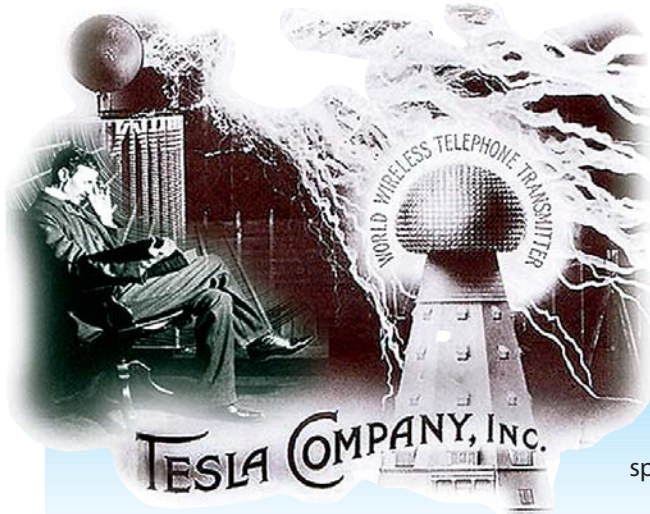
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ble for about 70% of each cell's activities, whereas the other 30% of all cells' activity is dependent on a combination of sugars, fats, vitamins and minerals. And we are made up of over 75 trillion cells.

As we become *more* active we have to increase the protein (75%–100% of our weight in grams of protein daily). As we become less/non-active we still need 50%



of our weight in grams of protein.

If we don't consume enough protein, automatically our desire for carbohydrate-rich foods increases. Continuing this long-term decreases the quality of our cells' nutritional needs. This will diminish the quality of our mitochondria, which are responsible for our energy output.

Dr. Bruce Ames says, "Mitochondrial decay with age due to oxidation of RNA/DNA, proteins and lipids, is a major contributor to aging and the degenerative diseases of aging."

Therefore, when we mentally force the body to perform continuous and rigorous exercises, without an appropriate and adjusted diet for those types of exercises (i.e., mind-over-matter), then over time we very well may create injuries, scar tissue and neurological disconnects as the body's way of telling us that it cannot perform on fumes. Proper technique may become compromised as

The **ARP Wave** device used is called **RX-100**. It was developed at the **Tesla Institute in Russia** using Denis Thompson's specific concepts and vision.

An article entitled, "**Prescription Drug Statistics—Pain Killer Abuse**,"³ outlines the following facts:

- Most people who take prescription drugs use them correctly and legally, and painkillers greatly improve the quality of life for the 30 million Americans who suffer from chronic pain, as well as surgery patients. But Americans are relatively using more painkillers than ever, and this increases the risk and incidents of painkiller abuse and addiction.
- The U.S. is the world's largest consumer of painkillers, using 71% of the world's oxycodone and 99% of the world's hydrocodone, or Vicodin.
- In 1991 there were 40 million prescriptions for painkillers worldwide, but by 2001, there were 180 million painkiller prescriptions, most of them in the U.S.
- 7 of the 11 drugs most commonly abused by high school students are prescription or over-the-counter drugs.
- A 2006 survey found that 7 million people 12 and over had abused prescription or over-the-counter drugs in the past 30 days. Most abused painkillers.
- 2.2 million people age 12 and up started abusing painkillers in the last year.
- Young adults, age 18 to 25, show the most painkiller use and the greatest increases in abuse.
- About 1 in 4 teens will abuse prescription drugs before they graduate from high school.
- Emergency room visits related to painkiller use rose 153% from 1995 to 2002.
- Admissions to drug treatment programs for people using painkillers rose 321% from 1995 to 2005.
- The number of people abusing painkillers is estimated to have risen from half a million to 2.5 million between 1985 and 2002.
- Deaths related to painkiller use rose 160% from 1999 to 2004.
- The abuse of painkillers causes more deaths than heroine and cocaine combined.
- The abuse of painkillers among teens has received a great deal of attention from the media and researchers. Prescription drug abuse is second only to marijuana use as a problem among teens. Teens, though, are not the only group at risk for painkiller abuse. Older Americans and women are also at increased risk for painkiller abuse.
- About 1 in 5 teens gets high by abusing painkillers.
- Over 2 million teens reported abusing prescription drugs in 2006.
- 2,500 teens abuse prescription drugs for the first time each day.
- Though men and boys are far more likely to abuse street drugs, women and teen girls are more likely to abuse prescription drugs, partly because painkiller abuse is more socially acceptable than street drug use.
- Women are more likely than men to end up in the emergency room or a drug treatment program due to abuse of prescription drugs.
- Though older adults make up just 13% of the U.S. population, they get about 33% of the prescription medications.
- Experts predict that abuse of prescription drugs among older adults will increase by 190% by 2020."

BOTTOM LINE: Not only are these numbers staggering, the real thought behind it is that people are suffering from pain to the point that they cannot finish their daily activities without it, let alone be able to have pleasure without pain. ■



ARP Wave developer Denis Thompson helps patients avoid hip and knee replacements and provides rapid alternative recovery methods and permanent pain relief at his clinic.

well, resulting in compensatory pain in another part of the body.

And, because we are not properly taught how to make it better, we're looking for ways to kill the *symptom* of pain, NOT the *cause* from nutritional deficiencies or poor form. (See sidebars, previous page and opposite, for some staggering statistics on our painkiller usage today.)

PROBLEM PROBING

Trying to understand the cause of pain in the body and coming up with a possible long-term solution has been a passion for **Denis Thompson**. Denis, an Exercise Physiologist by education, has over 35 years experience working with athletes and non-athletes of all types, specializing in injuries associated with competing from all sports. Over the last 25 years he has studied and experimented with Bio-Electric Techniques from all over the world for injury recovery, prevention of injury, as well as for increasing performance.

After successfully accelerating recovery times for thousands of clients from all types of injuries, creating techniques to *reduce* injuries and *improve* performance, Denis Thompson has developed a unique new methodology called Accelerated Recovery Performance through Neurological Muscle Stimulation (ARP-Wave) protocols.

These have improved the quality of life for those with physical and neurological issues. In many cases his protocols have also resulted in avoiding costly surgery, while ending pain.

One of his clients was **Paul Erickson**, who today is owner of the **ARP-Wave Clinic** in Bozeman.⁴ Decades of police force work, high-level baseball and weight lifting started to show their effect on his joints and especially his knees. Long-term injections didn't do it for him, and knee replacement seemed the only other option. He had come across this ARP-Wave technique and he thought to give it a try. The first treatment showed that the electrical impulses were hitting different disconnects, and that caused an almost intolerable pain. However, after that first session the pain was gone!

The ARP Wave System

The system is built exclusively around the neurology of soft tissue problems, NOT the physiology of that problem; so, not the symptoms. The first step is making sure that the nervous system is sending the right electrical signal to the muscles to allow the muscles to absorb "force." Because, if that step is not done, then no amount of treatment of any kind is going to facilitate a change, since the system is still not able to absorb force, and the force is going directly to the area where the problem is.

If the nervous system is not sending the appropriate signal to the muscles, the muscles cannot absorb force. So, step one is an external EMG, an electromyograph,⁶ which measures the neurological input internally of the system.

Just because the brain cannot tell the nervous system what to do anymore, does not mean that an external brain can't! So, the very first step in the ARP System is making sure that the neurological system is doing what it is supposed to do.

In a way, we are wired backwards. When we injure ourselves we are taught to not move, to keep the limb immobile. All currently used protocols are built on that same premise. The difference between the RX-100 and other electrical devices is that it does not send that neurological signal to protect.

The only reason we have a nervous system is to move. And if the nervous system is responsible for the healing process, and you are not moving, you are not going to heal.

We had to figure out a way to allow movement while we're doing therapy to engage the nervous system to speed up the healing process. So, once we figure out if someone is neurologically imbalanced (not structurally balanced) then we have to turn those switches on.

With the ARP system we're looking for the ability of the body to absorb force, which is a foreign concept to traditional medicine. Scar tissue is electrically charged collagen, a non-functional structural mass that happens because of an impetus called inflammation. So, you cannot have scar tissue unless you have inflammation first.

Secondarily, scar tissue is there to wall that inflammation off, NOT let it get into the body. With this wall around it you have no blood supply going in, and no communication coming out. This part of your body now becomes non-functional; it goes dormant. Over time the body doesn't know any better, and if any body-worker tries to break that up, the body sends a pain signal not to be disturbed. The ARP-System will change the signal, thereby relieving pain and restoring communication with that area within seconds not weeks. We kind-of have to take the frontal lobe of the brain out of the equation, which wants to stop the pain by stopping movement. Scar tissue is there because of an electrical disturbance.

You can argue all you want HOW we do what we do... but you CAN'T argue with the results. ■

—Denis Thompson • Feb. 4, 2012

You no longer need to allow pain and immobility from past injuries to curtail your athletic performance, your quality of life, or your enjoyment of the great outdoors!



In his enthusiasm he decided to pursue opening an actual clinic in Bozeman. Paul hasn't looked back since.

The **ARP Wave** device used is called **RX-100**. It was developed at the Tesla Institute in Russia using Denis' specific concepts and vision. I did an interview with Denis and Paul on my radio show on February 4 of this year about the ARP-Wave protocols, which you can hear again on the Internet.⁵ Listen to Denis Thompson's second interview coming on Saturday morning, May 5th, or find it under Archived Shows at GWJRadio.com. (See the sidebar, previous page, for a description of ARP in the developer's own words.)

Another part of the ARP-System is the **POV-Device**, the brainchild of Denis' business partner **Jay Schroeder**. POV stands for Force Velocity (PO are the first two letters

of the Russian word for Force). Jay has been involved for 30 years in the design, implementation, and evaluation of training plans for individuals from the ages of 4 through 84.

The POV-device helps the muscles to regain their full potential after the RX-100 has

worked on removing almost all disconnects. These two devices work in conjunction with each other. Regaining full mobility and strength in our movements cannot be achieved without both the ARP and POV. Both Jay and Denis have many miraculous stories to share.

Jay was also a great guest on my show, on March 31 of this year. I hope you'll become inspired to listen to the recording with him, available via the Internet.⁷

HOPE FOR HEALING

My main pain happens after playing soccer. Both during and after games my heels are very sore, and have been for many years.

I did a free trial session at the Bozeman ARP-Wave Clinic before my interview with Paul and Denis, and after that I decided to do the recommended ten sessions with the

RX-100, after which I have been on the POV-Sport Device.

For me, this has become one of the most profound, amazing, exhausting and probably most painful experiences I've ever had in my life! I'm not done yet; there are a lot more disconnects in my legs than I realized. But I'm not giving up. If today's pain will clear the way to enjoy activities without pain, as I get older, then it is worth it.

Besides, Josephine is *about* 81 years old, but you're never really allowed to ask a lady's age. However, she said her youngest daughter was 56. I met Josephine in the waiting room at the Bozeman ARP Wave Clinic. She was getting ready for her next treatment on the POV-machine, while I was still sweating from my second RX-100 treatment. Josephine had this happy, peaceful smile on her face as she was telling me how she came to the clinic mid-March leaning on her walker, her right foot distinctly pointing outward while walking, her right knee bum, swollen and painful from tripping over her dog at home, and from years of compensating for other pains.

She had heard about this machine, the RX-100, that could help her to end pain and avoid

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surgery. She did ten treatments with that device until she was pain-free, and had already done ten-plus treatments on the POV to regain mobility, muscle strength and less dependence on her walker. As she walked into the treatment room her foot moved in a straightforward direction, without pain and the walker had been replaced by just a cane. She instantly became my inspiration!

If Josephine can tell me that after one of the treatments the muscles in her leg hurt so much, she couldn't see straight, and smile at me while saying it, then I feel that I should be able to handle more pain to get to the same success she's having today.

In recent years, many other people from all walks of life have improved their diets and have used the ARP Wave system to change their life for the better.

We're all different, and this therapy may not be for you. But would signing-up for a "no-strings attached" free trial be worth your time? I thought so, and I was willing to go through the supervised (short-term) pain for (long-term) pleasure. ■

Please call the ARP Wave Clinic at 577-1515 to schedule your free evaluation and treatment.

NOTES:

1. www.bruceames.org, His 540+ publications have resulted in his being among the few hundred most-cited scientists (in all fields!)
2. www.cbsnews.com/2100-204_162-3184003.html
3. www.painkillerabuse.us/content/prescription-drug-statistics.html
4. ARP Wave Clinic, 2023 Stadium Drive, #1B, Bozeman. (406) 577-1515, toll-free (855)-ARP-6600. ARPwave.com, POVsport.com
5. www.mixcloud.com/GesundheitwJacobus/ playlists/20120204-denis-thompson-paul-erickson/
6. Electromyography (EMG) is a technique for evaluating and recording the electrical activity produced by skeletal muscles. EMG is performed using an instrument called an electromyograph, to produce a record called an electromyogram. An electromyograph detects the electrical potential generated by muscle cells when these cells are electrically or neurologically activated. The signals can be analyzed to detect medical abnormalities, activation level, recruitment order or to analyze the biomechanics of human or animal movement. From: en.wikipedia.org/wiki/Electromyography
7. www.mixcloud.com/GesundheitwJacobus/ playlists/20120331-jay-schroeder-paulerickson/



Jacobus is not a doctor and does not intend to diagnose, treat or cure any disorder. The information is based on self-study, interviewing experts on his weekly 3-hour Saturday morning Radio Program "Gesundheit! With Jacobus," which runs from 8-11

am, on AM 1450-KMMS and AM 1340 KPRK, and on feedback received from retail customers visiting his dietary supplements retail store Gesundheit! Nutrition Center at 2855 N. 19th Avenue, Suite N, in Bozeman (585-4668). If in doubt please visit a professional of your own choice and/or educate yourself with available published materials.

ARP Wave Testimonials

I had muscle pain in my low back for years. I spent, and my insurance companies have spent, thousands of dollars by treating the pain (symptoms) but not the injury (the muscles in my leg). My good friend and neighbor, a former NHL player and now an agent, introduced me to the ARP Wave. In just one session last week, they identified the problem as a strained ligament in my left ankle. By taping together my fibula and tibia (a job my injured ligament used to do) and using the ARP Wave, I am better at distributing my body weight and am largely muscular-pain free. I am looking forward to a summer at the cabin, doing all the things I used to do but have not done recently.

—Tom Finnegan



Indianapolis Colts Pro-Bowl

Defensive Dwight Freeney is also using a device called ARP that is similar to a stem device to move the blood supply to the damaged ankle. The ARP operates differently from normal stem devices, but ARP has helped him recover quickly from groin and hamstring pulls.

—ESPN NFL Insider, Adam Scheffer

After 5 years, 15 doctors and no results with my low back, neck, rib and shoulder pain, I came here to the ARP clinic and am now virtually muscle-pain free. It's nice to feel good again.

—Randy Hebrink, age 48, Renville, MN

I think the treatment is phenomenal. I came out of the University of Minnesota and was told I would never play baseball again because of reconstructive surgery on my left wrist. Using the ARP, I haven't had any trouble since. That and with my ankle this spring, they said I'd be out for six weeks, I wasn't even out a week and a half and I didn't miss any games. I'm a walking case for the ARP; it has helped me every time.

—Kevin Ericson, 22, Minneapolis, MN

More testimonials at www.ARPwaveclinic.com

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