

QLaser Solutions

February 2009

It's the month of Love! Make sure you tell those closest to you how much they mean to you!

Before starting this month, I'd like to bring something to your attention ... and actually get a "vote" from you if possible. Last month, I received an email from a customer nicely telling me to cancel his **QLaser Solutions** subscription because he didn't believe it was socially and environmentally responsible to subscribe to a paper newsletter. What do you think? Would you prefer seeing **QLaser Solutions** as an "email only" newsletter ... or do you prefer getting the old fashioned paper variety. Please let me know by emailing me (kip@rapidnet.com) with your preference. Thanks ... and have a great month! *Kip*

Laser Training with Dr. Larry Lytle

Note: the opinions and ideas presented in the "Laser Training with Dr. Larry Lytle" section of this newsletter are those of Dr. Lytle only. No medical treatment claims are made or implied by the manufacturer of this laser equipment, Business Wizards, Inc., QLaser Solutions, nor any distributor associated with this equipment. This equipment is sold and intended for veterinary use.

A doc was telling a gal that she should not use the laser on her dental implants for some reason, I cannot think of one, but what do you suggest?

Do not use the 808 on dental implants because the energy could bounce off and concentrate and cause a burn. It is OK and desirable to apply the Q1000 and or 660 Enhancer to dental implants. These lasers will speed and enhance healing and boney osseous integration. There is ample research to support this statement.

An excerpt from a forum news... When snoring occurs nitric oxide production is immediate stopped. Nitric oxide is what keeps the lining of all blood vessels healthy. I have not heard of the connection with testosterone, but when you look at viagra it causes the release of NO in the penis. So in treating sleep apnea and snoring patients, you get an increase in NO when you stop the snoring. Some patients report increased libido due to this response. Neural Therapy also increases NO, like when you do scar injection.

Laser wavelengths like those in the Q1000 laser enhances the production of NO from 450 to 900%. NO is responsible for cellular communication along with many other things. I have had very good luck controlling sleep apnea by the following simple technique. (1) Place MBTs – totally flat so as they contact only the lingual cusps of the upper 1st or 2nd molars or

both. Be sure to make them high enough so you can slide a farmer's match between the front teeth. (2) At bed time, place the MBTs – protrude the jaw forward and tape the mouth shut with an "X" from under the chin to the opposite side of the nose using two strips of ¾" or 1" J & J paper tape horizontally across the mouth. Taping the mouth shut over time re-trains the muscles so it is not necessary to do this very long. (3) Apply Mode 1 of the Q 1000 to the throat area. Research shows that those that snore and those with sleep apnea have lost tissue collagen quality – that is the collagen has changed from Type One to Type Three. The laser restores the electrons, re-establishes the DNA and will enhance the production of collagen by up to 75%

A guy called wondering about Dysphagia, which is where when he swallows it doesn't close right and he gets stuff in his lungs, and has pneumonia quite often. Any suggestions or understandings on this condition?

That sounds like a smooth muscle signaling problem which is controlled by the ANS. It is mandatory to place MBTs or EAPG and apply mode 1 of the Q1000 to the esophagus and to the lungs as needed.

Do I need goggles with the QLaser?

In the US the safety of low level lasers is evaluated according to the risk to the eye at 20 cm. The Q1000 laser is rated a Class I laser device which means it has non-significant risk to the eye. It is as safe as the bar code check out machines at the grocery store. The 660 Enhancer Probe is rate Class IIIa which is the same classification as a laser pointer used by lecturers. It will not cause harm to the eye but is not intended to be used in the eyes. The 808 Enhancer Probe is rated a Class IIIb and the FDA says it should not be used in the eyes even though many Ophthalmologists use lasers much

stronger than the 808 in the eyes to treat wet Macular Degeneration. There is a lawyer using the 808 in her own eyes to treat her own wet Macular Degeneration caused by Type 1 Diabetes. Since there is no lateral emission of radiation from the 808, if one practices laser safety, it can be used safely without goggles. The main safety rule is “do not point the 808 either accidentally or intentionally directly into the eyes”. It can be used safely on joints, bones, ligaments, cartilage, and nerves even in the neck and on TMJ – just do not point it into the eyes. If someone cannot follow these simple rules, then they should wear goggles. But according to the Ophthalmologists who treat wet macular degeneration with high powered lasers – even if you accidentally directed the 808 in the eyes – nothing serious would happen.

Leukopalki ? Dental virus or bacteria in mouth? I am sure you know about this, have any other protocols and an understanding of what it is and does?

Leukoplakia is a grade one pre-cancerous condition of the oral mucosa usually inside the cheek or sometimes on the tongue. It is not serious but produces FEAR. If possible pull the cheek back and apply mode 3 of the Q1000 for one cycle directly over the whitish patches every day for one week, then every other day for two weeks, then twice a week until the patches clear up – if they are not able to directly expose the whitish patches to the Q1000 – apply through the cheek. Belly Gelly will also help – swoosh it around in the mouth before swallowing.

My mother who is 83, has advanced Parkinson disease. She can't talk, has a feeding tube, can't walk, can't move her body. Will the low level laser therapy help her?

When Parkinson's Disease has advanced this far, it is unknown if the Q Laser system will help or not. There have been satisfactory results in cases that are not so advanced. Whether or not the laser will help depends somewhat on the cognitive thinking ability of the mother and if she wants to get well. If the mother is having pain and is aware of the pain - the laser will help the pain. Nothing is impossible but when a disease has advanced to this level, it is much harder – almost a miracle to get totally well.

My wife suffers from Sjogren's Syndrome where she is not able to produce saliva or tears. She is in her 60s and has been dealing with this for about 10 years. I know it is classified as Auto Immune Disease but I was wondering if you had any experience or any insight.

Sjogren's Syndrome is an Autonomic Nervous System Dysfunction. In the absence of Miracle Bite Tabs apply the Q1000 mode 1 to proprioceptive points 1 -4 daily or

as needed to keep muscles released - a longer term solution is to place Miracle Bite Tabs and apply the Q1000 laser.

Prevention and Maintenance

During the political campaign both Senators McCain and Obama emphasized prevention as part of their health care plan but they didn't say what prevention consisted of.

The US spends more money (4 billion a day), has more hospitals, rehabilitation centers, nursing homes, doctors, specialists, alternative care practitioners, physical therapists, nurses, nurse's aids, lab technicians and runs more tests, prescribes more drugs and does more surgery than any other industrialized nation in the world. Still the US is rated near the bottom of the rankings by the World Health Organization for quality of care and longevity – go figure.

Regardless of who pays for a failed health care plan, whether it be the government, private insurance or the individual – it is still a failed health care plan. Billions will be spent on prevention and cleaning up the environment and US citizens will still be sick.

Failure to recognize that your “thinking” is the biggest contaminate in your environment is why the US health care system “sucks”. The US system of cause and effect – get a diagnosis – get a second opinion – even a third opinion and go to some big treatment center all increases the “FEAR” level and suppresses the immune system. Then disease flourishes!

The system needs to change by putting the responsibility for good health back on the individual. Then they must be educated about what prevention really is. Start from the basics. You are composed of trillions of cells made up of atoms which have a positive charged proton and negative charged electrons. When you lose electrons (the greatest physicists in the world do not know why the electron leaves its orbit around the proton) then you become acidic and subject to illness starting at the cell level – long before diagnosis can detect anything. You can restore cellular energy balance by positive thinking, meditation, breathing rhythms, moderate exercise, Yoga and the Q Laser System.

Controlling your thinking is very difficult. You can not tell someone - don't be afraid. Telling them only brings attention to the disease and heightens their fear level. Even people that have lived together for a life time do not know what the other is thinking. Learning to meditate and breathe correctly were the hardest things I had to master. It took years of practice and discipline.

The easiest way to restore lost cellular energy and to maintain it is with the Q1000 laser. It takes only min-

utes and once the energy is restored it can be maintained by applying the Q1000 laser every other week for the rest of your life. See prevention/maintenance in your Low Level Laser User's Manual. You will learn that using two Q1000 lasers simultaneously enhances the prevention process.

Remember; don't leave home without your lasers. Don't wait until you are sick or something hurts – practice the best prevention there is – keep cellular energy balance by applying the Q1000 laser on a regular basis.

Research

Study Indicates One In Four Recently Approved Biological Drugs Trigger Safety Warnings After Coming On The Market. USA Today (10/22, Rubin) reports that about "one in four recently approved products in a relatively new class of medicines needed some type of regulatory action because of safety issues that arose after they came on the market," according to a study published in the Oct. 22/29 issue of the Journal of the American Medical Association. Thijs Giezen, Pharm.D., of the University of Utrecht in the Netherlands, and colleagues, arrived at this conclusion after focusing "on 174 medicines called biologicals that were approved in" the U.S. and/or the EU "between January 1995 and June 2007."

Nearly Half Of Americans Will Develop Osteoarthritis. A landmark government study released in 2008 suggests nearly one in two people (45 percent) will develop painful knee osteoarthritis (OA) over their lifetime, with the highest risk among those who are obese. The study was conducted using data from the Johnston County Osteoarthritis Project, a long-term study of black and white women and men age 45 years or older living in rural North Carolina. It is one of the largest longitudinal studies to monitor the onset and progression of knee and hip OA in this country. Symptoms were determined through a question about each knee: "On MOST days do you have pain, aching, or stiffness in your LEFT (or RIGHT) knee?" Radiographic knee OA was determined by taking X-ray views of both knees, which were read by a radiologist and scored using the Kellgren/Lawrence (K/L) scale. Symptomatic knee OA was defined as a K/L grade of ≥ 2 (at least mild radiographic OA) and symptoms in the same knee. The study found that 60.5 percent of obese individuals – that is, those having a body mass index (BMI) greater than 30 – will develop symptomatic knee OA over their lifetime. The study also found that those with a prior knee injury were also at high risk, with a probability of developing the disease over their lifetime of 57 percent. "Weight loss can lead to a decreased risk

of symptomatic knee OA, and the association between the modifiable risk factor, BMI, and lifetime risk of OA in this study further underscores the need for public health weight loss and management interventions that would contribute to a decreased lifetime risk of OA," conclude the study authors. "While Americans are looking forward to longer life expectancies than ever before, the reality is that they will also be facing many more years of pain and disability," said John H. Klippel, M.D., president and CEO of the Arthritis Foundation. "Obesity in this country is at an all-time high, putting millions at risk for disabling arthritis. Coupled with sedentary lifestyles and an aging baby boomer population, we are facing a public health crisis if Americans and Congress don't take action."

Biochemical And Immunological Induces Of The Blood In Parkinson's Disease And Their Correction With The Help Of Laser Therapy. Komel'kova LV, Vitreshchak TV, Zhirnova IG, Poleshchuk VV, Stvolinskii SL, Mikhailov VV, Gannushkina IV, Piradov MA. The influence of laser therapy on the course of Parkinson's disease (PD) was studied in 70 patients. This influence appeared adaptogenic both in the group with elevated and low MAO B and Cu/Zn SOD activity. Laser therapy resulted in reduction of neurological deficit, normalization of the activity of MAO B, Cu/Zn-SOD and immune indices. There was a correlation between humoral immunity and activity of the antioxidant enzymes (SOD, catalase). This justifies pathogenetically the use of laser therapy in PD. Bull Exp Biol Med. 2003 May;135(5):430-2.

Laser Modification Of The Blood In Vitro And In Vivo In Patients With Parkinson's Disease. Vitreshchak TV, Mikhailov VV, Piradov MA, Poleshchuk VV, Stvolinskii SL, Boldyrev AA. Institute of Neurology of the Russian Academy of Medical Sciences, Moscow. The effect of He-Ne laser radiation on activity of MAO B, Cu/Zn-SOD, Mn-SOD, and catalase in blood cells from patients with Parkinson's disease was studied in vivo and in vitro. The effects of intravenous in vivo irradiation (intravenous laser therapy) were more pronounced than those observed in similar in vitro experiments.

Half Of Primary-Care Doctors In Survey Would Leave Medicine. Source CNN.com -- Nearly half the respondents in a survey of U.S. primary care physicians said that they would seriously consider getting out of the medical business within the next three years if they had an alternative. In the survey, released by the Physicians' Foundation, of the 12,000 respondents, 49 percent said they'd consider leaving medicine because there's too much red tape generated from insurance.

New Testimonials

The Q1000 I bought has helped my wife's neuropathy a lot. Malvern Hasha, Conroe, TX

I can tell you right now "YOU WILL NOT BE GETTING THESE MACHINES BACK UNLESS THEY BREAK OR WEAR OUT!!!!!" Before we bought we talked about all the people we would love it too. Ha HA. It is not getting out of my sight. When the pain hits, "I WANT MY FIX AND I WANT IT NOW!!!" How selfish I have become. I just have lived with pain for so long and I don't want it anymore. Char Baumer as told to Dr. David Gawain (Distributor)

Qin just informed me that she was able to get full reimbursement for the purchase of her Q1000 from her Medical Flex Account at Stamford University. Qin Zhou as told to Veronica Faulseit (rep)

In November 2006 I developed this tremendous pain in my ankle as though I had sprained it, but without a fall. I have osteoporosis, and wondered if it was connected. The hospital A&E were not concerned, and then it happened again a few weeks later, as if I had sprained a sprain. The physiotherapy I had made slow progress, so I consulted an orthopaedic surgeon who wanted to operate by breaking my heel bone to realign the foot, and take tendons from my toes to put them in my ankle.

The diagnosis was Johnson's Tendinopathy, in other words my Achilles tendon was inflamed. Otherwise he said I might have to try having an iron brace on my foot.

I was most reluctant to have an operation with so many delicate bones in my foot, and I was uncertain about my ability to handle a general anaesthetic given my dormant cancer. The thought of an iron brace did not appeal either. Dr Callebout recommended Low Level Laser Therapy, and that is what I decided to do.

I started off with a pain level of 10/10, with the highest score being 10. In the beginning I could not touch my ankle without pain, and could not bear to have bedclothes touching it either. After three weeks of using the Q1000 and the 808 probe my pain level came down to 2/10, and the sensitivity to touch went. 50% of the improvement was in the first week, and after that it was more gradual. The inflammation has gone right down, and I can walk so much better. During the second month, during which I reduced treatment time considerably, the pain went entirely, except for a dull ache when lying in bed with bedclothes touching the foot.

Muriel Robinson

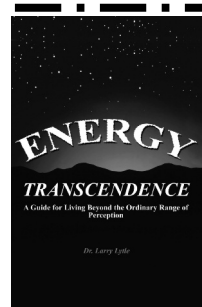
We are both using our lasers and having great luck with them. I often say I think they're keeping us alive. Lately I've been having a problem with I think carpal tunnel syndrome so my laser is working overtime and the problem is becoming less and less of a problem. Len phoned you some time ago when he was told he had a basal cell carcinoma. Well, it turned out to be melanoma - on his head. We used the laser before the surgery and since. So far so good, no spread anywhere. And it's almost a year now. Thanks for everything. Len and Mary Bateman

Congratulations, Dr. Lytle! Your book on *Energy Transcendence* is the best of its kind. I wished I had read it years ago. It made me understand at lot of actions I took in my life. Best wishes, Werner Gubelin

Energy Transcendence

is written for all who seek a better understanding of how to transcend the energy of negative experiences into positive outcomes, and gives you answers to pave your own road to a happier,

healthier you. When you follow the programs outlined, you'll find yourself lead to the abundant life we're put on earth to experience. The predictable outcome of understanding *Energy Transcendence* will be increased abundance and peace in your life. Such a life can be yours - not for the taking, but for the doing!



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