



## Nielsen Syndrome

The Nielsen Syndrome is a complex and powerful way to treat breast cancer. It evolved over a year of treating a good friend and client who had her cancer activate after being quiet for 13 years.

### **The Client:**

I discovered this piece one morning in 2003 in a telephone session with my oldest friend, Denise Nielsen. Her pulse was constricted and shallow weakly expressing into her spiritual aspect. Her percentage ranged between 60% and 40% . I dowsed her breast cancer was rooted in her chakras so I begin to study them and developed a chakra scan.

Her chakras read as affected when dowsed but she was not showing as having a soul path congestion, chakra plaque, a chakra cyst or any other blockage. There was no focus on a single current but instead read as a whole to be functioning poorly.

She stated she felt physically compromised, she has a sinus headache with accompanying nausea and has already dry-heaved this morning. She has metastasized breast cancer now affecting the lungs, liver and bones. Her cancer marker is 109 just recently up from 49.

### **Description of the Anatomy Affected:**

We call the 13 crossing points of the incoming triple current and the descending triple current, the core, chakras. They create 13 major energy centers and as the currents cross there is first an implosion in and then an explosion out of great intelligence and strength. This is the result of the triple current streams as they



cross one another at these intersections. This implosion is created when the streams collide in 3 distinct locations. The incoming currents spin in opposing directions than the downward moving currents. The resulting friction causes a toroid reaction in the core pulling in and pushing out. This reaction at the crossing point, creates what we identify as chakras.

The incoming triple current stream is directed through the anterior of the chakra where it can be said that the intentionality chamber is seated. Intentionality means that the purpose and function of the individual chakra is stated here and that the previously somewhat less focused energy becomes highly focused and now knows what it is to accomplish.

As the triple current stream passes through the Core, it becomes informed with the power and direction of the crossing point and exits into the posterior of the chakra which is the receptivity chamber. Receptivity means the blending place or location in the system where the charged focused intention is accepted and now becomes usable for directed action. Without the receptivity of the posterior chakra the highly charged and focused intentionality is too aggressive for the delicate nature of the human physicality to accept and utilize.

We see in the anterior the yang and in the posterior the yin of the human energetic system. On either side of the core and at the exterior of the core sheath are located corridors, one dedicated to wisdom and one to function. Function and wisdom current split out of the intentionality chamber and flood into the side corridors. From here the rest of the newly received and focused 3 intentionality streams travel into the core.



Some of this energy infuses the posterior part of the chakra, the seat of receptivity with the pure un-informed intentionality of this chakra that has not been charged by a transit through the core. It is important to have some of this raw intentionality material in order to dilute the informed intentionality somewhat so that the structure is not over-whelmed. When the chakra currents come into the posterior receptivity chamber from the corridors they effectively cool and calm the entire receptivity chamber. This helps the whole system run smoothly and to act in a blended and balanced fashion.

### **The Syndrome is a Malfunction:**

In the *Nielsen Syndrome* the anterior portion of the chakra will have shrunken in size and pushed in from the corridors to the right and left of the core. The corridors will be swollen and bulging out in a congested manner they appear to be retaining the pure focused intentionality and preventing it from moving into the receptivity chamber of the chakra. As a result, even though the triple stream is traveling through the core, and there is a crossing point implosion that is occurring, the un-informed and diluting energies are bottlenecking in the corridors creating a congestion. This causes the posterior aspect of the chakra to be shrunken in size and texture and the corridor to bloat and swell.

### **System-Wide Impact:**

The impact on the chakra itself is that the energies have now become too harsh for the posterior chakra. The swirling pure in-formed energy in the posterior is essentially eroding the receptivity and making reception impossible. This then causes the Elimination System and filtration anatomy to work too hard.



Ultimately, as over time more and more chakras become affected the entire structure is unable to support material physicality with the gentle subtly that is required. It is as if the subtle structure becomes toxic to the physical body. There is a fine line between healthy and potent energies and overly potent energies that cause a toxic overload and undermine the blended energies process.

### *About the Chakras:*

#### **Symptoms Vary and Healing Steps:**

- *Each chakra has a different Presentation* and because of location a different effect on the physical body producing symptoms.
- There is a *Relationship between the Location and Physical Symptoms* and physical issues that have significance. The physical location will have a story and relationship to the client.
- *Physical Symptoms* will have physical connections
- The *Realization* that comes about in relationship to the physical experience and journey
- *A Description of the Trauma* connected to the body experience and the realization
- The *Healing and Specific Energies* brought into the front of the corridor. This will shift the entire corridor. Place a symbol at the back of the core in the receptivity and balance the energy of the chakra.
- Bring in *Surrender* and break open the blockage. Bring through the symbol, *Clarity* and as the receptivity expanded I brought in *Source Light*.
- When this completed I brought in *Harmonizing the BES and IBWSIB*.



***Role of the Chakras- Defining- issues/ anatomy/ shape:***

- **Chi Pool Chakra: Issue:** issues of anchoring, grounding-  
**Anatomy:** the knees, the calves, and the tip of the spine (the tailbone or coccyx) **Shape:** Circle
  
- **Axis Chakra: Issue:** disconnection from community, groups and the Earth- **Anatomy:** Feet, heels, balls of the feet, toes, lower legs up to knees. **Shape:** Rectangle
  
- **Lunar Chakra: Issue:** focus of career, frustration about path in life-  
**Anatomy:** ankles, knees, sense of balance. **Shape:** Oval
  
- **Root Chakra: Issue:** issues of survival, as well as survival instincts- **Anatomy:** the pelvis and the bladder and reproductive organs, legs. **Shape:** Pentagram
  
- **Dan Tien Chakra: Issue:** issues of personal power and oppression- **Anatomy:** sexual organs, small and large intestines, lower back. **Shape:** Cross
  
- **Solar Plexus Chakra: Issue:** issues of emotional imbalance, inability to process or express emotions- **Anatomy:** vital organs: spleen, gallbladder, pancreas, kidneys, stomach or liver, lower ribcage. **Shape:** Mobius



- **Heart Chakra: Issue:** issues of love- inability or difficulty to give or receive. **Anatomy:** heart, lungs, thymus, upper ribcage- **Shape:** Heart
- **Throat Chakra: Issue:** issues of communication and acknowledgement- **Anatomy:** thyroid, neck, esophagus, trachea, chin, jaw, teeth, larynx, and throat- **Shape:** Merkabah
- **Brow Chakra: Issue:** issues of following your dreams and your larger vision, focus and brain health-**Anatomy:** the brain especially the frontal lobe, the occipital region, brain chemistry, brain, head, eyes, sinuses, nose, ears- **Shape:** Triangle
- **Crown Chakra: Issue:** issue of becoming, thinking, reasoning- **Anatomy:** headaches, pineal gland, skull, scalp, hair- **Shape:** Square
- **Solar Chakra: Issue:** issue of bringing spirit into the life and finding balance between desire and action. **Anatomy:** hands, arms, shoulders- **Shape:** hexagon
- **Star Chakra: Issue:** losing touch with the purpose of life, **Anatomy:** fingers, elbows, forearms **Shape:** Star of David
- **Divine Gate Chakra: Issue:** loss of spiritual meaning and connection **Anatomy:** back of skull, top of the head, kundalini circuit **Shape:** spiral



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## Releasing the Nielsen Syndrome

*This complex release might take the better part of an hour and a half.*

*The chakras will all appear to be diminished in size at the front, swollen in the corridors, and shrunken in the posterior. One will be more pronounced than the others, it can be flattened or fan shaped at the rear and swollen shut or partially closed in the front as well as shut down in the rear of the corridor.*

### Nielsen Syndrome Release

1. Check to see which chakras are being affected.
2. Check for % of awareness of the Nielsen Syndrome
3. Put them in the *order of priority*: from most affected to least affected. Also determine which chakra is *most profoundly impacted*.
4. Interviewing the client, determine the *Physical Symptoms* related to the area of the body.
5. Connect the physical symptoms to the location of the chakra you are focusing on. Dig into the relationship between the chakra and its function- explain this to the client. Draw a connection between the physical symptoms and the history of this area of the body and track it throughout the life to follow the arc of the story evolving.
6. Help the client develop a *Story* about the area of the body, the chakra function and message and how the anatomy has held the historical trauma. This is how the *Realization* comes forward into awareness. This is the Nielsen Syndrome. Support the client to tell the *Story*, experiencing the emotions of the *Realization* and as they do revealing the historical trauma and how it is still remembered in the anatomy of the body.
7. Check for % of awareness of the Nielsen Syndrome
8. Bring in *Surrender* into the front of the affected corridor or corridors.



9. Check to see if the corridor is 100% released
10. Place a thought form of the appropriate symbol (the one associated with the chakra) in the receptivity. Make sure it takes up the entire receptivity chamber.
11. Bring in *Clarity* into the receptivity through the symbol to restore balance and bring the chakra back into alignment. Follow this with *Source Light*.
12. Monitor the release as you bring in the energy.
13. Surround the entire chakra with *ULL*.
14. *Harmonizing the BES*
15. *IBWSIB*



## *Example of a Nielsen Syndrome Story*

### **Building the Story:**

**Determine the brow chakra was the primary chakra:** persistent dull headache for much of the client's life most especially present in the last few days. Zeroing in on the consequence of this dull headache made her acutely aware of the pituitary gland and her capacity for visualizing and seeing into situations.

### **Integrating Trauma into the Story:**

After a profound *trauma*, a shaming and loss experience when she was dumped by her high school boyfriend she began to think of herself as small, as less than she had been before. Her pituitary was then unable to maintain her stand as a big and powerful person. Her metabolic problems began at age 16, ultimately culminating in a loss of the physical body to properly metabolize. Through her 20s, 30s and 40s she experienced large swings in weight and went from skinny to heavy. This caused the brow chakra to eventually appear shrunken inside her head leaving her unable to hold her vision for her life in her body. She was forced to find the big vision of her life from outside of herself. This led her to a profound *Realization*.

### **The Larger Realization:**

She found her own purpose in caring for others. Looking outside of herself she found great value in studying medicine becoming a nurse and finding fulfillment in that profession.



**Allowing the Healing:**

She realized her emotional trauma and the way it had influenced her life. She saw the effect on her body and her life through the years. She was at 100% awareness and I brought in *Surrender* followed by *Clarity*. As I brought these in I visualized the expansion of the anterior portion of the brow chakra holding the thought form of the shape of a triangle against the core in receptivity seeing the *Clarity* stream through it. The corridors simply released as the anterior cleared. I brought in *Source Light* to complete the expansion. *UL&L* followed but I did not *IBWSIB* yet but instead went to the next Nielson Syndrome chakra.